

Appendix 2

Suspected Infectious Disease Outbreak in School / Kindergarten /KG-cum CCC /Child Care Centre NOTIFICATION FORM

To: Central Notification Office (CENO), Centre for Health Protection (Fax: 2477 2770)

NOTE: To enable prompt investigation and control of outbreak, please call CENO by phone (2477 2772) before sending fax notification.

Type of organization: (Please tick one)	<input type="checkbox"/> School*	<input type="checkbox"/> Kindergarten*
	<input type="checkbox"/> Kindergarten-cum-child care centre [†]	<input type="checkbox"/> Child care centre [‡]
Name of organization	_____ (Code o.: _____)	
Address:	_____ _____	
Contact person:	_____ (Post: _____)	Fax: _____
Tel (office hours):	_____	Tel (outside office hours): _____
Total no. of students/children:	_____	Total no. of staff: _____
No. of sick students/children:	_____	(No. admitted into hospital : _____)
No. of sick staff:	_____	(No. admitted into hospital : _____)
Common symptoms: (May tick multiple)	<input type="checkbox"/> Fever <input type="checkbox"/> Sore throat <input type="checkbox"/> Cough <input type="checkbox"/> Runny nose <input type="checkbox"/> Diarrhoea <input type="checkbox"/> Vomiting <input type="checkbox"/> Skin rash <input type="checkbox"/> Blisters on hand/foot <input type="checkbox"/> Oral ulcers <input type="checkbox"/> Others (Please specify: _____)	
Suspected disease:	_____	
Reported by:	_____	Contact tel.: _____
Signature:	_____	Date of fax: _____(dd/mm/yyyy)

* School / KG – fax copy to School Development Section of Education Bureau in their respective districts (Fax: _____)

† KG-cum-CCC – fax copy to Joint Office for Pre-primary Services of Education Bureau (Fax: 3107 2180)

‡ CCC – fax copy to Child Care Centres Advisory Inspectorate of Social Welfare Department (Fax: 2591 9113)