



Gastrointestinal Illness Report Form

Instructions: Please use this worksheet to report to Clark County Communicable Disease Unit via fax or phone a significant increase in school absenteeism resulting from gastrointestinal related illness (WAC 246-110-020).

When to report:

Please report each day throughout the school year when absences of students/staff population are $\geq 10\%$ with similar symptoms of diarrhea and/or vomiting **OR** 2 or more children from the same classroom are absent with diarrhea and/or vomiting within a 24 hour period.

WHAT TO REPORT

For Students	For Staff
Onset Date:	Onset Date:
Number ill with diarrhea and/or vomiting:	Number with diarrhea and/or vomiting:
Total school enrollment:	Total # staff for this building:

- Please consider symptoms of diarrhea and/or vomiting as gastrointestinal illness.

School Information
School: _____ City: _____
Name and title of person reporting: _____
Phone: _____ Email address: _____

Report to: Clark County Public Health, Communicable Disease Unit
Phone: (360) 397-8182 (M-F 8am-5pm) · Fax: (360) 397-8080
<https://www.clark.wa.gov/public-health/resources>

Please refer to the [Infectious Disease Control Guide for School Staff](#) for specific information and instructions regarding the management of the following illnesses in the school setting: Diarrhea, Foodborne Disease, Norovirus (Norwalk-like Viruses).