

Post Earthquake Disease Surveillance System (Govt. of Gujarat and WHO)

Weekly Reporting Form for all Reporting Units

Please fill out this form on every Monday and send it to the Taluka Nodal Officer on the same day

Name of the PHC/CHC/Dispensary/Mobile Clinic/Hospital: _____

Town/Taluka/Block: _____ District: _____

Period included in this report: Monday _____ to Sunday _____

Name and Designation of Reporter: _____

Diseases/Syndromes	New Cases		Deaths	
	Under 5 Years	5 Years and above	Under 5 Years	5 Years and above
Bloody Diarrhoea				
Watery Diarrhoea				
Severe Diarrhoea/ vomiting/ dehydration				
Suspected Malaria				
Confirmed Malaria				
Upper Respiratory Tract Infections				
Lower Respiratory Tract Infections/ Pneumonia				
Measles				
Chicken pox				
Suspected Meningitis				
Acute Jaundice Syndrome				
Suspected Polio/AFP (< 15 years)				
Tetanus				
Scabies				
Fever (unknown)				
Sexually Transmitted Diseases				
Infected Wounds				
Other Communicable Diseases (please specify)				
1.				
2.				
3.				
Total				

Significant change in water & sanitation/ food & shelter/ vector situation:

Any other comments:

Signature: _____ Tel. No.: _____

Suspected Cholera, AFP, Plague, Neonatal Tetanus, Diptheria, Pertusis (Whooping Cough), Leptospirosis and Haemorrhagic Fever cases must be reported immediately to the District Health Authorities (Disease Surveillance Unit, Civil Hospital Compound, Bhuj - Tel: 02832 - 52166, 22307)
Dr D P Solanki, Chief District Health Officer, Kutch - Mobile - 9825015282