
 NATIONAL INSTITUTE FOR COMMUNICABLE DISEASES Division in the National Health Laboratory Service	Centre for Respiratory Diseases and Meningitis	
	1 Modderfontein Road, Sandringham, 2031	
	Tel: +27(0)11 386 6396	Fax: +27(0)11 8829979
	email:ameliab@nicd.ac.za/sibongilew@nicd.ac.za	
VIRAL WATCH: 2018		
PATIENT DETAILS		DOCTOR DETAILS
SURNAME:		
FIRST NAME:		
AGE/DOB:		
SEX:		
DATE SPECIMEN COLLECTED	DD/MM/YYYY	DATE OF SYMPTOM ONSET
		DD/MM/YYYY
CASE DEFINITIONS		
ILI: An acute respiratory illness with a temperature ($\geq 38^{\circ}\text{C}$) and cough, & onset ≤ 10 days		
SPECIMENS REQUIRED		
ILI: Throat and/or nasal swab or NPS in UTM		
SYMPTOMS - please tick		
Fever	Y	N
Recorded temperature	°C	
Number of days since onset		
Cough	Y	N
INFLUENZA VACCINE 2018	Y	N
Date of Vaccine (if applicable)		
UNDERLYING CONDITIONS - please tick		
NONE		
Y	N	
ASTHMA	Y	N
DIABETES	Y	N
COPD	Y	N
HYPERTENSION	Y	N
HEART DISEASE	Y	N
PREGNANT	Y	N
HIV	Y	N
TB	Y	N
CANCER	Y	N
OTHER: Please specify		
ANIMAL CONTACT 7 DAYS BEFORE ONSET		
Y	N	SPECIFY ANIMAL(S):
TRAVEL HISTORY IF ANY		
Y	N	If yes, specify:
Comments		

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