



# Clark County Public Health Chickenpox School Report Form

## Instructions:

Please use this worksheet to report each case of chickenpox identified at your facility to the Clark County Public Health Communicable Disease Unit (per WAC 246-110-010).

<b>Student Information:</b>	Name:	Grade:	DOB:	Date Reported to CCPH:		
Address:	City:	County:	State:	Zip:		
Parent/Guardian Name:	Primary Phone #: ( ) -	Secondary Phone #: ( ) -				
<b>Facility Information:</b>	Facility Name and Address:					
Name and title of person reporting:	Email:	Phone #: ( ) -				
Facility Overview						
Population in (students and staff):		Affected classroom(s):	Whole school			
Have there been other cases at this school within the last 2 months? <input type="checkbox"/> No <input type="checkbox"/> Yes → <i>If yes, list on pg 2.</i>						
Case Information						
What is the student's immunity status?		<input type="checkbox"/> Unknown <input type="checkbox"/> Unimmunized <input type="checkbox"/> History of disease <input type="checkbox"/> Vaccinated → Date(s): 1 <sup>st</sup> dose: ___/___/___ 2 <sup>nd</sup> dose: ___/___/___				
Onset date of rash (if known):		___/___/___				
Last day at school before exclusion:		___/___/___				
Was rash diagnosed by a healthcare provider as chickenpox (if known)?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown Provider Name: _____ Facility Name: _____				
Sibling information:				Vaccinated?		
Name	DOB	Grade	School	Yes	No	Unk

**Submit form to:** Clark County Public Health, Communicable Disease Unit  
Fax: (564) 397-8080

**For questions:** Call the Communicable Disease team at (564) 397-8182 (M-F 8am-5pm)  
Or visit: <https://www.clark.wa.gov/public-health/schools-child-day-cares>



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Demographics			Role and Grade		Symptoms		Case Information	
Name/Phone Number	DOB or Age	Sex (M/F)	Employee or Student (E/S)	Staff Role or Student Grade Number	Blisters/pox (Y/N/U)	Rash Onset Date (mm/dd/yy)	Last day at school before exclusion	Vaccinated (Y/N/U)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								

Y=Yes, N=No, U=Unknown