

Varicella Outbreak Reporting Worksheet

Date of Report to CDC: ___/___/___

State reporting	Name of Person Reporting	Phone	Email	Fax

Please enter the total number of reported outbreaks for the calendar year in this box → Year of report: _____

If more detailed information about each individual outbreak is available, please enter the information in the table below.

Out-break	Dates of outbreak	Outbreak setting (e.g., day care, elementary, middle, high school, etc)	Size of outbreak (total # of cases)	Number of cases in each age group				Number of cases in each lesion category		Vaccination status of cases		Vaccination coverage in setting		Number of laboratory confirmed cases in outbreak	
										# vax		# unvax	1-dose		2-dose
										1-dose	2-dose				
1				<1		15-19		<50							
				1-4		≥20		50-249							
				5-9		Unk		250-499							
				10-14				≥500							
2				<1		15-19		<50							
				1-4		≥20		50-249							
				5-9		Unk		250-499							
				10-14				≥500							
3				<1		15-19		<50							
				1-4		≥20		50-249							
				5-9		Unk		250-499							
				10-14				≥500							
4				<1		15-19		<50							
				1-4		≥20		50-249							
				5-9		Unk		250-499							
				10-14				≥500							
5				<1		15-19		<50							
				1-4		≥20		50-249							
				5-9		Unk		250-499							
				10-14				≥500							
6				<1		15-19		<50							
				1-4		≥20		50-249							
				5-9		Unk		250-499							
				10-14				≥500							
7				<1		15-19		<50							
				1-4		≥20		50-249							
				5-9		Unk		250-499							
				10-14				≥500							

Please email or fax this form annually to Adriana Lopez at CDC: alopez@cdc.gov or 404-315-3398

****PLEASE NOTE: Minimum information requested for reporting is total number of outbreaks per year****