

➡ Please notify to the Regional Medical Officer of Health by telephone, fax or post. ⬅

Public Health Region 1
 Public Health Services
 81 Albert Street, Suite 300
 Moncton, NB E1C 1B3
 Fax: 506-856-3544
 During business hours: 506-856-3220
 After business hours: 506-856-2004

1. PATIENT INFORMATION

Family name: _____
 Given name: _____
 Street address: _____
 Town, village: _____
 Telephone (home): (____) _____ - _____
 Telephone (office/cell): (____) _____ - _____
 Sex at birth: -Male -Female
 Date of birth: YYYY / MM / DD
 Medicare number: _____
 Occupation and workplace or name of school/daycare attended: _____
 Recent travel overseas: -No -Yes
 If yes, specify country: _____
 Country of birth: _____
 Ethnicity: -Aboriginal -Caucasian
-Black -Asian
-Other

2. DETAILS OF CONDITION

How was infection identified?
-Clinical presentation, specify onset date: YYYY / MM / DD
-Contact tracing
-Screening
 Was the patient hospitalized? -No -Yes
 Laboratory confirmation of diagnosis
-Laboratory confirmed
-Linked to laboratory-confirmed case
-Laboratory confirmation pending
-No laboratory confirmation

3. REPORTING PROFESSIONAL DETAILS

Name: _____
 Telephone number: _____
 Affiliation: _____
 Signature: _____
 Date: YYYY / MM / DD

4. CLINICAL COMMENTS

5. Reportable diseases and events

Phone within one hour of identification and write/fax by the end of the next working day

- Anthrax
- Botulism
- Cholera
- Clusters of illness, food, water-borne or enteric
- Clusters of severe or atypical illness respiratory borne
- Diphtheria
- Hemorrhagic fever (viral)
- Influenza caused by a new subtype
- Measles
- Meningococcal infection (invasive)
- Multisystem inflammatory syndrome in children (MIS-C)
- Plague
- Poliomyelitis
- Severe acute respiratory syndrome
- Smallpox
- Unusual clusters of suspect notifiable disease cases or cluster of unknown aetiology
- Yellow fever

Phone within 24 hours of identification and write/fax within seven days

- Acute flaccid paralysis (AFP)
- Brucellosis
- Campylobacteriosis
- Cryptosporidiosis
- Cyclosporiasis
- *Escherichia coli* infection (verotoxigenic)
- Exposure to suspected rabid animal
- Giardiasis
- Guillain-Barré syndrome
- Hantavirus pulmonary syndrome
- *Haemophilus influenzae* infection- all serotypes (invasive)
- Hepatitis A
- Hepatitis B
- Hepatitis E
- Legionellosis
- Listeriosis (invasive)
- Mpox
- Mumps
- Paralytic shellfish poisoning
- Pertussis
- Q fever
- Rabies
- Rubella (including congenital)
- Salmonellosis
- Shigellosis
- *Staphylococcus aureus* foodborne intoxications
- Streptococcus group A infection (invasive)
- Tuberculosis (active)
- Tularemia
- Typhoid
- Unusual illness as per one of the following criteria:
 - presence of symptoms that do not fit any recognizable clinical picture
 - known aetiology but not expected to occur in New Brunswick
 - known aetiology that does not behave as expected
 - clusters presenting with unknown aetiology
- Varicella
- *Vibrio* species pathogenic to humans (other than Cholera)
- West Nile Virus infection
- Yersiniosis

Write within seven days of identification

- Anaplasmosis
- Adverse reaction to a vaccine or other immunizing agent
- Babesiosis
- *Borrelia miyamotoi*
- Chlamydial infection (genital)
- *Clostridium difficile* associated diarrhea (CDAD)
- COVID-19
- Creutzfeldt-Jacob disease (CJD)-Classic and new variant
- Cytomegalovirus (congenital and neonatal)
- Gonococcal infection
- Hepatitis C and G
- Hepatitis (other viral)
- Herpes (congenital/neonatal)
- HIV/AIDS
- Influenza (laboratory confirmed)
- Leprosy
- Leptospirosis
- Lyme borreliosis
- Malaria
- Methicillin resistant *Staphylococcus aureus* (MRSA)
- Pneumococcal infection (invasive)
- Powassan virus
- Psittacosis
- Respiratory syncytial virus (RSV)
- Rickettsial infection
- Streptococcus group B infection (neonatal)
- Suspect case of an existing or new variant of human or animal prion disease
- Syphilis (including congenital)
- Tetanus
- Toxoplasmosis
- Vancomycin- resistant Enterococci (VRE)