## Staff Line Listing G.I. Illness

<table>
<thead>
<tr>
<th>Full Name</th>
<th>D.O.B. D/M/Y</th>
<th>Gender</th>
<th>*Job Description</th>
<th>**Floor/Unit</th>
<th>Onset Date</th>
<th>Influenza Immunization Y or N</th>
<th>Date Immunized</th>
<th>***Symptoms (see below)</th>
<th>Date Specimen Collected</th>
<th>Results (enter in DFA)</th>
<th>Date Last Worked</th>
<th>Date Returned to Work</th>
<th>Duration of Illness</th>
<th>Comments (e.g. works in another location)</th>
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### *** Symptoms & Frequency
- **T** = Temp (specify)
- **F** = Extreme Fatigue
- **C** = Cough (describe)
- **J** = Joint Pain
- **H** = Headache
- **S** = Sore Throat
- **R** = Runny Nose
- **M** = Muscle Aches
- Anything else, specify exact symptom

### *Job Description:
- Dietary
- R.N.
- S.C.A.
- Housekeeping
- Activities
- Laundry
- Maintenance
- PT/OT
- Office
- Other - specify

### **Floor/Unit:
- e.g. 1st, North, All

DC-133 Saskatoon
07/2018

Don’t Wait. ISOLATE!

Saskatchewan Health Authority