

PARASITE CONTACT ROSTER



Acute Communicable Disease Control Program
313 N. Figueroa St., Rm. 212, Los Angeles, CA 90012
213-240-7941 (phone) 213-482-4856 (facsimile)
www.publichealth.lacounty.gov/acd/

DISEASE: Amebiasis Giardiasis Other Waterborne Disease: _____

Index Case Name: _____ Onset Date: __/__/__ Date of 1st (+) specimen: __/__/__

HOUSEHOLD CONTACTS

	Name Relationship	Age DOB	Occupation/ School & Grade	SOS?*	Symptoms?	Onset Date	Comments (Antibiotic Rx, etc.)	Specimen Collection Date		
								Dispensed	Collected	Results
1	_____									
2	_____									
3	_____									
4	_____									
5	_____									
6	_____									

NON-HOUSEHOLD CONTACTS WITH SIMILAR ILLNESS

	Name	Age DOB	Address City	Occupation/ School & Grade	SOS?*	Symptoms?	Onset date	Comments (day care, etc.)
1								
2								
3								

* Sensitive Occupation or Situation = SOS