

Pertussis requires written notification to the Department of Health upon initial diagnosis within five days to:

Department of Health, Reply Paid 65937, Melbourne VIC 8060 or fax 1300 651 170.

Please ensure the case (1) has been informed of their diagnosis, (2) has been advised that this information is being provided to the department (as required by the *Health Records Act 2007*), and (3) has been informed that the Local Public Health Unit may contact them for further information about their illness. Commonwealth and State privacy legislation does not negate the responsibility to notify the specified conditions or to provide the information requested on this form.

Case details—please answer all questions

Last name

First name(s)

Date of birth Medicare or other healthcare identifier

Sex
 Male
 Female
 Other, specify >

Residential address

City Postcode

Tel home Tel mobile

Parent/guardian/next of kin name and contact number

Is the case of Aboriginal or Torres Strait Islander origin
 No
 Aboriginal
 Torres Strait Islander
 Both Aboriginal and Torres Strait Islander
 Unknown

Country of birth ...country ...year arrived in Australia
 Australia
 Overseas >

Interpreter required
 No
 Yes, language >

Works in or attends a high risk setting
 Child care worker Attends childcare or primary school
 Health care worker Other, specify below

Occupation and/or school and/or child care attended

Clinical details and Risk factors

Has laboratory testing been requested
 No
 Confirmed, specify lab >
 Pending, specify lab >

Pregnancy status
 Pregnant, weeks gestation at diagnosis > estimated due date >
 Not pregnant
 Unknown

Alive/deceased ...date of death
 Alive Died due to pertussis >
 Died due to other causes >

Date of onset of illness

Symptoms (tick all that apply)
 Catarrh, specify onset date >
 Cough, specify onset date >
 Inspiratory whoop
 Post-tussive vomiting
 Other, specify >

Has the case been prescribed appropriate antibiotics
 Yes, specify date commenced >
 No
 Not applicable

Vaccination status for pertussis
 Not vaccinated
 Age-appropriate
 Incomplete
 Unknown

Pertussis-containing vaccine is routinely given at 2 months (from 6 weeks), 4 months, 6 months and 18 months, with boosters at 4 years and in Year 7 or age equivalent, in pregnancy, and catch-up under the National Immunisation Program. Catch-up requirements vary by age; refer to the Australian Immunisation Handbook for further information.

Form continues over page

Notifying doctor/hospital/laboratory details

Doctor/hospital/laboratory name Medicare provider no. Department use only

Address

City Postcode

Telephone Fax Date

Please identify the case on every page

Last name

First name

Date of birth

Clinical details and Risk factors (continued)

Has the case been advised to exclude from primary school/childcare for 21 days after the onset of the cough OR until they have completed 5 days of a course of effective antibiotic treatment as per The Public Health and Wellbeing Regulations 2019

- Yes
No
Unknown
Not applicable

Has the case had contact with infants <6 months of age

- Yes
No
Unknown

Has the case had contact with women in the last month of pregnancy

- Yes
No
Unknown

Have household members been prescribed antibiotic prophylaxis

- Yes
No
Unknown
Not applicable

Antibiotic prophylaxis is recommended for household contacts in the following situations:

- The entire household (regardless of their vaccination status) if there is an infant <6 months or a woman in the last month of pregnancy in the household.
Children aged <7 years who have had <3 doses of a pertussis-containing vaccine.

Have household contacts aged <7 years who have received <3 doses of a pertussis-containing vaccine been advised to exclude from primary school/childcare for 14 days after the last exposure to the infectious case OR until they have taken 5 days of a course of effective antibiotic treatment as per The Public Health and Wellbeing Regulations 2019

- Yes
No
Unknown
Not applicable

Has the case recently travelled interstate or overseas

- No
Yes, specify details below

Form area for specifying travel details.

Clinical comments

Clinical comments / History of illness include any relevant comments (e.g. risk factors, mode of transmission, etc.)

Large form area for clinical comments and history of illness.

Data collection ends here. Thank you.