



Chickenpox (Varicella) Weekly Reporting Form

Please report all cases of chickenpox occurring within a one week period and return the completed form to:

Ottawa Public Health
Communicable Disease Control Program
100 Constellation Drive, 8 East
Ottawa, Ontario, K2G 6J8
Fax: 613-580-9640

Age	Number of Cases by Age
<1	
1-4	
5-9	
10-14	
15-19	
20-24	
25-29	
30-39	
40-49	
50-59	
60>	
Unspecified	
TOTAL	

Name (agency/school /child care facility):

Week of (yyyy/mm/dd):

Signature of person reporting: _____

This information is collected under the authority of the Health Protection and Promotion Act R.S.O. 1990, C.H7, s.5 for the purpose of preventing the spread of communicable diseases in Ottawa. Any questions should be directed to the Communicable Diseases Manager at 613-580-6744 ext 24224.