

Resident Line List Form

Facility/Home/Unit:

Date Declared:

Outbreak #:

Staff Contact Name:

Phone Number:

Case ID	Daily Update (past 24 hours)											Complications		Specimens			Vaccination Status			Additional Precautions		
Resident name: HSN #: Room #:	Baseline temp.	Date	Day of illness (day 0 is onset of symptoms)	Fever	Cough: dry (D) Wet (W)	Runny nose (R); nasal congestion (C)	Sore throat (S) Hoarseness (H)	Headache	Muscle pain	Chest congestion	Malaise (M) Chills (C)	Other	Hospitalization (d/m/y)	Death (d/m/y)	NP Swab – date taken (d/m/y)	Results/VOC	Other	1 st Dose (d/m/y)	2 nd Dose (d/m/y)	Booster (d/m/y)	Start date	Removal date
			Day 0																			
			Day 1																			
			Day 2																			
			Day 3																			
			Day 4																			
			Day 5																			
			Day 6																			
			Day 7																			
			Day 8																			
			Day 9																			
			Day 10																			
			Day 11																			
			Day 12																			
			Day 13																			
			Day 14																			
			Day 15																			
Comments/Diagnosis/Pertinent Respiratory History:													<input type="checkbox"/> Wanderer/non-compliant with precautions									

Resident Line List Form

Purpose: A line list form is a communication tool that has many benefits for managing an outbreak. (Any illness including COVID-19, influenza, the common cold, etc., can be an outbreak and can be documented on this line list.)

	ADVANTAGES:
	It can help determine if there actually is an outbreak. For example, if two or more residents are experiencing identical symptoms and had common contacts, it is likely an outbreak.
	It aids with communications to the staff at shift change e.g., which residents are ill/on isolation/need monitoring.
	It facilitates communications with Public Health/physicians/Medical Health Officer if they are involved.
	It assists with determining when someone can come off isolation/when the home can come off outbreak.
	It provides a guide for the Outbreak Control Team to manage the outbreak.
	The SHA Long Term Care Outbreak guide can be found at CV-19 G0110 Outbreak Guidance - LTC (saskhealthauthority.ca) On Page 23 is a line list for respiratory illness.
	PROCEDURE:
1	When one or more residents are showing signs of respiratory type infection, the staff person in charge will complete the following on the form: <ul style="list-style-type: none"> - Date the list is being populated - If available, include the outbreak number (this is assigned by Public Health). - Name of the resident, room number (if Public Health is receiving a copy of the line list, ensure the resident's health services number is on the form). - Symptoms that the resident is showing e.g., cough, fever, etc. - Add details such as testing and vaccinations as they become known. - Use one form/page per ill resident.
2	TIP - Number the pages if there are several sick residents (page 1 is the first resident identified as being ill, page 2 is the next ill resident and so on if there are more).
3	Do a daily update: <ul style="list-style-type: none"> - Add line list page and information on any new sick residents. - Update symptoms, test results, etc. for those who are currently ill.
4	Keep all sheets together and remember this is confidential health information.
	If Public Health is involved, email or fax a copy – they may want daily updates.
5	Ensure information is being documented on the resident's chart as well.

Note: at the end of the outbreak, the employer should file the line lists according to HIPA regulations and agency policy.