

National Case Report Form

Check one: **MEASLES** **RUBELLA** **CONGENITAL RUBELLA SYNDROME/INFECTION**

IDENTIFICATION

Case Number assigned by province/territory	Health Unit, City & 1st Three Postal Code Digits
Date of Birth If not available, specify AGE in years	YYYY-MM-DD Date Reported to Health Unit YYYY-MM-DD
Sex If FEMALE, pregnant?	FEMALE MALE Date Investigation Initiated YYYY-MM-DD Yes No Unknown

BACKGROUND, EXPOSURE & CLINICAL INFORMATION

MEASLES incubation period is 7-21d prior to onset of rash; communicable 4d before to 4d after rash onset		RUBELLA incubation period is 14-21d prior to onset of rash; communicable 7d before to min. 4d after rash onset	
Date of Rash Onset	YYYY-MM-DD	Vaccination History	Yes No Unknown
Clinical illness and epidemiologic link to a lab-confirmed case	Yes No	Date dose 1	YYYY-MM-DD
		Date dose 2	YYYY-MM-DD
		Date dose 3	YYYY-MM-DD
Hospitalized Due to measles/rubella or due to disease complications	Yes No Unknown	Outbreak associated	Yes No Unknown
Source: outside Canada OR in Canada, linked to an imported case/chain OR in Canada, linked to case/chain of unknown source OR unknown source			

In the space provided or attach a sheet:

- list all countries, dates of travel and setting(s) of exposure during incubation and communicable periods
- if new to Canada, note country of birth and/or year of immigration
- any other lab or exposure information

LABORATORY INFORMATION

measles virus isolated	Yes	No	Not Done	rubella virus isolated	Yes	No	Not Done
measles virus detected	Yes	No	Not Done	rubella virus detected	Yes	No	Not Done
significant rise/change in measles-specific antibody	Yes	No	Not Done	significant rise/change in rubella-specific antibody	Yes	No	Not Done
positive measles-specific IgM serology*	Yes	No	Not Done	positive rubella-specific IgM serology*	Yes	No	Not Done

* Cases with no epidemiologic link to a lab-confirmed case nor with recent travel history to an area with known disease activity must be lab-confirmed by virus isolation or convalescent serology

All cases diagnosed within Canada, regardless of citizenship, should be reported to the Public Health Agency of Canada.

PLEASE SEND YOUR DETAILED PROVINCIAL/TERRITORIAL FORM FOR CONGENITAL RUBELLA SYNDROME/INFECTION