

Health Facility Name: _____
Date (dd/mm/yyyy): _____

COVID and other Viral Respiratory Illness weekly reporting - Health Centres

Please complete the table for your community for **Last Week** (Sunday to Saturday).

Community (choose from dropdown)	---	Reporting for week:
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Reporting for COVID-19

# of medevacs due to COVID	# of hospital admissions due to COVID	Were any of the following seen due to COVID in your community? (Y or N or U for each)	Comments
		School absenteeism Yes No	
		Cancelled community events Yes No	
		Increased visits or calls to Health Centre Yes No	
		Other Yes No	

Reporting for other viral respiratory illness (e.g. influenza or RSV)

# of medevacs due to other VRI	# of hospital admissions due to other VRI	Were any of the following seen due to other VRI in your community? (Y or N or U for each)	Comments
		School absenteeism Yes No	
		Cancelled community events Yes No	
		Increased visits or calls to Health Centre Yes No	
		Other Yes No	

- Use the dropdown to add the **community name**.
- Complete the **Reporting Week date** using the format 05-09-2021 to 11-09-2021 (Sunday to Saturday of the previous week).
- Add the numbers to the box below each heading
- Comments are optional, but can be added to help the RCDC and the office of the CPHO understand the burden of VRI in your Health Centre and community.
- **After completing the table, save the page and email it to the RCDC for your region:**

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