



EMPLOYEE Positive COVID-19 Reporting Form
Residential Care Facilities
*Any employee positive for COVID-19 must be reported to
 Ingham County Health Department Communicable Disease (CD).*

Complete and fax this form to (517) 887- 4379. Call (517) 887- 4308 if unable to fax.
 You will receive a follow up phone call from a CD Nurse. Please call (517) 887- 4308 with any questions.

Facility Information

Name of Facility: _____

Address: _____

Phone #: _____ Contact Person/Title: _____

Employee Information

| Name of Employee | DOB | Phone # |
|------------------|-----|---------|
| | | |

Job Title and/or Role (please explain the employee's type of exposure to residents and other employees)

| Date Onset of Symptoms | Was the known exposure offsite of the facility? | Last Day at Work |
|---|---|------------------|
| _____ <input type="checkbox"/> Asymptomatic | <input type="checkbox"/> Onsite <input type="checkbox"/> Offsite <input type="checkbox"/> Unknown | |

TEST RESULTS of Employee

| Test Date | Type of Test | Result | Location Name |
|-----------|---|---|---------------|
| | <input type="checkbox"/> Antigen <input type="checkbox"/> PCR | <input type="checkbox"/> Negative <input type="checkbox"/> Positive | |
| | <input type="checkbox"/> Antigen <input type="checkbox"/> PCR | <input type="checkbox"/> Negative <input type="checkbox"/> Positive | |

Close Contacts While at Work: A close contact is defined as being within approximately 6 feet (2 meters) of a COVID-19 case for 15 minutes including brief encounters in a 24-hour period totaling 15 minutes or more. Or, having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on), or having direct physical contact with the person (hugged or kissed them), or the person shared eating or drinking utensils with the positive COVID-19 employee.

- List any close contact**, as described above, going back 48 hours prior to symptom onset or test date if the COVID-19 positive person was without symptoms. If it has been at least 2 weeks since the close contact completed their COVID-19 vaccine series, they are not considered a close contact and DO NOT need to be added to the list.
- Quarantine all residents** for 14 days regardless of their known vaccine status. **Others:** If it has been at least 2 weeks since the close contact completed their COVID-19 vaccine series AND are asymptomatic, they DO NOT need to quarantine.

| Name | Phone # | Date Exposed |
|------|---------|--------------|
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Notes (if applicable)

Person Completing Form/Title: _____ Date: _____