Meningococcal Disease Surveillance Worksheet
(Abbreviated Worksheet Option)

Local Use Only

Name (Last, First)	Hospital Record No.			
Address (Street and Number)	City	County	Zip	Phone
Reporting Physician/Nurse/Hospital/Clinic/Lab	Address		Phone	

·········· **DETACH HERE and transmit only lower portion if sent to CDC** ··········

State (residence of patient)

County (residence of patient)

Hospitalized (if yes, date of admission)
Y=Yes
N=No
U=Unknown
☐ Month ☐☐ Day ☐☐ Year ☐☐

State ID ☐☐☐☐

CDC ID ☐☐☐☐

Date of birth ☐☐ ☐☐ ☐☐ Month Day Year

Age ☐☐☐ 999=Unknown

Is *Age* in days/wks/mos/yrs?
☐ 3=Days 0=Years
2=Weeks 9=Unknown
1=Months

If <6 years of age, is patient in daycare?
☐ 1=Yes
2=No
9=Unknown
Daycare is defined as a supervised group of 2 or more unrelated children for >4 hours/week

Race
☐ A=Asian/Pacific Islander O=Other
B=African American W=White
N=Native American/Alaskan Native U=Unknown

Sex
☐ M=Male
F=Female
U=Unknown

Ethnic Origin
☐ H=Hispanic
N=Non-Hispanic
U=Unknown

Outcome
☐ 1=Survived
2=Died
9=Unknown

Type of infection caused by organism (check all that apply)

1 ☐ Primary Bacteremia
2 ☐ Meningititis
3 ☐ Otitis Media
4 ☐ Pneumonia
5 ☐ Cellulitis
6 ☐ Epiglottitis
7 ☐ Peritonitis
8 ☐ Pericarditis
9 ☐ Septic Abortion
10 ☐ Aminonitis
11 ☐ Septic Arthritis
12 ☐ Conjunctivitis
13 ☐ Other

Bacterial species isolated from any normally sterile site

☐
1=*Neisseria meningitidis*
2=*Haemophillus influenzae*
3=Group B *Streptococcus*
4=*Listeria monocytogenes*
5=*Streptococcus pneumoniae* (pneumococcus)
6=Other bacterial species

Specimen from which organism isolated (check all that apply)

1 ☐ Blood
2 ☐ CSF
3 ☐ Pleural fluid
4 ☐ Peritoneal fluid
5 ☐ Pericardial fluid
6 ☐ Joint
7 ☐ Placenta
8 ☐ Other normally sterile site

Date first positive culture obtained (date specimen drawn)

☐☐ ☐☐ ☐☐
Month Day Year

Neisseria meningitidis—what was the serogroup?
☐
1=Group A 5=Group W135
2=Group B 6=Not groupable
3=Group C 8=Other
4=Group Y 9=Unknown

If *N. meningitidis* was isolated from blood or CSF, was it resistant to

Sulfa?
☐ 1=Yes
2=No
9=Not tested or unknown

Rifampin?
☐ 1=Yes
2=No
9=Not tested or unknown