

**Format for instantaneous reporting of Early Warning Signal / outbreaks
as soon as it is detected**

State :

District:

Date of reporting:

Is there any unusual increase in Cases/Deaths or unusual event in any area? Yes/No
If yes, provide the following information:

Disease/ Syndrome (Provisional/Confirmed)	
Area affected (Block, PHC, Sub-center, Village)	
No of cases	
No of deaths	
Date of start of the outbreak	
Total population of affected area(Village)	
Salient epidemiological observations	
Lab results (type of sample, number of samples collected and tested, What tests, where, results)	
Control measures undertaken (Investigated by RRT or not)	
Present status	
Any other information	

* State SSU need to report instantaneously as well as weekly compilation on every
Monday to the CSU including NIL reports.