

Format A - for surveillance of Passenger for 2019-nCoV (To be filled by District Surveillance Unit and send to SSU daily)

Full Name:	
Age in years:	
Gender:	
Passport number:	
Complete Address (For Indian passport holders)	
Place of Stay during visit (For International tourists)	
Landline number with STD code (In India)	
Mobile number (In India)	
Countries visited in last 28 days	
Date of departure from 2019-nCoV affected country	

Passenger History:

Clinical details: write 'N' for No & 'Y' for Yes

Day	Date	Fever	Cough	Day	Date	Fever	Cough
1				15			
2				16			
3				17			
4				18			
5				19			
6				20			
7				21			
8				22			
9				23			
10				24			
11				25			
12				26			
13				27			
14				28			

In case of any symptoms the passenger should be immediately isolated at designated hospital

Filled by.....