simcoe muskoka
DISTRICT HEALTH UNIT

Child Care Centre Illness Tracking Form

www.simcoemuskokahealth.org/childcare
SMDHU Health Connection Line | 705 715-7520 ext. 8809

Facility Name:_____

Room:_____

Date	Name	Diarrhea	Vomiting	Nausea	Fever	Cough	Runny Nose	Nasal Congestion	Rash	Tiredness	Other	Return Date	Comments