

AVIAN INFLUENZA SYMPTOM MONITORING LOG

Track your symptoms for 10 days

Use this log to record any respiratory symptoms and fever/temperature for 10 days from the date of exposure.

If you become symptomatic, you should contact your local health department immediately.

DATE OF EXPOSURE:

____ / ____ / ____

RESPIRATORY SYMPTOMS

- Cough
- Sore throat
- Shortness of breath
- Difficulty breathing
- Conjunctivitis (red/inflamed eyes)

DAY 1

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____

DAY 6

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____

DAY 2

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____

DAY 7

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____

DAY 3

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____

DAY 8

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____

DAY 4

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____

DAY 9

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____

DAY 5

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____

DAY 10

____ / ____ / ____

SYMPTOMS: Yes or No

If yes, please list: _____

FEVER >100°F: Y/N _____