

Ship name:

Voyage #:

Voyage start date (MM/DD/YYYY):

Voyage end date (MM/DD/YYYY):

Close Contact In					
Close Contact ID#	Close Contact Initials (e.g., Jane Doe = JD)	Traveler type (crew or passenger)	Date of Birth (MM/DD/YYYY)	Country of Residence	Embarkation Date (MM/DD/YYYY)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
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20					

- 1
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- 14
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- 16
- 17
- 18
- 19
- 20

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Disembarkation Date (MM/DD/YYYY)	Case initials (e.g., Jane Doe = JD) this close contact was exposed to	If known, how was contact exposed (i.e., cabinmate, dining mate, travel companion, shared excursion, etc.)?	Does person have risk factors	Is person fully v
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This worksheet is to be used for close contacts* of lab-confirmed COVID-19 case:

Vaccine History				Imr	
Vax Dose #1 Date (MM/DD/YYYY)	Vax Dose #1 Manufacturer	Vax Dose #2 Date (MM/DD/YYYY)	Vax Dose #2 Manufacturer	Was close contact tested for COVID-19?	Type of testing received

***CDC close contact definition**

**if end of quarantine test result is positive, this close contact is now a case and as a case on the EDC form*

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mediate Contact Testing

Date specimen collected (MM/DD/YYYY)	Testing result	If positive, was this close contact (now a case) reported via EDC?	Was close contact quarantined?	Quarantine Start Date (MM/DD/YYYY)
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It must be reported

Quarantine History & End of Quarantine Testing					
End of Quarantine Test Date (MM/DD/YYYY)	End of Quarantine Test Type	End of Quarantine Test Result	Quarantine End Date* (MM/DD/YYYY)	If close contact disembarked while in quarantine, disembarkation test type?	Disembarkation Day Test Date (MM/DD/YYYY)

Disembarkation Day Test Result	If positive, was this close contact (now a case) reported via EDC?