

Ship name:
Voyage #:
Current voyage start date (MM/DD/YYYY):
Current 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					
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Disembarkation Date (MM/DD/YYYY)	Case initials (e.g., Jane Doe = JD) 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

Vaccine History

Vax Dose #1 Date (MM/DD/YYYY)	Vax Dose #1 Manufacturer	Vax Dose #2 Date (MM/DD/YYYY)	Vax Dose #2 Manufacturer	Vax Booster Date (MM/DD/YYYY)	Vax Booster Manufacturer
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*CDC close contact definition

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

COVID-19 cases.

<u>Immediate Contact Testing</u>					
Was close contact tested for COVID-19?	Type of testing received	Date specimen collected (MM/DD/YYYY)	Testing result	If positive, was this close contact (now a case) reported via EDC?	Was close contact quarantined?

t is now a case and must be reported

Quarantine History & End of Quarantine Testing					
Quarantine Start Date (MM/DD/YYYY)	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?