

## **Form 2F: Smallpox Case Primary Contact's Household Members Surveillance Form**

The purpose of this form is to provide a worksheet for the case primary contact's household members to record information about their vaccinations.

**Note:** *The goal is to have the information on Form 2F in a database that can be electronically updated with the date of vaccination for each individual via the vaccination clinic databases. The primary contact's household members should be contacted seven (7) days after the date of vaccination or contacted prior to 7 days if a date of vaccination does not show up in the database after the household has been given Form 2F. They are also provided with a telephone number if they experience a severe adverse reaction similar to the ones shown on the Vaccination Information Statement.*

### **Form 2F: Smallpox Case Primary Contact's Household Members Surveillance Form**

#### **Section I: Case Information (Filled out by Interviewer)**

1. **\*Case #:** Enter the 2-letter abbreviation for the state and write the unique identifier # for the case from Form 2D.

#### **Section II: Primary Contact Information (The questions marked with an asterisk are filled out by the interviewer.)**

2. **\*Date of household visit:** Enter the date (MM DD YYYY) of the initial household visit.
3. **Last name:** Enter the last name of the primary contact.  
**First name:** Enter the first name of the primary contact.  
**MI (Middle Initial):** Enter the middle initial of the primary contact.
4. **\*Primary Contact Form 2D#:** Enter the number of the Form 2D: Smallpox Contact Tracing Form for the primary contact.

#### **Section III. Information about Primary Contact's Household Members (Filled out by Primary Contact or Household Member)**

**For all household members of the primary contact record their Form 2D#, last and first names, middle initial, age, sex, date vaccinated and the date seven days after the vaccination.**

5. **Form 2D#:** Enter the number from the Smallpox Contact Tracing Form (Form 2D) that will be used for this household member.
6. **Last name:** Enter the last name of the household member

7. **First name:** Enter the first name of the household member
8. **MI (Middle Initial):** Enter the middle initial of the household member
9. **Age:** Enter the age of the household member in years.
10. **Sex:** Enter the sex of the household member (Male or Female).
11. **Date vaccinated:** Enter the date (MM DD YYYY) the household member was vaccinated.
12. **Call Back Date (7 days after vaccination):** Enter the date (MM DD YYYY) the household should expect to receive a call back to collect information about the vaccination site (“take”). This occurs six to eight days after the date of vaccination.