# Employee Absence or Illness Record

Instructions: Use this log to monitor employee absences due to illness. Tracking absences will enable your establishment to better control the spread of foodborne illnesses. Please review and refer to your establishment's Employee Health Policy. If undiagnosed, refer to the **Foodborne Illness Restriction and Exclusion Guideline.**

| | | *Symptoms Reported to Manager by Employee:* | | *Manager/Employee Response:* | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Date Reported | Employee Name | Vomiting (V), diarrhea (D), jaundice (J), sore throat with fever (ST), infected wounds (IW)?* | Other Symptoms | Date Excluded or Restricted from Work?* | Date Returned to Normal Work Duties? | Consulted with Doctor? Y/N | Diagnosed?** Y/N - If yes, name Illness. | Contacted Health Department? Y/N | Restricted Duties |
| | | ☐V ☐D ☐J ☐ST ☐IW | | | | | | | |
| | | ☐V ☐D ☐J ☐ST ☐IW | | | | | | | |
| | | ☐V ☐D ☐J ☐ST ☐IW | | | | | | | |
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| | | ☐V ☐D ☐J ☐ST ☐IW | | | | | | | |

* If symptoms of vomiting and diarrhea, exclude food employee from work until 24 hours after symptoms end.

** If a food employee is diagnosed with Norovirus, Shiga toxin-producing *Escherichia Coli*, *Shigella* spp., Hepatitis A, *Salmonella* Typhi, *Salmonella* (non-Typhoidal) AND/OR if jaundiced, then exclude and contact the Health District at 702-759-1300.

Southern Nevada Health District

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