

DATA COLLECTION OF INFECTION EPISODES WITH OR WITHOUT DCC  
 ABSENTEEISM IN CHILDREN'S DAY CARE CENTERS

Identification Number	Group:	
Name of Day Care Center	Course: 0-1 year 1-2 years 2-3 years	Classrooms

<b>RESPIRATORY SYMPTOMS</b>			TREATMENT USED	SUPPLEMENTARY TESTS (mark with a cross)	HAVE YOU GONE TO YOUR PEDIATRICIAN OR TO THE EMERGENCY ROOM?
(mark with a cross)	DURATION (IN DAYS)		(Indicate dose and treatment duration in days)		
1- Mucus			For fever or pain Paracetamol (Apiretal®, Febrectal®...) Ibuprofeno (Dalsy®, Junifen®...) Others:  Antibiotic Name:  Antihistamine Polamine®, Zyrtec®, Atarax®, Acrius®...  For cough and mucus (Pectox®, Flutox®, Romilar®, Actithiol®, Flumil®...)  Inhalers (Ventolin®, Flixotide®, Pulmicort®...)  Corticoids (Estilsona®...)  Others:	Analytics  Chest x-ray  Abdominal x-ray  Urine analysis  Stool analysis  Others	Medical consultation: YES  NO  If yes:  Number of primary care/pediatrician consultations:  Number of public emergency room consultations:  Number of private emergency room consultations:  Hospitalization?  How many days?  Torrecardenas Hospital or private medical center
2- Cough					
3- Sneezing					
4- Stuffy nose, noises when breathing					
5- Fever, chills, distempered					
6- Sore throat					
7- Earache					
8- Difficulty breathing					
<b>GASTROINTESTINAL SYMPTOMS</b>					
1- Vomiting					
2- Diarrhea					
3- Abdominal pain					

<b>OTHER CAUSES OF ABSENTEEISM:</b> Specify them			
Start date of absenteeism	End date of absenteeism	Total length	

DIAGNOSIS (According to symptoms collected by parents)

MEDICAL DIAGNOSTIS: Yes/No

SIDE EFFECTS OF HAND SANITIZER OR LIQUID SOAP: