



Missouri Department of Health and Senior Services
 Division of Environmental Health and Communicable Disease Prevention
Laboratory-Confirmed Influenza Weekly Worksheet for Local Public Health Agencies

Jurisdiction (County of Residence) _____								Week beginning (Sunday Date) _____		
Age Group	Influenza Type	Reporter Names						Weekly Total	Influenza Type	Age Group
0 - <02 yrs	Influenza A							0	Influenza A	0 - <02 yrs
	Influenza A Novel							0	Influenza A Novel	
	Influenza B							0	Influenza B	
	Untyped/Unknown							0	Untyped/Unknown	
02 - 04 yrs	Influenza A							0	Influenza A	02 - 04 yrs
	Influenza A Novel							0	Influenza A Novel	
	Influenza B							0	Influenza B	
	Untyped/Unknown							0	Untyped/Unknown	
05 - 14 yrs	Influenza A							0	Influenza A	05 - 14 yrs
	Influenza A Novel							0	Influenza A Novel	
	Influenza B							0	Influenza B	
	Untyped/Unknown							0	Untyped/Unknown	
15 - 24 yrs	Influenza A							0	Influenza A	15 - 24 yrs
	Influenza A Novel							0	Influenza A Novel	
	Influenza B							0	Influenza B	
	Untyped/Unknown							0	Untyped/Unknown	
25 - 49 yrs	Influenza A							0	Influenza A	25 - 49 yrs
	Influenza A Novel							0	Influenza A Novel	
	Influenza B							0	Influenza B	
	Untyped/Unknown							0	Untyped/Unknown	
50 - 64 yrs	Influenza A							0	Influenza A	50 - 64 yrs
	Influenza A Novel							0	Influenza A Novel	
	Influenza B							0	Influenza B	
	Untyped/Unknown							0	Untyped/Unknown	
65+ yrs	Influenza A							0	Influenza A	65+ yrs
	Influenza A Novel							0	Influenza A Novel	
	Influenza B							0	Influenza B	
	Untyped/Unknown							0	Untyped/Unknown	

Please record any laboratory-confirmed influenza in one of the blanks above. Enter weekly totals (>0) in the WebSurv Case Summary Reporting Application by close of business each Monday.