EpiTrax Outbreak Request Form

Jurisdiction:_____

Outbreak Name: _____

See naming instructions on page 2

Type:

☐ State Outbreak

☐ Local Outbreak

Agencies/Counties included in outbreak:

☐ Carson City	☐ Lincoln
☐ Churchill	☐ Lyon
☐ Nevada DHHS	☐ Mineral
☐ Douglas	☐ Nye
☐ Elko	☐ Pershing
☐ Esmerelda	☐ SNHD
☐ Humboldt	☐ Washoe
☐ Lander	☐ White Pine

Disease(s): _____

Date Outbreak Identified (mm/dd/yyyy):_____

Description:_____

Requester:_____

Outbreak Naming Scheme

Outbreak names should include the following:

- Year of outbreak
- Specific outbreak location
- Condition related to outbreak

They should be compiled as (Year)_(Location)_(Condition)

For example, for a COVID-19 outbreak at the Alta Skilled Nursing Facility Rehabilitation Center in 2020, the outbreak code would be 2020_ALTASNFREHAB_COVID

Please contact NVEpiTrax@health.nv.gov for questions regarding existing outbreaks and outbreak naming conventions.