

ALLEGAN COUNTY HEALTH DEPARTMENT

3255 – 122nd Ave., Suite 200, Allegan, MI 49010

Office Administration

(269) 673-5411 | Fax (269) 673-4172

Planning and Preparedness

(269) 673-5411

Personal Health

(269) 673-5411



Communicable Disease

(269) 673-5411

Environmental Health

(269) 673-5415

Resource Recovery

(269) 673-5415

**Healthcare Provider Influenza and
Influenza-Like-Illness Weekly Reporting Form
October 2024 – May 2025**

Per Michigan’s Communicable Disease rules, individual reports are required within 24 hours when influenza is suspected to have caused or contributed to mortality in a person aged less than 18 years, or if the infected individual traveled outside of North America within the 2 weeks prior to symptom onset.

Otherwise, aggregate reporting is required.

Facility/Physician Reporting:

Week (Sunday through Saturday) ending _____ (ex: 10/12/2024)

Influenza-like Illness (Fever of ≥ 100 F (37.8 C) **AND** cough and/or sore throat in the absence of a known cause, other than influenza):

Weekly Total: _____

Positive Rapid Influenza Tests:

Weekly Total Influenza Type A: _____

Weekly Total Influenza Type B: _____

Weekly Total (Not Typed): _____

Please FAX this form to the Allegan County Health Department at 269-673-2163 or email to communicabledisease@allegancounty.org once weekly during “Flu Season” (October – May), so that we can report the information to the Michigan Department of Health and Human Services (MDHHS).

THANK YOU!

(This Report Form can also be found at www.allegancounty.org/health. Search Personal Health - Communicable Disease - Resources)