# Annex VI Template Form Legionalla Infection

Annex VI

**Annex VI Template Form Legionalla Infection**

**General**

|  |  |  |
| --- | --- | --- |
| **A: Who reports infection?** | **B: Where has Legionella been discovered?**  **Information collective installation** | **C: Information owner collective installation** |
| Date report  Name:  Organisation:  Street + no:  PO Box:  Zip Code:  City:  Tel:  Fax:  E-mail: | See: A C  Company/organisation:  Type of installation:  Type of location: | See: A B  Owner:  Street + no:  PO Box:  Zip Code:  City:  Tel:  Fax:  E-mail: |

|  |  |  |  |
| --- | --- | --- | --- |
| Preventive measures Legionella | | date (dd-mm-yyyy) | Made by: |
| Risk analysis: | No  yes | d.d. |  |
| Control plan: | No  yes | d.d. |
| Logbook: | No  yes | d.d. |

**Information infection Name laboratory: Located in:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Sample number* | *Sample name*  *date + place + warm/ cold system* | *Date analysis result* | *Amount kve/litre* | *Serotype* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **Add Analysis Report of laboratory or send forward a.s.a.p. to State Supervision of Mines. Request to report if installation is OK (when Legionella bacteria <1000 KVE/litre).** |

**Measures taken**

|  |  |  |
| --- | --- | --- |
| **Measure yes no** | *If yes, date* | *Explanation* |
| Close in contaminated installation |  |  |
| Modification of installation |  |  |
| Flushing with water > 60 oC |  |  |
| Desinfected with |  |  |
| Other: |  |  |

**Communication**

|  |  |  |
| --- | --- | --- |
| **Activity yes no** | *If yes, date* | *Explanation* |
| Inform users |  |  |
| Inform Municipality |  |  |
| Inform Province |  |  |
| Inform/turn into action GGD |  |  |
| Press release |  |  |
| Other: |  |  |

**Send this form a.s.a.p. to State Supervision of Mines by fax or e-mail (sodm@minez.nl)**