

Signs and Symptoms of Brucellosis

Symptoms	Date Worker Seen at Occupational Health (daily or weekly symptom watch)														Symptom Onset			
																N/A	UNK	Date
Fever (> 100.4 F)	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Sweats	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Chills	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
More tired/less energy than usual	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Severe/persistent headache	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Muscle pains	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Joint pains	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Unintended weight loss	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Loss of appetite	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Vomiting	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Diarrhea	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	
Other: _____	///	///	///	///	///	///	///	///	///	///	///	///	///	///	///	<input type="checkbox"/>	<input type="checkbox"/>	