

PURDUE UNIVERSITY

FOODBORNE ILLNESS REPORT

Date: \_\_\_\_\_

Radiological and Environmental Management (REM) will investigate all potential foodborne illness reports. Food Service should save and refrigerate any suspect food items so that microbiological testing can be conducted. Please provide the following information and forward the completed form to REM as soon as possible.

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_ Location: \_\_\_\_\_  
(Building & Room)

Signs and Symptoms:

Time of Onset: \_\_\_\_\_

Foods Consumed in the Past 24 Hours:

|       |       |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Names of Other Ill:

|       |       |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Notes:

**If you cannot submit this form via email submission you may fax it to (765) 496-2572.**