

## **Health Considerations**

I agree to report to my restaurant manager if I have an illness diagnosed by a health practitioner due to Norovirus, Salmonella (including Typhoid), Shigella, shiga toxin producing or other type of ESCHERICHIA COLI, Campylobacter, or Hepatitis A or E Virus. I agree to report to my restaurant manager if I have been in close contact with someone at home, work or school that is ill with one of these foodborne pathogens.

I agree that I will report to my restaurant manager an onset of the following symptoms\*, including the date of onset while either at work or outside work.

\*diarrhea, vomiting, jaundice, sore throat, a lesion containing pus such as a boil or infected wound that is open or draining even if the lesion is protected and covered

I agree to report to my restaurant manager any Health Department or Board of Health investigation in which I may be involved.

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