

iPHIS User Guide

Outbreak Module: Vaccine Preventable Diseases

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Public Health Ontario

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Introduction

This user guide outlines the data entry requirements for entering cases of vaccine preventable diseases (VPDs) in the Outbreak Module of the integrated Public Health Information System (iPHIS). The user guide covers the following VPDs:

- acute flaccid paralysis (AFP)
- chickenpox (varicella)
- diphtheria
- *Haemophilus influenzae* disease, all types, invasive (Hi)
- measles
- meningococcal disease, invasive (IMD)
- mumps
- pertussis (whooping cough)
- poliomyelitis, acute
- *Streptococcus pneumoniae*, invasive (IPD)
- rubella
- rubella, congenital syndrome (CRS)
- tetanus

These diseases are designated as Diseases of Public Health Significance under [O.Reg. 135/18: 'Designation of Diseases'](#). The provincial surveillance definitions and criteria for case and contact management are outlined in [Appendix A and B of the Infectious Diseases Protocol](#). All cases of VPDs reported in iPHIS must be assessed using the criteria outlined in these appendices.

This user guide makes reference to iPHIS documents (e.g., bulletins), which are available on [Adobe Connect](#) to iPHIS users with an Adobe Connect account. Most of the documents referenced in this user guide are located in the following modules on [Adobe Connect: Bulletins, Documentation and Other User Guides](#), and [OM User Guides](#).

Online training available:

E-learning modules for entering VPD cases in iPHIS are available on Public Health Ontario (PHO)'s [Vaccine-Preventable Diseases webpage](#).

PHO is here to help public health units:

Contact the IVPD team at ivpd@oahpp.ca if you have questions about VPDs and/or data entry requirements in iPHIS.

For technical issues related to iPHIS or to request an Adobe Connect account, contact the iPHIS HelpDesk at 1-866-272-2794 or iphissupport.moh@ontario.ca.

For other VPDs not specified in this user guide (e.g., influenza, rabies, hepatitis A, hepatitis B), refer to the appropriate iPHIS user guide for data entry requirements. For requirements and guidance on entering contacts for VPDs, refer to iPHIS [Bulletin #21](#) (OM Contact Entry) and [OM Contact Entry User Guide](#).

Information required for provincial VPD surveillance

In iPHIS, certain data fields are shown with a red diamond icon (◆). These are system **mandatory (M)** data fields that must be completed before saving the record in iPHIS. There are also additional data fields that are not system mandatory in iPHIS, but are **required (R)** to be reported for provincial VPD surveillance as directed in:

- *The Health Protection and Promotion Act (HPPA), section 7(1)*
- *R.R.O 1990, Regulation 569(Reports), under the HPPA*
- *Infectious and Communicable Diseases Prevention and Control Standard*
- *Infectious Diseases Protocol*
- iPHIS bulletins and user guides
- Active Enhanced Surveillance Directives (ESDs)
- Bulletin #17 – Timely Entry of Cases and Outbreaks

Information from both the **mandatory (M)** and **required (R)** data fields are necessary for provincial VPD surveillance (see [Appendix 1](#)). All mandatory (M) and required (R) data fields are described in this user guide.

Sections and fields that are not mandatory or required (i.e., not marked “M” or “R”) are considered optional. Public Health Units (PHUs) may enter information in the optional fields for their own internal use but PHO will not extract this information from iPHIS for provincial surveillance. Most optional fields are not described in this user guide with the exception of fields that should not be used due to technical issues or because the information should be entered elsewhere, or because additional information is required to describe the field. Should users enter information in optional fields, additional data fields may subsequently become system mandatory and require completion in order to save the record.

Timely entry and completion of VPD cases

In order to perform effective surveillance of VPDs, it is important to enter accurate and complete information on VPD cases in iPHIS in a timely manner as outlined in iPHIS [Bulletin #17](#). For all VPDs covered in this user guide, except AFP, chickenpox and IPD, PHUs must enter the minimum data elements in both the Demographics and Outbreak Management modules of iPHIS within **one business day** of the PHU receiving the initial notification of a case. For AFP, chickenpox and IPD, data should be entered within **five business days**.

Once the investigation is complete, PHUs have **30 calendar days** to complete the data entry and close the case in iPHIS.

Vaccine preventable diseases for special consideration

Measles, rubella and congenital rubella syndrome (CRS)

Measles, rubella and congenital rubella syndrome (CRS) are under enhanced surveillance to meet the Pan American Health Organization (PAHO) Plan of Action for the documentation and verification of their elimination status in Canada. PHO reports cases of these three diseases to the Public Health Agency of Canada (PHAC) weekly through the [Canadian Measles/Rubella Surveillance System \(CMRSS\)](#), including reporting of zero cases. When there are cases to report, information from both the mandatory (M) and required (R) data fields in iPHIS are reported to CMRSS. These data elements include: demographic information, date of reporting, date of investigation, date of rash onset, presence of fever, date of specimen collection, laboratory test results, travel history, and immunization status.

Due to the enhanced surveillance requirements and heightened awareness surrounding measles, rubella, and CRS, adequate investigation must be conducted and documented on **all suspected cases** (i.e., any person under investigation). Timely entry of the mandatory and required data elements in iPHIS greatly enhances the surveillance of these diseases.

Chickenpox (varicella)

Chickenpox (varicella) is reportable at both the individual and aggregate level in Ontario. All cases of chickenpox should be reported as aggregate counts on a monthly basis and should include individual cases that have been entered into iPHIS. For aggregate reporting, see [Appendix 7](#) of this user guide. An e-Learning module for aggregate reporting is also available to registered iPHIS users through [Adobe Connect](#).

As with all VPDs, individual chickenpox cases should be entered following the instructions outlined in this user guide. Reporting requirements for individual chickenpox cases are outlined in both [Appendix A](#) and [B](#). Cases that meet the confirmed case definition (i.e., laboratory-confirmed cases), hospitalized cases, and those cases with complications, including death, should be reported as confirmed cases of chickenpox.

VPD surveillance forms

There are two VPD surveillance forms available to assist healthcare providers and PHUs in collecting information needed for provincial VPD surveillance during case investigation: the [VPD Surveillance Form](#) and the [Measles and Rubella \(MR\) Enhanced Surveillance Form](#). The VPD Surveillance Form was designed to assist in the investigation and management of chickenpox, Hi, IMD, IPD, pertussis and mumps cases. The MR Enhanced Surveillance Form was developed to capture the enhanced surveillance data elements required for documenting elimination of measles, rubella and CRS. The use of these forms is optional; PHUs do not need to submit the forms to PHO.

VPD surveillance at PHO

The Immunization and Vaccine-Preventable Diseases (IVPD) team at PHO is responsible for provincial surveillance of VPDs. The team continuously reviews VPD cases in iPHIS to ensure timely surveillance; therefore, the IVPD team may follow up with PHUs directly if there is missing information or clarification needed for certain cases.

The IVPD team is available to PHU staff for case consultation and can also help clarify VPD reporting requirements, case definitions, and case management processes. The team also develops VPD training and education materials that are available on PHO's [Vaccine-Preventable Diseases webpage](#) and for registered iPHIS users through [Adobe Connect](#).

Contact the team (ivpd@oahpp.ca) if you have any VPD or data entry questions.

1.0 Creating a Case

Special Considerations

Sporadic cases of VPDs can be entered under the provincial VPD-specific sporadic **Outbreak Number** (see [Appendix 2](#)). In certain circumstances, a PHU-specific **Outbreak Number** can be created. Contact the IVPD team at ivpd@oahpp.ca for assistance or refer to the [e-learning module](#) for creating an outbreak in iPHIS.

In general, date values used in this user guide are written in YYYY-MM-DD format.

Steps:

1. Create a new client or update an existing client as per the iPHIS [Client Demographics user guide](#) (or the [Client Demographics e-learning module](#)). A client record must exist in iPHIS before a case can be created.
2. Once the client has been created or found in iPHIS, record the **Client ID** for reference in subsequent steps.
3. From the left navigation menu, select **Outbreak > Management**. The **Outbreak Search** screen displays (see [Appendix 8, screen shot 1.0a](#)).

Enter an outbreak number for the VPD under investigation in the **Outbreak Number** field. For sporadic cases, use the disease-specific sporadic outbreak number listed in [Appendix 2](#).

4. Click **Search**.
5. Click on the **Details** button beside the **Outbreak Name** of interest (see [Appendix 8, screen shot 1.0b](#)). The **Case Search** screen displays.
6. Enter relevant search criteria (e.g., **Client ID** or first and last name) to check if the case has previously been created. The **Health Unit Responsible** field defaults to your PHU; select the blank line at the top of the dropdown list to widen your search to all cases in iPHIS.
7. Click **Search**. If the case is found, proceed to step 7a. If the case is not found, proceed to step 8.
 - a. If the case is found, select the **Details** button to access the **Case Details** screen for that case (see [Appendix 8, screen shot 1.0c](#)). The case **Status** must be set to "OPEN" for a case to be updated.

8. If the case has not yet been created, click the **New Case** button (see [Appendix 8, screen shot 1.0c](#)).
9. Complete a **Client sub-search** by entering the **Client ID** that was noted in step 2, or any other relevant search criteria to search for the client you are creating the case for (see [Appendix 8, screen shot 1.0d](#)).
10. Click **Search**.
11. Click the **Select** button beside the appropriate client that appears through the search.

1.1 Case Details

Steps:

1. Enter the information specified in the quick list below. Refer to [Table 1a](#) for more detailed information (see [Appendix 8, screen shot 1.1](#)).
2. Click **Save**.

Case Details Quick List – Mandatory and Required Data Fields

- | | |
|-------------------------------|------------------------------------|
| • (M) Reported Date | • (M) Classification |
| • (M) Health Unit Responsible | • (M) Classification Date |
| • (R) Assigned Date | • (M) Outbreak Case Classification |
| • (M) Branch Office | • (M) Outbreak Class. Date |
| • (M) Diagnosing HU | • (M) Disposition |
| • (M) Disease | • (M) Disposition Date |
| • (M) Aetiologic Agent | • (M) Status |
| • (R) Subtype | • (M) Status Date |
| • (R) Further Differentiation | • (M) Priority |

All data fields listed above are necessary for provincial VPD surveillance.

Table 1a: Detailed guide for Case Details fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Reported Date	Enter the date the case was reported to the PHU (e.g., through a laboratory report, health care provider). Reported Date should not change when a client is transferred to another PHU; it should remain as the date when the initial PHU became aware of the case.	
M	Health Unit Responsible	Select the PHU currently performing case/contact management and investigation. This should be the PHU most recently assigned to the case. Refer to iPHIS Bulletin #13 for guidance on how to assign Health Unit Responsible and Diagnosing HU in special circumstances (e.g., when the client’s address is unknown, when the client moves, etc.).	All PHUs in Ontario and MOHLTC – PHD (0).
R	Assigned Date	Auto-populates with the date of entry. This field may be changed at the discretion of the PHU.	
M	Branch Office	Select as appropriate.	Values are specific to each PHU.
M	Diagnosing HU	Select the PHU where the client was living when the case was reported to public health. <u>Do not change this when the client moves during case management.</u> Refer to iPHIS Bulletin #13 for more details on assigning the Diagnosing HU .	All PHUs in Ontario and MOHLTC – PHD (0).
O	Onset Date	Auto-populates with the Onset Date of the Symptom that has the Use As Onset indicator checked off (see Section 6.0: Symptoms).	

M/R/O	Field Name	Data Entry Information	Dropdown Values
O	Relevant Immunizations up-to-date for Client	<p><u>Do not use this field to enter immunization information for VPDs covered in this user guide.</u></p> <p>See sections 3.0: Risks Factors and 4.0: Immunizations to enter immunization information.</p>	
M	Disease	Auto-populates.	
M	Aetiologic Agent	<p>Auto-populates.</p> <p>For AFP, select “ACUTE FLACCID PARALYSIS UNSPECIFIED” if a case is under investigation and the Aetiologic Agent is not yet known. Update to the appropriate value when a causative agent has been identified.</p>	
R	Subtype	<p>This field is required for Hi, IMD and IPD. Select as appropriate.</p> <p>If “OTHER (SPECIFY)” has been selected from the dropdown list, enter additional details in the Further Differentiation field. For IMD and IPD, if the subtyping result indicates that the specimen could not be grouped/typed, select “NON-GROUPABLE/TYPABLE”.</p> <p>If subtyping was not done or result is unavailable at the time of data entry, select “UNSPECIFIED” for IPD and IMD, and “undifferentiated” for Hi.</p>	Values are specific to each VPD. Refer to the dropdown list in iPHIS, which is updated periodically.
R	Further Differentiation	<p>This field is required for genotype entry of measles, mumps, and rubella. It is also required for entering additional subtype information for some VPDs as specified below.</p> <p>Use this field to enter one of the following:</p> <ol style="list-style-type: none"> 1. Genotype for measles, mumps, rubella, and CRS in the format of: <i>Sequence name [genotype]</i> E.g., MVs/Ontario.CAN/22.13 [D8] 	

M/R/O	Field Name	Data Entry Information	Dropdown Values
		<p>MuVs/Ontario.CAN/5.18 [G];</p> <ol style="list-style-type: none"> 2. Additional details when “OTHER (SPECIFY)” is selected as Subtype for IMD and IPD; 3. Additional details when an aetiologic agent has been detected for AFP; 4. Additional details using the naming convention written on the laboratory slips (e.g., biotype information for Hi). 	
M	Classification	<p>Select the value that corresponds with the VPD case classification definitions outlined in the VPD-specific Appendix B, Infectious Diseases Protocol.</p> <p>Classification should be updated as information becomes available. Classify the case as soon as there is enough information to support the classification.</p> <p>Case classification is for surveillance purposes and is not considered a diagnosis nor is it intended to reflect public health action (i.e., clinical management of the case/contacts).</p>	<p>CONFIRMED Case meets the confirmed case definition.</p> <p>PROBABLE Case meets the probable case definition (only applicable to some VPDs).</p> <p>DOES NOT MEET DEFINITION Case does not meet the case definition.</p> <p>PERSON UNDER INVESTIGATION (PUI) Case is under investigation and information is not yet available to assign a case classification.</p> <p>SUSPECT CASE Do not use.</p> <p>EPI-LINKED CONFIRMED Do not use. Cases who are epi-linked to a lab confirmed case generally meet the confirmed case definition.</p>

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Classification Date	Enter the date the Classification was determined or changed.	
M	Outbreak Case Classification	For sporadic cases, enter the same value as the Classification field. For outbreak related cases, use the specific outbreak case definitions as appropriate. Contact the IVPD team at ivpd@oahpp.ca for assistance in developing an outbreak case definition.	See Classification above.
M	Outbreak Class. Date	Enter the date the Outbreak Case Classification was determined or changed.	
M	Disposition	Select the value reflecting the current state of the investigation. Value initially auto-populates to “PENDING”. Cases with a Disposition of “LOST TO FOLLOW UP” or “UNTRACEABLE” can still be classified as a “CONFIRMED” case as long as there is enough information to support meeting the case definition.	PENDING Investigation is ongoing and the Status is “OPEN”. Should be updated when Status is changed to “CLOSED”. DOES NOT MEET DEFINITION Do not use. Use the Classification field to indicate that a case does not meet case definition. COMPLETE Investigation/management is complete. CLOSED – DUPLICATE – DO NOT USE Case is a duplicate case and should not be counted. Select “DOES NOT MEET DEFINITION” for Classification .

M/R/O	Field Name	Data Entry Information	Dropdown Values
			<p>ENTERED IN ERROR</p> <p>Case has been created in error. Select “DOES NOT MEET DEFINITION” for Classification.</p> <p>LOST TO FOLLOW UP</p> <p>Investigation/follow-up was started but not completed due to problems contacting the case.</p> <p>REFERRED TO FNIHB</p> <p>Case was referred to the First Nation’s and Inuit Health Branch (FNIHB) and all information required to continue case and contact management have been forwarded to the health centre on federally designated land.</p> <p>UNTRACEABLE</p> <p>PHU was unable to make contact with the case to initiate case investigation/follow-up.</p>
M	Disposition Date	Enter the date the Disposition was determined or changed.	
M	Status	<p>Indicate whether the investigation is ongoing or completed. Value initially pre-populates to “OPEN”.</p> <p>Ensure that Disposition is not “PENDING” when the Status is updated to “CLOSED”.</p>	<p>OPEN</p> <p>Investigation is ongoing.</p> <p>CLOSED</p> <p>Investigation is complete and all necessary data fields have been entered in</p>

M/R/O	Field Name	Data Entry Information	Dropdown Values
			iPHIS.
M	Status Date	Enter the date the decision was made to open or close the case in iPHIS.	
M	Priority	Enter according to the procedure of PHU. This field is mandatory but not used for provincial surveillance purposes.	HIGH MEDIUM LOW
O	Comments	<u>Do not enter the narrative or nursing notes here.</u> All notes about the case should be entered in Cases > Case > Notes (see section 10.0).	

1.2 Other Details and Reporting Information

There are a number of data fields under the sections **Other Details**, **Transcriber Information** and **Reporting Information**. This section describes the fields required for provincial surveillance and some optional fields. Other data fields not described here are considered optional and may be entered at the discretion of the PHU.

Steps:

1. Click on the (+) sign beside the **Other Details** section on the bottom of the **Case Details** screen (see [Appendix 8, screen shot 1.2](#)). This will expand the section and make new data fields visible.
2. Enter the information specified in [Table 1b](#) under the **Other Details** and **Reporting Information** sections.
3. Click **Save**.

Table 1b: Detailed guide for Other Details and Reporting Information fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
R	Client Address at Time of Case	Select the address where the client was living when the VPD was diagnosed. This should be the address that was used to determine the Diagnosing Health Unit . Having a valid postal code is important as it is used to assign the case to a LHIN. <u>Do not update this field even if the client moves during the investigation.</u>	Populated by the address entered in the Client Demographics module. Ensure that the address is complete, including the postal code.
R	Investigation Start Date	Enter the date the PHU first tried to contact the case and/or the healthcare provider.	
O	Reporting Source	Enter the hospital, physician or laboratory that is the source of the initial case report. Nurse practitioners are included as physicians. To search for a name of the reporting source, select one of "HOSPITAL", "PHYSICIAN" or "LAB" as the External Source Type . Do not use any other values. Enter a Source Name or City .	

M/R/O	Field Name	Data Entry Information	Dropdown Values
		<p>Click Filter. Select the name of the reporting source from the generated list.</p> <p>For all other reporting sources, enter it under Other Reporting Source Type.</p>	
○	Other Reporting Source Type	<p>If the reporting source was not a hospital, physician/nurse practitioner or laboratory, select the reporting source that best reflects the source of the initial case report. Provide additional detail in the Other Reporting Source Name.</p>	
○	Other Reporting Source Name	<p>Provide additional details about the Other Reporting Source Type.</p> <p>For “HEALTHCARE PROFESSIONAL”, specify the type of the professional (e.g., nurse, pharmacist, etc.). For “FAMILY MEMBER”, specify if it is the parent of the case (e.g., mother, parent).</p>	

1.3 Physician

[Sections 1.1](#) and [1.2](#) must be completed and saved (click **Save**) before entering data in this section.

Steps:

1. Save any data entered in the **Case Details** screen.
2. Click on the **(+)** sign beside the **Physician** section of the **Case Details** screen.
3. Enter the information specified in [Table 1c](#).
4. Click **Add**.

Table 1c: Detailed guide for Physician fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Physician	<p>The physician list only appears when the Source Name and/or City has been filtered on.</p> <p>To find a physician/nurse practitioner, generate a list by entering the last name (or the first few letters followed by %) of the physician/nurse practitioner in the Source Name. Click Filter. Select the appropriate name from the generated list.</p> <p>If unknown or not found, enter “%OTHER%” as the Source Name. Click Filter. Select “EXTERNAL, OTHER” or “INTERNAL, OTHER”.</p>	Values are based on the results of the filter.
M	Role	Select as appropriate.	ATTENDING PHYSICIAN FAMILY PHYSICIAN OTHER SPECIALIST UNKNOWN WALK-IN CLINIC PHYSICIAN

1.4 Assignment History

[Sections 1.1](#) and [1.2](#) must be completed and saved (click **Save**) before entering data in this section.

Steps:

1. Click on the **(+)** sign beside the **Assignment History** section of the **Case Details** screen.
2. Enter the information specified in [Table 1d](#).
3. Click **Save**.

Table 1d: Detailed guide for Assignment History fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Investigator	Auto-populates to the iPHIS user entering the data. Select the name of the investigator currently responsible for the case investigation. Update when the investigator changes. Time stamp will reflect the current time at data entry. If the Disposition is "REFERRED TO FNIHB", select "External, Other".	Values are specific to each Responsible Health Unit .

2.0 Laboratory

Special Considerations

You are encouraged to contact the submitting lab, including the Public Health Ontario Laboratories, or the IVPD team at ivpd@oahpp.ca for clarification and guidance on how to interpret lab results.

It is especially important to enter all laboratory results, including negative results, for reports of AFP as the purpose of AFP surveillance is to rule out poliovirus as the causative agent. This is required to maintain Canada's polio-free certification status.

2.1 Requisition Information

Steps:

1. At the top of the screen, navigate to **Cases > Case > Lab**.
2. Click **Lab Requisition**.
3. Enter the information specified in the quick list below. Refer to [Table 2a](#) for more detailed information (see [Appendix 8, screen shot 2.1](#)).
4. Click **Save**.
5. Click **Add Test** button under the **Test and Result Summary** section to enter data in the [Test Information](#) section (see [Appendix 8, screen shot 2.1](#)).

Requisition Information Quick List – Mandatory and Required Data Fields

- (R) Placer Requisition ID
- (M) Requisition Date

All data fields listed above are necessary for provincial VPD surveillance.

Table 2a: Detailed guide for Requisition Information fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
R	Placer Requisition ID	<p>For Public Health Ontario Laboratories requisitions, enter the requisition ID that is in the following format:</p> <ul style="list-style-type: none"> • Last two digits of the year, laboratory initial, specimen number (e.g., 18C000155) <p>For all other laboratories, use the unique specimen identifier provided, followed by the lab requisition year (-YYYY) (e.g., 100189-2018). After entering the ID, click Search to ensure that this ID is not being used by another case.</p> <p>If nothing is manually entered in this field, iPHIS will auto-generate an ID.</p>	
O	Ordering Provider	<p>For physicians/nurse practitioners, generate a list by selecting “PHYSICIAN” as the External Source Type and entering the last name (or the first few letters followed by %) of the ordering physician/nurse practitioner in the Source Name. Click Filter. Select the physician/nurse practitioner’s name from the generated list.</p> <p>If the ordering provider is unknown, select “PERSONNEL” as the External Source Type and enter “%OTHER%” in the Source Name. Click Filter. Select “EXTERNAL, OTHER” or “INTERNAL, OTHER”.</p>	Values are based on the results of the filter.
M	Requisition Date	<p>Enter the date the laboratory work was requested. If the requested date is unknown, enter the date of specimen collection or the service date.</p> <p>Although optional, you can enter the name of the laboratory doing the testing in the Lab field.</p>	

2.2 Test Information

Steps:

1. Once the information in the [Requisition Information](#) is saved, click **Add Test** button under the **Test and Result Summary** section to enter data in the **Test Information** section.
2. In the **Test Information** section, enter the information specified in the quick list below. Refer to [Table 2b](#) for more detailed information (see [Appendix 8, screen shot 2.2](#)).
3. Click **Save**.
4. Click **Add Result** button under the **Result Summary** section to enter data in the [Result Information](#) section (see [Appendix 8, screen shot 2.2](#)).

Test Information Quick List – Mandatory and Required Data Fields

- (M) Specimen Type
- (M) Body Site
- (M) Test Name
- (R) Collection Date
- (R) Reported Date

All data fields listed above are necessary for provincial VPD surveillance.

Table 2b: Detailed guide for Test Information fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Specimen Type	Select as appropriate. The specimen type is usually indicated on the laboratory requisition.	Values are specific to each VPD. Most commonly used values for VPDs are: BLOOD CEREBROSPINAL FLUID (CSF) SWAB URINE
O	Specimen ID	<u>Do not use.</u>	
M	Body Site	Select as appropriate.	Values are specific to each Specimen Type . In general, select

M/R/O	Field Name	Data Entry Information	Dropdown Values
			<p>the same value as the Specimen Type (e.g., if Specimen Type is “BLOOD”, select “BLOOD” for Body Site).</p> <p>When Specimen Type is “SWAB”, select one of:</p> <ul style="list-style-type: none"> • BUCCAL • LESION • NASOPHARYNGEAL • THROAT • VESICLE
M	Test Name	Select as appropriate.	<p>Most common laboratory tests conducted for VPDs are outlined here below. Other values may be used if appropriate.</p> <p><u>General guidance:</u></p> <p>For PCR and bacterial/viral culture testing, select one of:</p> <ul style="list-style-type: none"> • MICROBIOLOGY • MOLECULAR METHODS <p>For IgG and IgM testing, select:</p> <ul style="list-style-type: none"> • IMMUNOLOGY/SEROLOGY
O	Test Result Status	<u>Do not use.</u>	
R	Collection Date	<p>Enter the date the specimen was collected as shown on the laboratory slip.</p> <p>Tests with negative results may be entered at the discretion of the PHU for all VPDs, except AFP. For AFP reports, negative results should be entered to rule out poliovirus as the causative agent.</p> <p>The entry of negative results can</p>	

M/R/O	Field Name	Data Entry Information	Dropdown Values
		<p>affect the Episode Date since Collection Date is the second date in the episode date hierarchy (see Appendix 3). When multiple specimens/ laboratory tests are entered, the earliest Collection Date will be used in the episode date hierarchy even if the result is negative.</p>	
R	Reported Date	<p>Enter the reported date as indicated on the laboratory slip. This date should reflect the date that the laboratory reported the result to the PHU. This date is also referred to as the “Lab Test Date” in the episode date hierarchy (see Appendix 3).</p> <p>This is not the same field as the Reported Date on the Case Details section.</p>	
O	Defining Specimen	<u>Do not use.</u>	

2.3 Result Information

Steps:

1. Once the information in the [Test Information](#) is saved, click **Add Result** button under the **Result Summary** to enter data in the **Result Information** section.
2. Enter the information specified in the quick list below. Refer to [Table 2c](#) for more detailed information (see [Appendix 8, screen shot 2.3](#)).
3. Click **Save**. There is no **Add** button for this section.

Result Information Quick List – Mandatory and Required Data Fields

- (M) Branch
- (M) Program Area
- (R) Disease/Diagnosis
- (R) Resulted Test Group Code
- (R) Resulted Test Code
- (M) Result
- (R) Assign Result to Case

All data fields listed above are necessary for provincial VPD surveillance.

Table 2c: Detailed guide for Result Information fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Branch	Select as appropriate.	Values are specific to each PHU.
M	Program Area	Auto-populates to “CD”. <u>Do not change.</u>	CD
R	Disease/Diagnosis	Auto-populates to the VPD associated with the Outbreak Number .	
R	Resulted Test Group Code	Select “CD-RESP/DIR CONT”. <u>Do not use any other values.</u>	CD-RESP/DIR CONT
R	Resulted Test Code	Select as indicated on the laboratory slip.	<u>General guidance:</u> For PCR testing, select:

M/R/O	Field Name	Data Entry Information	Dropdown Values
			<ul style="list-style-type: none"> • PCR - Polymerase Chain React • RT-PCR <p>For bacterial/viral culture, select:</p> <ul style="list-style-type: none"> • CULTURE – BACTERIAL • CULTURE – VIRAL <p>For IgG and IgM testing, select:</p> <ul style="list-style-type: none"> • EIA/ELISA – IgG • EIA/ELISA – IgM <p>Other values may be used if appropriate.</p>
M	Result	Select as appropriate.	<p>Values are specific to each Resulted Test Code.</p> <p><u>General guidance:</u></p> <p>For PCR testing, select:</p> <ul style="list-style-type: none"> • DETECTED • NOT DETECTED <p>For bacterial/viral culture, select:</p> <ul style="list-style-type: none"> • ISOLATED • NOT ISOLATED <p>For IgG and IgM testing, select:</p> <ul style="list-style-type: none"> • REACTIVE • NON REACTIVE • INDETERMINATE
R	Assign result to case	Auto-populates. <u>Do not change</u> .	
O	Observation Value	<p>Enter any additional information or comments from the laboratory.</p> <p><u>Do not record serogroup, serotype or genotype information here; this information must be entered in the Subtype or Further Differentiation fields in the Case Details section.</u></p>	

3.0 Risk Factors

Special Considerations

As per the [iPHIS Risk Factor Entry User Guide](#), at least one **Medical Risk Factor** and one **Behavioural Social Factor** must have a response of “YES” entered. If the case has no known risk factor to report, select “YES” as a response for the risk factor “UNKNOWN”. Refer to the [iPHIS Risk Factor Entry User Guide](#) for additional information on entering risk factors.

Immunization data are essential to monitor and evaluate the impact of immunization programs, and to inform recommendations for immunization policies and programs. Thus, in order to capture accurate immunization information for VPD cases, all VPD cases that meet the confirmed and probable (if applicable) case definitions must have a response selected for the “UNIMMUNIZED” medical risk factor. If the response is “NO”, immunization details should be entered in the **Cases > Case > Intervent/Treatments** section (see [section 4.0: Immunizations](#) and [Appendix 4](#), which illustrates a decision tree for entering immunization information in iPHIS). In addition, all measles, rubella, and CRS investigations should have a response selected for the behavioural social factors “TRAVEL OUTSIDE ONTARIO WITHIN THE PAST MONTH” and “CLOSE CONTACT WITH CASE”.

3.1 Medical Risk Factors

Steps:

1. At the top of the screen, navigate to **Cases > Case > Risks**.
2. Click on the (+) sign beside **Medical Risk Factors** (see [Appendix 8, screen shot 3.0](#)).
3. Select the appropriate response for the “UNIMMUNIZED” risk factor. Refer to [Table 3a](#) for more information.
4. Click **Save**.

Table 3a: Detailed guide for Medical Risk Factors fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
	Medical Risk Factors	<p>The list of risk factors is unique to each VPD.</p> <p>A response must be reported for the medical risk factor “UNIMMUNIZED” (refer to the row below).</p> <p>For all other medical risk factors, record a response if it has been asked. The risk factors listed are relevant as they may make an individual more likely to acquire the VPD under investigation and/or have a more serious outcome.</p> <p>If a medical risk factor has a check-box instead of dropdown options, check the box to indicate YES.</p> <p>If needed, enter any explanatory notes in the text box directly beside each risk factor. Do not use the date fields in this section.</p>	<p>NOT ASKED</p> <p>Client was not asked about the risk factor or the risk factor is not applicable (e.g., pregnant risk factor for a male client).</p> <p>YES</p> <p>Case reported the risk factor was present during the maximum incubation period.</p> <p>NO</p> <p>Case reported the risk factor was not present during the maximum incubation period.</p> <p>UNKNOWN</p> <p>Case does not know if the risk factor was present during the maximum incubation period or the case refused to answer.</p>
R	UNIMMUNIZED	<p>A response must be selected for all VPD cases that meet the confirmed and probable (if applicable) case definitions. <u>Do not select “NOT ASKED” as the response.</u></p> <p>In addition to obtaining information from the case or their health care providers, users are encouraged to check Panorama to obtain any relevant immunization information for the case. Follow the PHU’s best practices for viewing a record in Panorama.</p>	<p>YES</p> <p>Case has <u>not</u> received any vaccine against the specific VPD under investigation (i.e., zero doses) prior to disease onset. Enter the reason for not being immunized in the adjacent free text field (e.g., religious beliefs).</p> <p>NO</p> <p>Case has received <u>at least one dose</u> of vaccine against the specific VPD under investigation (i.e., at least one dose) prior to</p>

M/R/O	Field Name	Data Entry Information	Dropdown Values
			<p>disease onset. This includes immunization records where only partial dates are known (e.g., only the year of administration known) and that do not have written proof.</p> <p>Follow the directions provided in the Interventions section (see section 4.0: Immunizations) to enter the VPD-specific immunization records. <u>This information must be entered as specified. Do not enter this information in the adjacent free-text field or in the Notes.</u></p> <p>Refer to Appendix 4 for a summary of entering immunization information in iPHIS.</p> <p>UNKNOWN</p> <p>Immunization history for the case is unknown or the case refused to answer.</p>

3.2 Behavioural Social Factors

Steps:

1. At the top of the screen, navigate to **Cases > Case > Risks**.
2. Click on the **(+)** sign beside **Behavioural Social Factors** (see [Appendix 8, screen shot 3.0](#)).
3. For any measles, rubella, and CRS investigations, select the appropriate response for the “TRAVEL OUTSIDE ONTARIO WITHIN THE PAST MONTH” and “CLOSE CONTACT WITH CASE” risk factors. Refer to [Table 3b](#) for more information.
4. Click **Save**.

Table 3b: Detailed guide for Behavioural Social Factors fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
	Behavioural Social Factors	<p>The list of risk factors is unique to each VPD.</p> <p>For measles, rubella and CRS cases, a response <u>must</u> be completed for the behavioural social factors “TRAVEL OUTSIDE ONTARIO WITHIN THE PAST MONTH” and “CLOSE CONTACT WITH CASE” (refer to the rows below).</p> <p>For all other behavioural social factors, record a response if it has been asked. The risk factors listed are relevant as they may make an individual more likely to acquire the VPD under investigation and/or have a more serious outcome.</p> <p>If needed, enter any explanatory notes in the text box directly beside each risk factor.</p>	<p>NOT ASKED</p> <p>Client was not asked about the risk factor or the risk factor is not applicable (e.g., pregnant risk factor for a male client).</p> <p>YES</p> <p>Case reported the risk factor was present during the maximum incubation period.</p> <p>NO</p> <p>Case reported the risk factor was not present during the maximum incubation period.</p> <p>UNKNOWN</p> <p>Case does not know if the risk factor was present during the maximum incubation period or the case refused to answer.</p>

M/R/O	Field Name	Data Entry Information	Dropdown Values
R	TRAVEL OUTSIDE ONTARIO WITHIN THE PAST MONTH	<p>A response must be selected for all measles, rubella and CRS investigations to satisfy the enhanced surveillance requirements for the documentation of elimination for these diseases. <u>Do not select “NOT ASKED” as the response.</u></p> <p>Any further details concerning travel (e.g., location and dates of travel) should also be entered in the Exposures section (see section 5.0: Exposures and Appendix 5a).</p>	<p>YES</p> <p>Case travelled outside Ontario one month (approximately) before symptom onset. Enter details concerning travel in the Exposures section (see section 5.0: Exposures).</p> <p>NO</p> <p>Case did <u>not</u> travel outside Ontario recently (within one month) before symptom onset.</p> <p>UNKNOWN</p> <p>Travel history is unknown or the case refused to answer.</p>
R	CLOSE CONTACT WITH CASE	<p>A response must be selected for all measles, rubella and CRS investigations to satisfy the enhanced surveillance requirements for the documentation of elimination for these diseases. <u>Do not select “NOT ASKED” as the response.</u></p>	<p>YES</p> <p>Case shared airspace with a laboratory-confirmed case of measles or rubella in the month (approximately) before symptom onset. If the source case is entered in iPHIS, link the cases in the Exposures section (see section 5.0: Exposures).</p> <p>NO</p> <p>Case did <u>not</u> share airspace with a laboratory-confirmed case of measles or rubella in the month (approximately) before symptom onset.</p> <p>UNKNOWN</p> <p>It is unknown whether the case shared airspace with a laboratory-confirmed case or case refused to answer.</p>

4.0 Immunizations

Special Considerations

Immunization data is essential to monitor and evaluate the impact of immunization programs, and to inform recommendations for immunization policies and programs. Thus, it is critical to collect and assess the immunization history of all VPD cases, which reflects the immunization status of the case before disease onset. For CRS cases, the immunization status should reflect that of the mother.

If a case has a known immunization history (whether the exact administration dates are known or not), enter a separate record for each dose of a VPD-specific vaccine received before disease onset in the **Cases > Case > Intervent/Treatments** section. Also select a response of “NO” for the medical risk factor “UNIMMUNIZED” in the **Cases>Case>Risks** section (see [section 3.1: Medical Risk Factor](#)). If a case was not immunized or has unknown immunization history, select a response of “YES” or “UNKNOWN”, respectively, for the “UNIMMUNIZED” medical risk factor. See [Appendix 4](#) for more information on entering immunization data in iPHIS.

It is helpful to check other data sources (e.g., Panorama) for immunization information. For any reports of adverse events following immunization (AEFI), please refer to the current [iPHIS User Guide on AEFIs](#).

Steps:

1. At the top of the screen, navigate to **Cases > Case > Intervent/Treatments**.
2. Scroll down the page and click on the **(+)** sign beside **Immunizations/Chemoprophylaxis**.
3. Click **New Immunization** (see [Appendix 8, screen shot 4.0a](#)).
4. Enter the information specified in the quick list below. Refer to [Table 4](#) for more detailed information (see [Appendix 8, screen shot 4.0b](#)).
5. Click **Save**.

Immunizations Quick List – Mandatory and Required Data Fields

- (M) Administration Date/Time
- (M) HU
- (M) Branch
- (M) Provider/Personnel
- (M) Agent
- (M) Lot Number (Expiry Date)
- (M) Site
- (M) Informed Consent
- (R) Comments

All data fields listed above are necessary for provincial VPD surveillance.

Table 4: Detailed guide for Immunizations fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Administration Date/Time	<p>Auto-populates with the Reported Date from the Case Details section. <u>Update with the exact date of immunization administration.</u></p> <p>If, after thorough investigation, including checking in Panorama if appropriate, the exact dates are unknown or partially known, enter “1111-01-01”. Enter any known parts of the date (e.g., year of administration) in the Comments field below on the same screen.</p> <p>Administration Time is optional and not required for provincial surveillance; if left blank, the system will save the record with time auto-populated as 00:00:00.</p>	
O	Accurate	Check the box if the Administration Date is exact and accurate. Do not check the box if the administration date is partially known.	
M	HU	<p>Auto-populates with the user’s PHU.</p> <p>If known, select the PHU where the immunization was received. If unknown or if the immunization was received out of</p>	All PHUs in Ontario and MOHLTC (0).

M/R/O	Field Name	Data Entry Information	Dropdown Values
		province, select “MOHLTC (0)”. Enter ‘Unknown location’ or the location of vaccine administration outside of Ontario in the Comments field below on the same screen.	
M	Branch	Select as appropriate.	Values are specific to each PHU.
M	Provider/ Personnel	<p>If the immunization was administered by a physician or nurse practitioner, select the provider’s name from the dropdown list generated from the Provider/Personnel Filter search. Filter by selecting “PHYSICIAN” as Professional Status and selecting other filters as appropriate. Click Filter. Select the name of the provider.</p> <p>If the immunization was not administered by a physician or nurse practitioner, enter “%OTHER%” as the Source Name and leave everything else blank. Click Filter. Select “External, Other” or “Internal, Other” and enter the name of the provider and their professional designation (if applicable) in the Comments field below on the same screen.</p> <p>If the administrator of the vaccine is unknown, enter “unk%” as the Source Name and leave everything else blank. Click Filter. Select “UNKNOWN”.</p>	<p>Generated by the Provider/Personnel Filters.</p> <p>A maximum of 200 results are presented in the dropdown. Narrow your search by entering as much information as possible.</p>
M	Agent	<p>Select the vaccine received. <u>Only enter immunizations related to the VPD under investigation and that were received before disease onset</u> (e.g., MMR or MMRV received before disease onset for a mumps case).</p> <p><u>Always enter the exact vaccine</u>. If unknown (e.g., know it is a measles-containing vaccine but unsure if it is MMR, MMRV or M), select the most appropriate vaccine based on the age of the case and the immunization</p>	<p>See Appendix 6 for a list of agent values in iPHIS and corresponding product/trade names.</p> <p>Past vaccines that are no longer available for administration in Ontario are considered inactive and marked with (I). Do not use inactive agents</p>

M/R/O	Field Name	Data Entry Information	Dropdown Values
		schedule of the location of administration. If still unsure, contact the IVPD team at ivpd@oahpp.ca for consultation.	unless relevant (e.g., immunization was received outside Ontario or before vaccine was discontinued in Ontario).
M	Lot Number (Expiry Date)	<p>Select the lot number of the vaccine received.</p> <p>If the lot number is not available as a dropdown value, contact the iPHIS HelpDesk at iphissupport.moh@ontario.ca or 1-866-272-2794 to have it added. In the meantime, select “DC (2020-01-01)” to save the immunization record and enter ‘Lot number pending’ in the Comments field below on the same screen. <u>Update this field when the lot number has been added to the dropdown list.</u></p> <p>If the lot number is truly unknown, select “DC (2020-01-01)” and enter ‘Unknown lot number’ in the Comments field below.</p>	<p>Values are specific to each Agent.</p> <p>DC (2020-01-01) is used for unknown lot numbers or as a temporary lot number while a request has been made to add a new lot number to the dropdown.</p>
M	Site	Enter the site of vaccine administration.	<p>LA – Left arm</p> <p>LL – Left leg</p> <p>RA – Right arm</p> <p>RL – Right arm</p> <p>?? – Unknown site</p> <p>?A – Arm (side unknown)</p> <p>?L – Leg (side unknown)</p> <p>?B – Buttock (side unknown)</p> <p>BB – Both buttocks</p> <p>LB – Left buttock</p> <p>MOUTH</p> <p>NOSE</p> <p>RB – Right buttock</p>

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Informed Consent	Enter whether informed consent was received. If unknown, leave this field as "UNKNOWN".	YES NO UNKNOWN
R	Comments	<p>This field is required if one of the conditions listed below needs to be recorded. Use this field only to note the following information (character limit of 250):</p> <ul style="list-style-type: none"> • If the exact Administration Date/Time is partially known (i.e., entered as "1111-01-01"), enter any known parts of the Administration Date/Time (e.g., year of administration). • If the PHU of vaccine administration is unknown, enter 'Unknown location'. • If the location of vaccine administration is outside of Ontario and HU is entered as "MOHLTC (0)", enter the location of vaccine administration or 'Outside of Ontario'. • If the Provider/Personnel is entered as "External, Other" or "Internal, Other", enter the name of the provider who administered the vaccine and their professional designation (if applicable). • If the Lot Number (Expiry Date) is entered as "DC (2020-01-01)" and a request has been submitted to add a new lot number to iPHIS, enter 'Lot number pending' and other details about the vaccine. • If the Lot Number (Expiry Date) is entered as "DC (2020-01-01)" and the lot number is truly unknown, enter 'Unknown lot number'. • Panorama ID of the case, if known. <p>Do not enter any other notes in this field.</p>	

5.0 Exposures

Special Considerations

Report all relevant, discrete exposures that relate to how the case may have acquired the disease (i.e., acquisition exposure), as well as exposures for which the case may present a risk for transmission of disease to others (i.e., transmission exposure).

All VPDs that meet the confirmed or probable (if applicable) definitions must have at least one acquisition exposure entered. If no discrete acquisition exposures are identified, enter an unknown exposure (refer to [Appendix 2](#) for a list of provincial VPD-specific unknown exposure IDs). **Users must not modify the exposure details for these provincial unknown exposures.** If there is a potential exposure that has been identified, you are not required to also enter an unknown exposure. For confirmed and probable (if applicable) cases, at least one transmission exposure should be created when it is known or suspected that a case has transmitted the disease via an identified exposure. If there are no transmission exposures, entry is not required. For measles, rubella, and CRS, it is important to also record travel history in this section.

Reporting exposures in iPHIS is a two-step process:

1. Search for an existing exposure; if one does not exist, create a new exposure.
2. Link the exposure to the case, specifying if it is an acquisition or transmission exposure.

[Appendix 5a](#) offers further description of this process.

Step 1a: Search for an existing exposure

1. At the top of the screen, navigate to **Cases > Case > Exposures**.
2. Click **Link Exposure** to display the **Exposure Sub-Search** screen (see [Appendix 8, screen shot 5.0a](#)).
3. Enter the relevant search criteria and click **Search**. Set the **Health Unit Responsible** field to blank to broaden the search. The search will call up all exposures that meet the search criteria and are linked with the **Outbreak Number** that the case under investigation is associated with.
 - a. To search for a provincial VPD-specific unknown acquisition exposure, enter the corresponding **Exposure ID** (see [Appendix 2](#) for a list).

- b. To prevent creating duplicate exposures and increase the odds of finding an exposure, use the wildcard character “%” to search for a keyword in the **Exposure Name** (e.g., iPHIS Case ID, name of school). For example, entering “%school%” in the **Exposure Name** field will call up all exposures where “school” is contained in the **Exposure Name**.

Note: Searching for an exposure across all outbreaks can be done through selecting **Outbreak > Exposure Search** from the left hand navigation menu. However, it is recommended to use the steps outlined here in the user guide (using the **Cases > Case > Exposure** screen to search), as users cannot create new exposures or link the exposure to a case using the search option from the left hand navigation menu.

4. If the exposure is found, select the exposure of interest by clicking **Select** (see [Appendix 8, screen shot 5.0b](#)) and proceed to [Step 2](#). If the exposure is not found, proceed to [Step 1b](#).

Step 1b: Create a new exposure

1. If the exposure of interest is not found through the search, create a new exposure by clicking **New Exposure** (see [Appendix 8, screen shot 5.0b](#)). Note that you cannot create an unknown acquisition exposure. If acquisition exposure is unknown, see [Step 1a](#), step #3a. If transmission exposure is unknown, you do not need to enter a transmission exposure.
2. Proceed to sections [5.1](#) and [5.2](#) and enter the required information in [Tables 5a](#) and [5b](#).
3. Click **Save**. If required, enter more details on the **Setting/Travel Location Description Details** as described in section [5.3](#) and [Table 5c](#).
4. Click **Continue**.
5. Proceed to [section 5.4](#) to complete linking this exposure to the case.

Step 2: Linking an exposure to the case

1. At this point, you should have selected an exposure of interest after completing [Step 1a](#) or have created a new exposure after completing [Step 1b](#). It is important that the dates of exposure for the case (**Client Earliest/Most Recent Exposure Dates**) are contained within the range of **Earliest/Most Recent Exposure Dates** referenced by the exposure (see sections [5.1](#) and [5.4](#) for more details).
2. Proceed to [section 5.4](#). Enter information in [Table 5d](#) to link the exposure to the case and to designate whether the exposure is an acquisition or a transmission exposure.

5.1 Source

Special Considerations

Only use this section when creating a new exposure (acquisition and/or transmission). This section does not apply when linking a case to a pre-existing exposure (see [Step 2](#) above). The requirements for exposure data entry are also illustrated in [Appendix 5a](#).

Steps:

1. Enter the information in the source quick list below. Refer to [Table 5a](#) for more detailed information (see [Appendix 8, screen shot 5.1](#)).

Source Quick List – Mandatory and Required Data Fields

- (M) Exposure Level
- (M) Exposure Type
- (M) Exposure Name
- (M) Health Unit Responsible
- (M) Earliest Exposure Date/Time
- (R) Most Recent Exposure Date/Time

All data fields listed above are necessary for provincial VPD surveillance.

Table 5a: Detailed guide for Source fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Exposure Level	Select "OUTBREAK AND CASE".	OUTBREAK AND CASE
O	Active	Box is checked by default. <u>Do not change.</u>	
M	Exposure Type	Select either "PERSON" or "TRAVEL". <u>Do not use other values.</u> When "PERSON" is selected, there is the option to use the Case Search button that subsequently appears. Click to search for a case that is being used as the exposure (e.g., source case for acquisition exposure). When a case is selected from the search, iPHIS will auto-populate the Exposure Name with the	PERSON Case did <u>not</u> travel outside of Ontario within one month before symptom onset. TRAVEL Case travelled outside Ontario approximately one month before symptom

M/R/O	Field Name	Data Entry Information	Dropdown Values
		<p>selected case. Be sure to update the Exposure Name with the specified naming convention outlined below.</p> <p>Contact the IVPD team at ivpd@oahpp.ca for assistance on determining the appropriate exposure type.</p>	onset.
O	Mostly Likely Source for the Outbreak	<u>Do not use.</u>	
M	Exposure Name	<p>Enter using the specified naming convention, using dashes and commas as indicated (also see Appendix 5a).</p> <p><u>ACQUISITION EXPOSURE</u></p> <p>At least one acquisition exposure must be entered for all confirmed and probable (if applicable) cases. If the acquisition exposure is unknown, link to an existing provincial VPD-specific unknown exposure (see Step 1a).</p> <p>Person</p> <p>If the case acquired the disease from another person (i.e., source case), then use the following naming convention. The initials and the case ID in the Exposure Name refers to the source case who transmitted the VPD to the case under investigation. Use initials rather than the full name for privacy.</p> <ul style="list-style-type: none"> • LAST NAME INITIAL, FIRST NAME INITIAL – CASE ID XXXXXX (e.g., A, B – 123456) • LAST NAME INITIAL, FIRST NAME INITIAL – VISITOR FROM COUNTRY/STATE/CITY (e.g., A, B – Visitor from India) <p>The same exposure is to be used as a transmission exposure for the source case.</p>	

M/R/O	Field Name	Data Entry Information	Dropdown Values
		<p>Travel</p> <p>If the case travelled outside Ontario within approximately one month of symptom onset, then enter the following:</p> <ul style="list-style-type: none"> TRAVEL/VISITOR/MIGRATED FROM – LOCATION – YYYY-MM-DD (e.g., Travel – Pakistan – 2018-01-01; Visitor – Pakistan – 2018-01-01) <p>The date (YYYY-MM-DD) in the exposure name refers to the Earliest Exposure Date.</p> <p>Location</p> <p>If the case acquired the disease from being at a location with known disease transmission, then enter the following:</p> <ul style="list-style-type: none"> FACILITY/NAME – STREET ADDRESS – CITY (e.g., ABC School – 123 Main St. – Toronto; Family Reunion – 1 Rural Rd. – Ottawa) <p><u>TRANSMISSION EXPOSURE</u></p> <p>At least one transmission exposure must be created when it is known or suspected that a case has transmitted the disease via an identified exposure. If transmission exposure is unknown, you do not need to enter a transmission exposure.</p> <p>Person</p> <p>If the case transmitted or is suspected to have transmitted the disease, then use the following naming convention. The initials and the case ID in the Exposure Name refers to the case under investigation. Use initials rather than the full name for privacy.</p> <ul style="list-style-type: none"> LAST NAME INITIAL, FIRST NAME INITIAL – CASE ID XXXXXX (e.g., A, B – 123456) <p>The same exposure is to be used as an</p>	

M/R/O	Field Name	Data Entry Information	Dropdown Values
		<p>acquisition exposure for the secondary cases.</p> <p>Location</p> <p>Create a transmission exposure for location(s) where the case transmitted the VPD or where the case visited during the infectious period if subsequent cases are expected (e.g., during an outbreak). Enter the following:</p> <ul style="list-style-type: none"> FACILITY/NAME – STREET ADDRESS – CITY (e.g., ABC School – 123 Main St. – Toronto) 	
M	Health Unit Responsible	<p>Select the PHU in which the exposure occurred. If the exposure occurred outside of Ontario (e.g., travel) select “MOHLTC – PHD (0)”.</p> <p>When creating an exposure specific to a flight, specify the PHU in which the airport is located (e.g., select “PEEL REGION (2253)” for exposures related to flights arriving/departing from Toronto Pearson International Airport).</p> <p>Important: The PHU that identifies the exposure is responsible for creating the exposure in iPHIS, regardless of the exposure location.</p>	All PHUs in Ontario and MOHLTC – PHD (0).
M	Earliest Exposure Date/Time	<p>Enter the relevant date, depending on the type of exposure (also outlined in Appendix 5b). Refer to the VPD-specific Appendix A, Infectious Diseases Protocol for infectious periods and incubation periods. It is important that the Client Earliest/Most Recent Exposure Dates (see section 5.4) are contained within the range of Earliest/Most Recent Exposure Dates.</p> <p>A time stamp is automatically generated</p>	

M/R/O	Field Name	Data Entry Information	Dropdown Values
		<p>when a date is entered. Delete the time (unless specifying the time is critical, as with measles exposures), or complications may arise when attempting to link exposures to cases.</p> <p>*For acquisition exposures, case refers to the source case. For transmission exposures, case refers to the case for which the data is being entered.</p> <p>Travel (for acquisition exposures only)</p> <ul style="list-style-type: none"> • For cases who travelled outside Ontario, enter the date in which the case arrived at their destination • If the case migrated to or is a visitor to Ontario, enter the date of symptom onset minus the maximum incubation period for the VPD (e.g., for measles, it would be the rash onset date minus 21 days (maximum incubation period)) <p>Person (acquisition and transmission)</p> <ul style="list-style-type: none"> • Earliest date the case* was infectious • If this is not known, enter the earliest symptom onset date for the case* minus maximum incubation period for the VPD <p>Location (acquisition and transmission)</p> <ul style="list-style-type: none"> • Earliest date the case* was infectious while at the location of interest • If this is not known, enter the earliest date in which the case* was at the location • If this is not known, enter your best estimation of the earliest date in which disease transmission could have occurred at the location of interest <p>In an outbreak, this field may have to be updated to an earlier date/time in order to</p>	

M/R/O	Field Name	Data Entry Information	Dropdown Values
		link cases that are identified later on, but who were exposed earlier than the case initially reported. Contact the PHU that created the exposure to request the change.	
R	Most Recent Exposure Date/Time (R)	<p>Enter the relevant date, depending on the type of exposure (also outlined in Appendix 5b). A future date cannot be entered for this field. It is important that the Client Earliest/Most Recent Exposure Dates (see section 5.4) are contained within the range of Earliest/Most Recent Exposure Dates.</p> <p>* For acquisition exposures, case refers to the source case. For transmission exposures, case refers to the case for which the data is being entered,</p> <p>Travel (required for acquisition exposures)</p> <ul style="list-style-type: none"> For cases who travelled outside Ontario, enter the date in which the case departed from their destination to return to Ontario <p>Person (Optional)</p> <ul style="list-style-type: none"> If known, enter the latest date in which the case* could have been infectious. Otherwise, leave blank <p>Location (Optional)</p> <ul style="list-style-type: none"> If known, enter the latest date in which the case* could have been infectious while at the location of interest If this is not known, enter the latest date in which the case* was at the location of interest. If this is not known, then enter your best estimation of the latest date in which disease transmission could have occurred at the location of interest 	

5.2 Exposure Address

Steps:

1. Scroll down to **Exposure Address**.
2. Enter the information specified in the quick list below (see [Appendix 8, screen shot 5.1](#)). See [Table 5b](#) for more detailed information.
3. Click **Save**.
4. [Section 5.3: Setting/Travel Location Description Details](#) is optional. If you are skipping this section, click **Continue**. Proceed to [section 5.4: Timeframe Exposed](#) to complete linking the case to the exposure.

Exposure Address Quick List – Mandatory and Required Data Fields

- (M) Country
- (M) Province
- (M) City

All data fields listed above are necessary for provincial VPD surveillance.

Table 5b: Detailed guide for Exposure Address fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Country	Defaults to “CANADA”. If the case’s exposure occurred outside of Canada, update as appropriate.	All countries.
M	Province	This is mandatory only if “CANADA” is selected as Country . Defaults to “ONTARIO”. If the case’s exposure occurred within Canada, select the province/territory where the case’s exposure occurred.	All provinces and territories in Canada.
M	City	This is mandatory only if “CANADA” is selected as Country . Select the city where the exposure occurred.	For exposures that occurred in Ontario, select as appropriate. “UNKNOWN” is an option. For exposures that occurred outside Ontario, type the appropriate city (free-text).

5.3 Setting/Travel Location Description Details

Special Considerations

This section is not routinely required for provincial reporting purposes. However, PHO may issue an Enhanced Surveillance Directive (ESD) for completing this section in the event this level of detail is important for an investigation of a VPD.

Steps:

1. Scroll down and click on the (+) sign beside **Setting/Travel Location Description Details**.
2. Enter the information specified in [Table 5c](#) (see [Appendix 8, screen shot 5.2](#)).
3. Click **Save**.
4. Click **Continue**.

Table 5c: Detailed guide for Exposure Address fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
O	Exposure Setting	Select the setting in which the case was exposed.	COMMUNITY FOOD PREMISES INSTITUTIONAL OTHER SETTINGS TRAVEL UNKNOWN
O	Exposure Setting Type	Select as appropriate. This field is filtered based on the value selected for the case's Exposure Setting . Do not use inactive values that are marked with an (I).	COMMUNITY examples: private homes, schools, shelters FOOD PREMISES examples: cafeterias, delis, restaurants INSTITUTIONAL examples: hospitals, child care centres,

M/R/O	Field Name	Data Entry Information	Dropdown Values
			retirement homes OTHER SETTINGS examples: airplanes, camps, farms TRAVEL examples: Out of Canada, within Canada –Out of Ontario, within Ontario UNKNOWN

5.4 Timeframe Exposed

Steps:

1. Enter the information specified in the quick list below. Refer to [Table 5d](#) for more detailed information (see [Appendix 8, screen shot 5.3](#)).
2. Click **Save**.

Timeframe Exposed Quick List – Mandatory and Required Data Fields

- (M) Client Earliest Exposure Date/Time
- (M) Exposure Mode
- (R) Client Most Recent Exposure Date/Time

All data fields listed above are necessary for provincial VPD surveillance.

Table 5d: Detailed guide for Timeframe Exposed fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Client Earliest Exposure Date/Time	<p>Enter the earliest point in time that the case came in contact with the specific exposure. It is important that the Client Earliest/Most Recent Exposure Dates are contained within the range of Earliest/Most Recent Exposure Dates (see section 5.1).</p> <p>A time stamp is automatically generated when a date is entered. Delete the time (unless specifying the time is critical, as with measles exposures), or complications will arise when attempting to link exposures to cases.</p> <p>For acquisition exposures, this could be: date of arrival at the destination (for travel), earliest date the case was exposed to the source case, or earliest date the case was at the location</p>	

M/R/O	Field Name	Data Entry Information	Dropdown Values
		<p>where the exposure was present. If the date is not known, enter the earliest symptom onset date for the source case minus the maximum incubation period for the VPD.</p> <p>For transmission exposures, this could be the earliest date the case came into contact with another person/location. If the date is not known, enter the earliest symptom onset date for the case under investigation minus the maximum incubation period for the VPD.</p>	
R	<p>Client Most Recent Exposure Date/Time</p>	<p>If available, enter the point in time that the case was last in contact with the specific exposure. It is important that the Client Earliest/Most Recent Exposure Dates are contained within the range of Earliest/Most Recent Exposure Dates (see section 5.1).</p> <p>Delete the time stamp to avoid getting an error. If the case is in continual contact with the specific exposure (e.g., shared household) or the date is unknown, leave blank.</p> <p>For acquisition exposures, this could be: date the case departed from the destination (for travel), latest date in which the case was exposed to the source case, or latest date the case was at the location where the exposure was present.</p> <p>For transmission exposures, this could be the latest date the case came into contact with another person/location.</p>	

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Exposure Mode	<p>Select the value reflecting the nature of the exposure.</p> <p>All cases must have at least one “ACQUISITION” exposure (even if unknown) before the Disposition of the case can be set to “COMPLETE” and Status set to “CLOSED” (see Case Details section).</p> <p>“TRANSMISSION” exposures should be created when it is known that the case has or could have transmitted the disease to someone else.</p>	<p>ACQUISITION</p> <p>Exposure relating to how the case acquired the VPD.</p> <p>TRANSMISSION</p> <p>Exposures that have resulted or could have resulted in transmission of the VPD.</p>
O	Contact Level	<u>Do not use.</u>	
O	Mostly Likely Source	If there is more than one acquisition exposure for the case, select the exposure that is the most likely source of acquiring the VPD for the case. This is not required if the exposure is unknown.	

6.0 Symptoms

Special Considerations

The **Use As Onset** check box can only be selected for one symptom per case and should be selected for the disease-defining symptom where applicable. Certain VPDs have specific disease-defining symptoms that must be used as the **Onset Date** (see [Table 6](#) for more details).

Steps:

1. At the top of the screen, navigate to **Cases > Case > Symptoms**.
2. Pre-populated symptoms are based on clinical evidence supporting the case definitions (specified in [Appendix B, Infectious Diseases Protocol](#)) and/or common manifestation(s) for the specific VPD. For the pre-populated **Symptoms**, enter the information specified in the quick list below (see [Appendix 8, screen shot 6.0](#)). Refer to [Table 6](#) for more detailed information.
3. To add additional **Symptoms**, first click **Save** to save the information entered in the pre-populated symptoms. Then select the symptom from the dropdown list under **Signs and Symptoms** and click **Add** (see [Appendix 8, screen shot 6.0](#)).
4. Click **Save**.

Symptoms Exposed Quick List – Mandatory and Required Data Fields

- (M) Response
- (R) Duration Days or Duration Hours
- (R) Use as Onset
- (R) Site/Description
- (R) Onset Date

All data fields listed above are necessary for provincial VPD surveillance.

Table 6: Detailed guide for Symptoms fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Response	<p>Enter a response for each symptom experienced by the case. <u>Do not enter chronic symptoms that are unrelated to the current disease.</u></p> <p>For measles, rubella and CRS cases, a response must be selected for “RASH, MACULOPAPULAR” as rash onset date is required for enhanced surveillance.</p> <p>For measles cases, only use “FEVER” if oral temperature is $\geq 38.3^{\circ}\text{C}$ as defined by Appendix B, Infectious Diseases Protocol.</p> <p>The “ASYMPTOMATIC” symptom should not have a response of “YES” for confirmed and probable (if applicable) cases.</p>	<p>NOT ASKED</p> <p>Default value. Change to the appropriate response if the case was asked about the symptom.</p> <p>YES</p> <p>Case had the specified symptom. Must be accompanied by the Onset Date and/or Duration Days for the symptom.</p> <p>NO</p> <p>Case did not have the specified symptom.</p> <p>DON'T KNOW</p> <p>Case is unable to recall if they had the symptom.</p> <p>REFUSED</p> <p>Case declines to answer the question when asked.</p>
R	Use as Onset	<p>Check the indicator box to specify the disease-defining symptom. <u>Only one symptom can be selected and must be entered in conjunction with Onset Date.</u> The Onset Date corresponding to this indicator will populate in the Onset Date field in the Case Details section (see Appendix 3 for episode date hierarchy).</p> <p>The symptoms recommended to be used for the Use As Onset indicator (see next column) are selected based on the</p>	<p>Use the following disease-defining symptoms for the Use As Onset indicator:</p> <ul style="list-style-type: none"> ● Chickenpox (varicella): “RASH, VESICULAR” ● Measles: “RASH, MACULOPAPULAR” ● Mumps: “SALIVARY GLANDS INFLAMED [PAROTIDITIS]” ● Pertussis: “COUGH,

M/R/O	Field Name	Data Entry Information	Dropdown Values
		<p>symptom used to calculate the period of communicability for the disease, where applicable, as outlined in Appendix A, Infectious Diseases Protocol.</p> <p>For VPDs not listed here or for cases where the identified disease-defining symptom was not present, use clinical assessment and Appendix B, Infectious Diseases Protocol to identify the Symptom to use for the Use As Onset indicator. If nothing is selected, the symptom with the earliest Onset Date will be used in the episode date hierarchy.</p>	<p>WHOPPING [PAROXYSMAL]” or “COUGHING WITH APNEA/VOMITING”</p> <ul style="list-style-type: none"> • Rubella: “RASH, MACULOPAPULAR”
R	Onset Date	<p>Enter the date that the symptom began. This is required for all Symptoms that have a Response of “YES”. If unknown, the Duration Days/Duration Hours must be entered instead.</p> <p>Since the Onset Date is the highest date in the episode date hierarchy (see Appendix 3) and affects how the Episode Date is determined, it should be entered with some certainty.</p>	
R	Duration Days/Duration Hours	<p>Enter the number of days or number of hours (if less than 24 hours) that the case experienced each symptom. This is only required when Onset Date is unknown for a Symptom with a Response of “YES”.</p> <p>Auto-populates if both Onset Date and Recovery Date are entered.</p>	
R	Site/Description	<p>Enter any relevant additional details (e.g., residual effects) about the symptom.</p> <p>For mumps, enter either ‘UNILATERAL’ or ‘BILATERAL’ for the Symptom = “SALIVARY GLANDS INFLAMED [PAROTIDITIS]”.</p>	

7.0 Interventions

Special Considerations

Among various interventions captured in the **Interventions** screen, hospitalization related to the VPD is the most important intervention to assess for provincial surveillance. This is the only intervention that is required for entry in iPHIS. Every VPD case with an inpatient admission due to the VPD must have a date recorded in the **Start Date/Time** field for the “HOSPITALIZATION” intervention to indicate that the case was hospitalized. Cases only seen in an ER or in an outpatient setting are not considered to be hospitalized.

It is especially important to assess hospitalization status as a key measure of disease burden for invasive VPDs (i.e., Hi, IMD, and IPD), as cases of these diseases are typically hospitalized. Thus, the “NOT HOSPITALIZED” intervention is used to identify those cases that are truly not hospitalized. If a case of Hi, IMD or IPD truly did not have an inpatient admission due to the VPD, indicate this by entering the case’s episode date as the **Start Date/Time** field for the “NOT HOSPITALIZED” intervention.

Important: Do not enter a **Start Date/Time** for both “HOSPITALIZATION” and “NOT HOSPITALIZED”. If **Start Date/Time** is entered for both, only keep the most accurate intervention and delete the other one by clicking **Delete**.

Steps:

1. At the top of the screen, navigate to **Cases > Case > Intervent/Treatments**.
2. To indicate that a case was hospitalized, click **Update** beside the “HOSPITALIZATION” intervention (see [Appendix 8, screen shot 7.0](#)). If “HOSPITALIZATION” is not already on to the pre-populated list, add it by selecting the value from the dropdown list beside **Intervention Type**.

To indicate that the case was not hospitalized for an invasive VPD, click **Update** beside the “NOT HOSPITALIZED” intervention. If “NOT HOSPITALIZED” is not already on to the pre-populated list, add it by selecting the value from the dropdown list beside **Intervention Type**.

3. Enter the information specified in the quick list below. Refer to [Table 7](#) for more detailed information.
4. Click **Save**.

Interventions Exposed Quick List – Mandatory and Required Data Fields

- (M) Intervention Type
- (M) Start Date/Time
- (M) Internal Provider

All data fields listed above are necessary for provincial VPD surveillance.

Table 7: Detailed guide for Interventions fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Intervention Type	<p>“HOSPITALIZATION” should be completed for all VPD cases that had an inpatient hospitalization. ER visits and outpatient visits are not considered a hospitalization.</p> <p>“NOT HOSPITALIZED” should be completed for all invasive VPD cases (i.e., Hi, IMD, IPD) that did not have an inpatient hospitalization.</p> <p>PHUs may complete data entry for other interventions at their discretion.</p>	Auto-populates.
M	Start Date/Time	<p>For “HOSPITALIZATION”, enter the date that the case was admitted to hospital for the VPD. Time is not important for provincial surveillance.</p> <p>For “NOT HOSPITALIZED”, enter the case’s episode date.</p>	
M	Internal Provider	Select the PHU case investigator who obtained the information regarding the hospitalization or other interventions. This is not the person who provided care to the case while in hospital; the name of the hospital can be entered under Location (optional).	Values are specific to each PHU.

8.0 Complications

Special Considerations

This section is not routinely required for provincial surveillance but may be helpful for case management. To enter a complication, only the **Complication** field is mandatory.

If there are no complications to report, this section can be left blank. Use this section according to the PHU's policies and procedures.

Steps:

1. At the top of the screen, navigate to **Cases > Case > Complications**.
2. Select an appropriate **Complication** for the VPD being investigated from the dropdown list. Entering the **Start Date** and **End Date** associated with the **Complication** is optional.
3. Click **Add** (see [Appendix 8, screen shot 8.0](#)).

9.0 Outcome (Fatal cases only)

Special Considerations

This section is required if the client dies while the case is still under investigation and open in iPHIS, whether the death was related to the disease or not. If you later find out that the case has died and the death was related to the VPD, a case should be re-opened and updated in iPHIS. If a report of VPD is received post-mortem, contact the PHO's IVPD team at ivpd@oahpp.ca for consultation.

If a VPD-related death occurs (except for IPD cases), please notify the PHO's IVPD team at ivpd@oahpp.ca.

Steps:

1. At the top of the screen, navigate to **Cases > Case > Outcome**.
2. Select "FATAL" from the dropdown list for **Outcome** and enter the **Outcome Date** (see [Appendix 8, screen shot 9.0](#)). Refer to [Table 8](#) for more detailed information for these specific fields.
3. Click **Save**.
4. Enter additional information in the series of new fields that display (see [Appendix 8, screen shot 9.0](#)). **Disposition Type** and **Facility Name** do not need to be completed, even though they are system-mandatory fields. Refer to [Table 8](#) for more detailed information.
5. Click **Add**.

Outcome Exposed Quick List – Mandatory and Required Data Fields

- (M) Outcome
- (M) Cause of Death
- (R) Outcome Date
- (M) Type of Death

All data fields listed above are necessary for provincial VPD surveillance.

Table 8: Detailed guide for Outcome fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Outcome	Select "FATAL". Only use this field to record a death. <u>Do not record any other outcome.</u> Record all notes describing the fatality in Cases > Case > Notes (see section 10.0).	FATAL
R	Outcome Date	Enter the date of death.	
O	Accurate	Check the box if the Outcome Date is exact.	
M	Cause of Death	Enter the cause of death as found in the coroner's report, death certificate, or other source. If unknown, type 'Unknown'.	
M	Type of Death	Select appropriate value. Select "UNKNOWN" if there is no official report (e.g., death certificate) to identify the cause of death. The source of information can be entered under the Source field.	<p>REPORTABLE DISEASE CONTRIBUTED TO BUT WAS NOT UNDERLYING CAUSE OF DEATH</p> <p>The VPD under investigation led to a complication or a series of events that caused the death.</p> <p>REPORTABLE DISEASE WAS UNDERLYING CAUSE OF DEATH</p> <p>The VPD under investigation directly caused the death.</p> <p>REPORTABLE DISEASE WAS UNRELATED TO CAUSE OF DEATH</p> <p>The VPD under investigation did not cause the death.</p>

M/R/O	Field Name	Data Entry Information	Dropdown Values
			UNKNOWN Cause of death is unknown.
○	Outbreak Related	<u>Do not use.</u>	

10.0 Case Notes

Special Considerations

Case notes are optional for VPDs. Case notes may provide descriptive and pertinent information to supplement the required and mandatory fields, and may also be helpful to case management. This field may be used according to the PHU’s policies and procedures.

If a **Case Note** is created, only provide the minimal amount of identifying information relevant to the case for privacy best practices (e.g., use case’s initials rather than full name).

Steps:

1. At the top of the screen, navigate to **Cases > Case > Notes**.
2. Click **Create New Note** (see [Appendix 8, screen shot 10.0](#)).
3. Complete the information in the quick list below. Refer to [Table 9](#) for more detailed information.
4. Click **Save**.

Case Notes Quick List – Mandatory and Required Data Fields

- (M) Note Date and Time
- (M) Note
- (M) Provider

All data fields listed above are necessary for provincial VPD surveillance.

Table 9: Detailed guide for Case Notes fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Note Date and Time	Enter the date and time of the note creation.	
M	Note	Enter additional information to supplement the mandatory and required fields or information relevant to case management.	

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Provider	Select the name of the iPHIS user documenting the note.	

11.0 Closing a Case

Special Considerations

Specific fields on the **Case Details** screen (listed in the quick list below) must be updated and completed as per guidelines before closing a VPD case. If contacts are identified during the investigation, enter them as specified in the iPHIS [Bulletin #21](#) (OM Contact Entry) and [OM Contact Entry User Guide](#).

Once the case is closed in iPHIS, the case needs to be re-opened to make any updates to the record.

Steps:

1. At the top of the screen, navigate to **Cases > Case > Case Details**.
2. Update the fields in the quick list below. Refer to [Table 10](#) for more detailed information (see [Appendix 8, screen shot 1.1](#)).
3. Click **Save**.

Closing a Case Quick List – Mandatory and Required Data Fields

- (R) Subtype
- (R) Further Differentiation
- (M) Classification
- (M) Classification Date
- (M) Outbreak Case Classification
- (M) Outbreak Class. Date
- (M) Disposition
- (M) Disposition Date
- (M) Status
- (M) Status Date

All data fields listed above are necessary for provincial VPD surveillance.

Table 10: Detailed guide for closing a case

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
R	Subtype	<p>This field is required for Hi, IMD and IPD. Select as appropriate.</p> <p>If “OTHER (SPECIFY)” has been selected from the dropdown list, enter additional details in the Further Differentiation field. For IMD and IPD, if the subtyping result indicates that the specimen could not be grouped/typed, select “NON-GROUPABLE/TYPABLE”.</p> <p>If subtyping was not done or result is unavailable at the time of data entry, select “UNSPECIFIED” for IPD and IMD, and “undifferentiated” for Hi.</p>	
R	Further Differentiation	<p>This field is required for genotype entry of measles, mumps, and rubella. It is also required for entering additional subtype information for some VPDs as specified below.</p> <p>Use this field to enter one of the following:</p> <ol style="list-style-type: none"> 1. Genotype for measles, mumps, rubella, and CRS in the format of: Sequence name [genotype] E.g., MVs/Ontario.CAN/22.13 [D8] MuVs/Ontario.CAN/5.18 [G]; 2. Additional details when “OTHER (SPECIFY)” is selected as Subtype for IMD and IPD; 3. Additional details when causative agent has been detected for AFP; 4. Additional details using the naming convention written on the laboratory slips (e.g., biotype information for Hi). 	

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Classification	<p>Select the value that corresponds with the VPD case classification definitions outlined in the VPD-specific Appendix B, Infectious Diseases Protocol.</p> <p>Cases should be closed as “CONFIRMED”, “DOES NOT MEET DEFINITON” or “PROBABLE” (if applicable). <u>Do not use any other values when closing a case.</u></p>	<p>CONFIRMED</p> <p>Case meets the confirmed case definition.</p> <p>PROBABLE</p> <p>Case meets the probable case definition (if applicable).</p> <p>DOES NOT MEET DEFINITION</p> <p>Case does not meet the case definition.</p>
M	Classification Date	Enter the date the final Classification was determined.	
M	Outbreak Case Classification	<p>For sporadic cases, enter the same value as the Classification field.</p> <p>For outbreak related cases, use the specific outbreak case definitions as appropriate. Contact the IVPD team at ivpd@oahpp.ca for assistance in developing an outbreak case definition.</p>	See Classification above.
M	Outbreak Class. Date	Enter the date the final Outbreak Case Classification was determined.	
M	Disposition	<p>Select the value reflecting the current state of the investigation. <u>Do not use “PENDING” when closing a case.</u></p> <p>Cases with a Disposition of “LOST TO FOLLOW UP” or “UNTRACEABLE” can still be classified as a “CONFIRMED” case as long as there is enough information to support meeting the case definition.</p>	<p>DOES NOT MEET DEFINITION</p> <p>Do not use. Use the Classification field to indicate that a case does not meet case definition.</p> <p>COMPLETE</p> <p>Investigation/management is complete.</p> <p>ENTERED IN ERROR</p> <p>Case has been created in error. Select “DOES NOT MEET</p>

M/R/O	Field Name	Data Entry Information	Dropdown Values	
			<p>DEFINITION” for Classification.</p> <p>CLOSED – DUPLICATE – DO NOT USE</p> <p>Case is a duplicate case and should not be counted. Select “DOES NOT MEET DEFINITION” for Classification.</p> <p>LOST TO FOLLOW UP</p> <p>Investigation was started but was not completed due to problems contacting the case.</p> <p>REFERRED TO FNIHB</p> <p>Case was referred to the First Nation’s and Inuit Health Branch (FNIHB) and all relevant information required to continue case/contact management are securely forwarded to the health centre on federally designated land.</p> <p>UNTRACEABLE</p> <p>PHU was unable to make contact with the case to initiate case investigation/follow-up.</p>	
	M	Disposition Date	Enter the date the final Disposition was determined.	
	M	Status	Update to “CLOSED”. Make sure the Disposition is not “PENDING”.	<p>CLOSED</p> <p>Investigation is complete and all necessary data fields have been entered in iPHIS.</p>
	M	Status Date	Update to the date when the decision was made to close the case in iPHIS.	

Appendices

Appendix 1: Summary of mandatory (M) and required (R) fields for provincial VPD surveillance

1.1 Case Details ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Reported Date	6	M	Classification	8
M	Health Unit Responsible	7	M	Classification Date	9
R	Assigned Date	7	M	Outbreak Case Classification	9
M	Branch Office	7	M	Outbreak Class. Date	10
M	Diagnosing HU	7	M	Disposition	10
M	Disease	7	M	Disposition Date	11
M	Aetiologic Agent	7	M	Status	11
R	Subtype	8	M	Status Date	11
R	Further Differentiation	8	M	Priority	11

1.2 Other Details and Reporting Information ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
R	Client Address at Time of Case	12	R	Investigation Start Date	12

2.1 Laboratory: Requisition Information ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
R	Placer Requisition ID	17	M	Requisition Date	17

2.2 Laboratory: Test Information ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Specimen Type	18	R	Collection Date	19
M	Body Site	18	R	Reported Date	20
M	Test Name	19			

2.3 Laboratory: Result Information ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Branch	21	R	Resulted Test Code	21
M	Program Area	21	M	Result	22
R	Disease/Diagnosis	21	R	Assign Result to Case	22
R	Resulted Test Group Code	21			

3.0 Risk Factors ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
R	Medical Risk Factors	24	R	Behavioural Social Factors	26

4.0. Immunizations ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Administration Date/Time	29	M	Lot Number (Expiry Date)	31
M	HU	29	M	Site	31
M	Branch	30	M	Informed Consent	32
M	Provider/Personnel	30	R	Comments	32
M	Agent	30			

5.1 Exposures: Source ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Exposure Level	35	M	Health Unit Responsible	38
M	Exposure Type	35	M	Earliest Exposure Date/Time	38
M	Exposure Name	36	R	Most Recent Exposure Date/Time	40

5.2 Exposures: Exposure Address ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Country	41	M	City	41
M	Province	41			

5.4 Exposures: Timeframe Exposed ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Client Earliest Exposure Date/Time	43	M	Exposure Mode	45
R	Client Most Recent Exposure Date/Time	44			

6.0 Symptoms ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Response	47	R	Duration Days or Duration Hours	48
R	Use as Onset	47	R	Site/Description	48
R	Onset Date	48			

7.0 Interventions ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Intervention Type	50	M	Internal Provider	50
M	Start Date/Time	50			

8.0 Complications ([return to section](#))

M/R	iPHIS field name	Page
M	Complication	51

9.0 Outcome ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Outcome (Fatal)	53	M	Cause of Death	53
R	Outcome Date	53	M	Type of Death	53

10.0 Case Notes ([return to section](#))

M/R	iPHIS field name	Page	M/R	iPHIS field name	Page
M	Note Date and Time	54	M	Provider	54
M	Note	54			

Appendix 2: List of sporadic outbreak numbers and unknown exposures for VPDs

[Table 11](#) presents the provincial sporadic outbreak numbers and provincial unknown exposures associated with sporadic VPD outbreaks. All PHUs can link sporadic VPD cases to the outbreak numbers and unknown exposures listed in the table. **Users must not modify the exposure details for the unknown exposures listed below.** Directions for linking to the unknown exposure are provided in [section 5.0: Exposures](#) of this user guide.

For clusters or outbreaks within a PHU, PHUs can create an outbreak number in iPHIS at their own discretion or with consultation with PHO. This allows the PHUs to track the number of disease-specific clusters or outbreaks over time, as well as link information together for data analysis.

There are some VPDs that do not have an unknown exposure (e.g., CRS and tetanus) because these VPDs should only have known acquisition exposures.

Table 11: Sporadic outbreak number and unknown exposure ID for VPDs

VPD	Sporadic Outbreak Number	Exposure ID	Unknown Exposure Name
Acute Flaccid Paralysis	0000-2013-010	85346	01 – UNKNOWN – ACUTE FLACCID PARALYSIS
Chickenpox (varicella)	0000-2005-007	5321	01-UNKNOWN-CHICKENPOX (VARICELLA)-DO NOT MODIFY
Diphtheria	0000-2005-011	n/a	n/a
<i>Haemophilus influenzae</i> disease, all types, invasive	0000-2005-016	49744	01-UNKNOWN-HAEMOPHILUS INFLUENZAE DISEASE, ALL TYPES, INVASIVE-DO NOT MODIFY
Measles	0000-2005-029	5336	01-UNKNOWN-MEASLES-DO NOT MODIFY
Meningococcal disease, invasive	0000-2005-030	11861	01-UNKNOWN-MENINGOCOCCAL DISEASE-DO NOT MODIFY
Mumps	0000-2005-031	5337	01-UNKNOWN-MUMPS-DO NOT MODIFY

VPD	Sporadic Outbreak Number	Exposure ID	Unknown Exposure Name
Pertussis (whooping cough)	0000-2005-034	5340	01-UNKNOWN-PERTUSSIS (WHOOPIING COUGH)-DO NOT MODIFY
Poliomyelitis, acute	0000-2005-033	n/a	n/a
Rubella	0000-2005-039	5341	01-UNKNOWN-RUBELLA-DO NOT MODIFY
Rubella, congenital syndrome	0000-2005-040	n/a	n/a
<i>Streptococcus pneumoniae</i> , invasive	0000-2005-045	5344	01-UNKNOWN-STREPTOCOCCUS PNEUMONIAE, INVASIVE-DO NOT MODIFY
Tetanus	0000-2005-046	n/a	n/a

Appendix 3: Episode date hierarchy

The **Episode Date** is an estimate of the onset date of disease for a case. In order to determine this date, the following hierarchy is in place in iPHIS:

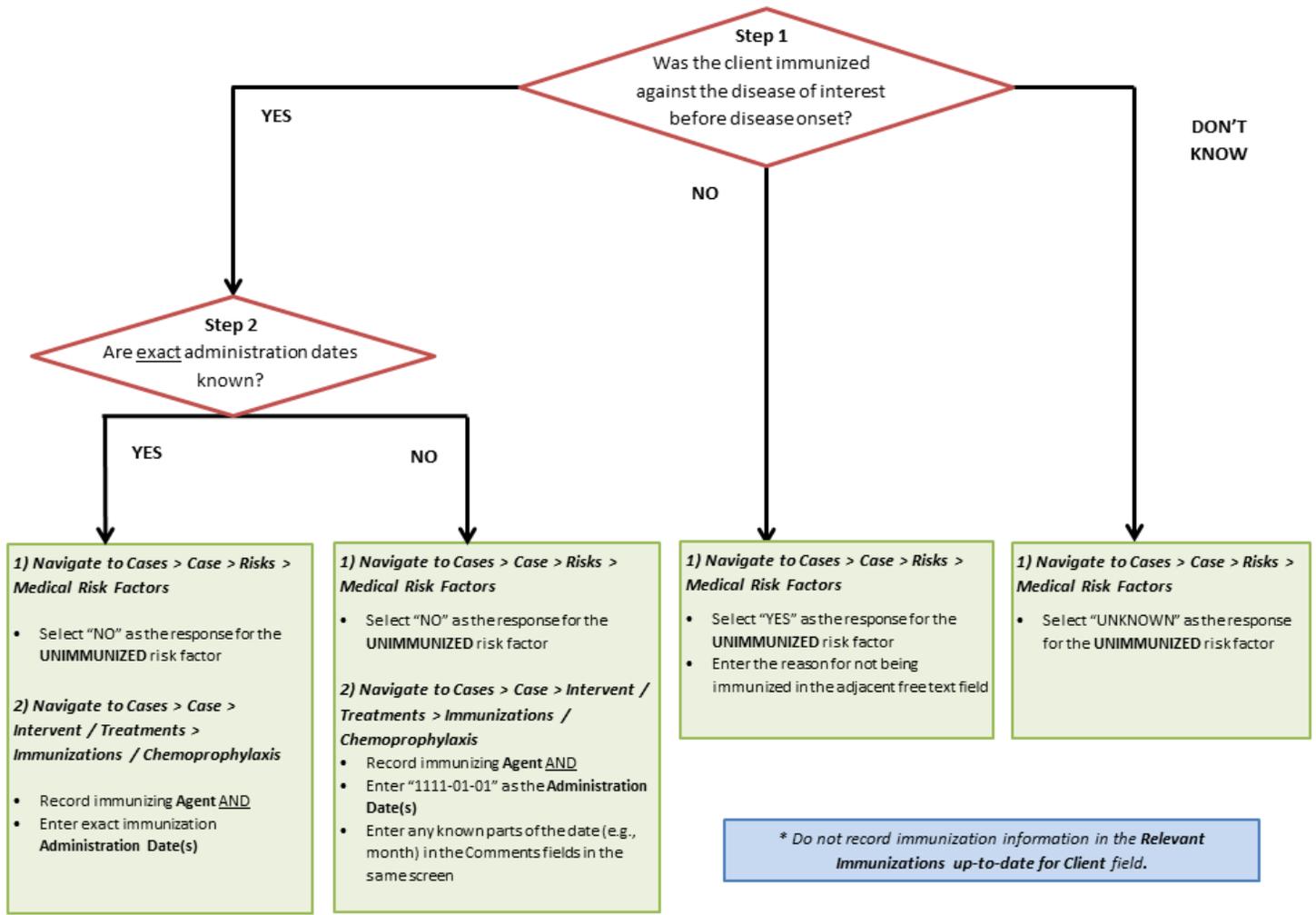
- Onset Date
 - Specimen Collection Date
 - Laboratory Test Date
 - Reported Date

The earliest date available for each stage of the hierarchy will be selected as the **Episode Date** (e.g., if an **Onset Date** exists, it will be used in place of any **Specimen Collection Date**; if no **Onset Date** exists and multiple **Specimen Collection Dates** are available, then the earliest **Specimen Collection Date** would be selected).

The **Accurate Episode Date** is a Cognos-calculated field that reflects the **Episode Date** or the **Reported Date**, depending on which is earlier. This prevents cases from being extracted from Cognos forward in time beyond their **Reported Date**.

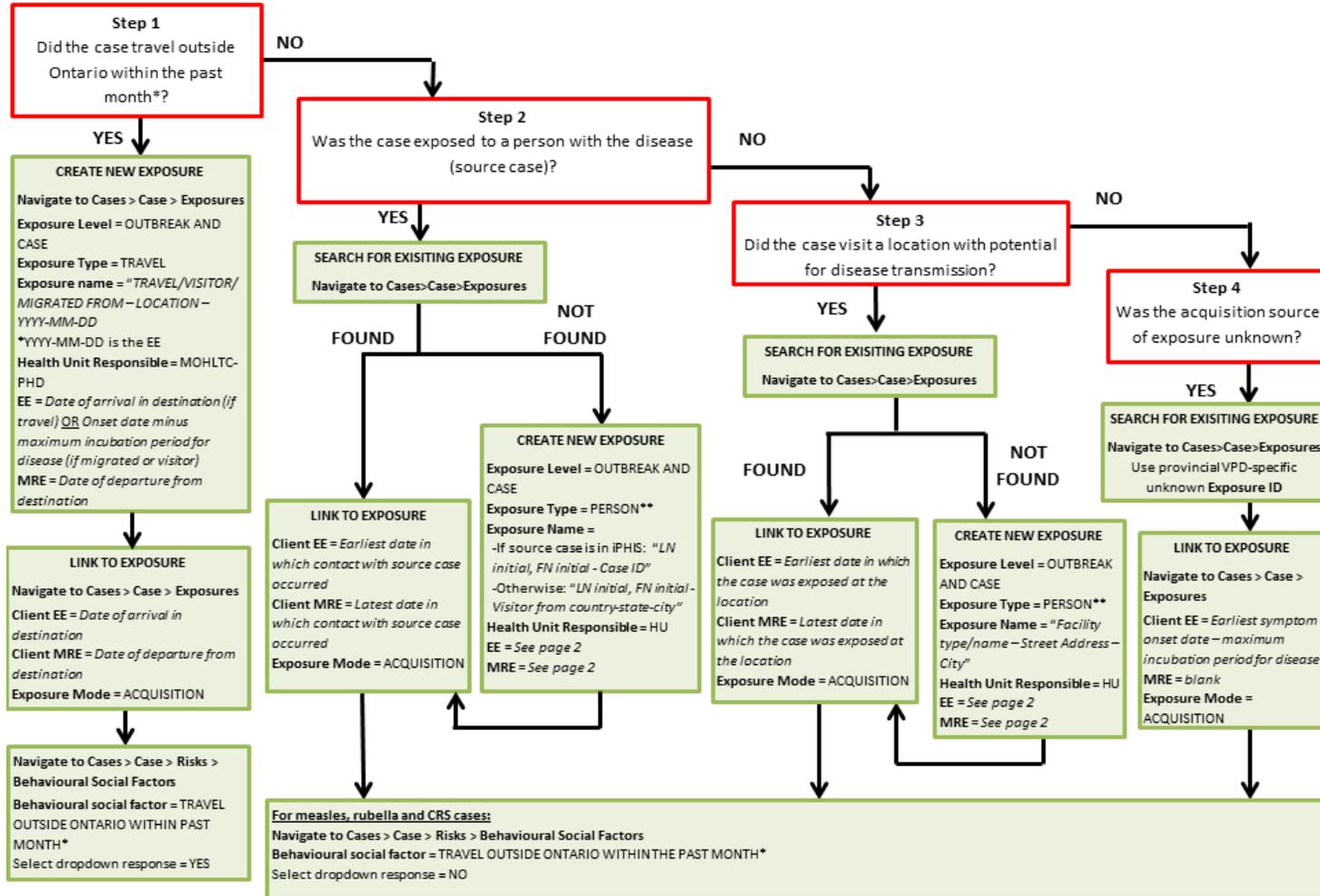
Appendix 4: Decision tree for entering immunizations in iPHIS

Return to [section 3.0: Risk Factors](#) or [section 4.0: Immunizations](#).



Appendix 5a: Decision tree for entering acquisition exposure(s) in iPHIS

A similar approach may be taken for entering transmission exposure(s). Steps are not mutually exclusive as more than one step may apply for each case. Refer to [Appendix A, Infectious Diseases Protocol](#) for infectious/communicable and incubation periods.



* Intended to capture travel that occurred approximately one calendar month prior to symptom onset.

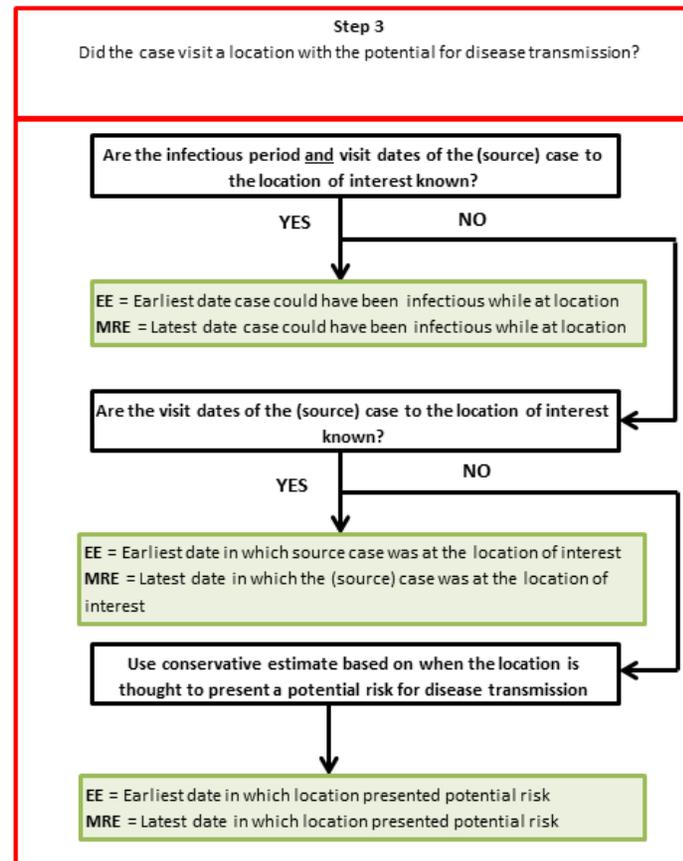
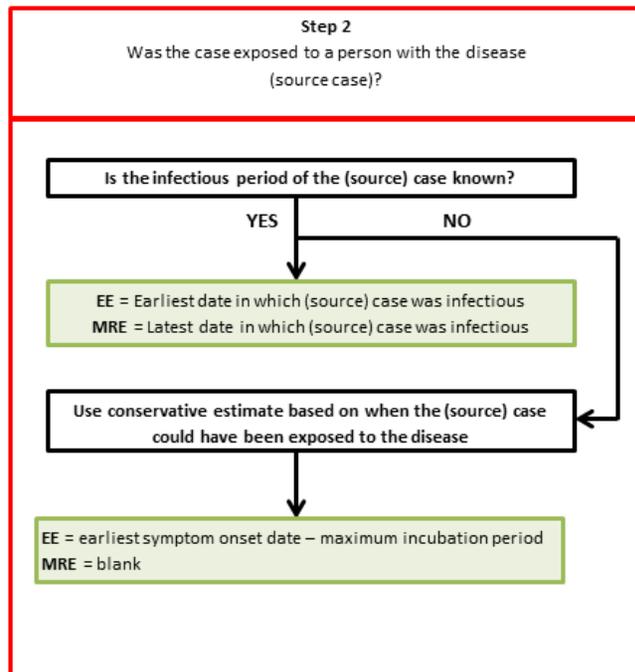
** In the case of tetanus or polio, please contact PHO at ivpd.oahpp.ca to determine the most appropriate Exposure Type.

EE = Earliest Exposure Date/Time

MRE = Most Recent Exposure Date/Time

Appendix 5b: Entry of earliest (EE) and most recent exposure (MRE) date/time fields in iPHIS

Refer to [Appendix A, Infectious Diseases Protocol](#) for infectious/communicable and incubation periods. Return to section [5.0: Exposures](#).



Appendix 6: List of “Agent” values and corresponding vaccine products for each VPD

[Tables 12a-k](#) list the available “Agent” values in iPHIS for VPDs covered in this user guide and the associated product/trade names currently marketed in Canada. These values are current as of the March 2018; changes may occur in the future as new agents are made available and some agents are taken off the market. All changes to these values will be announced in the Weekly iPHIS Notice.

Vaccines that are no longer available for administration in Ontario are inactive in iPHIS and are marked with (I). These agents should only be selected for immunizations received in other jurisdictions or prior to the discontinuation of the vaccine in Ontario.

Table 12a. List of “Agent” values and corresponding vaccine products for Chickenpox (varicella)

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
MMRV – MEASLES, MUMPS, RUBELLA, VARICELLA	Priorix-Tetra®, ProQuad®
Var – VARICELLA	Varilrix®, Varivax® III

Table 12b. List of “Agent” values and corresponding vaccine products for Diphtheria

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
DTaP-IPV – DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS, POLIO	Infanrix®-IPV, Quadracel®
DTaP-IPV-Hib – Diphtheria, Tetanus, Acellular Pertussis, Inactivated Poliomyelitis, Haemophilus b (PEDIATRIC)	Infanrix®-IPV/Hib, Pediacel®, Pentacel®
Td – DIPHTHERIA, TETANUS – ADULT	Td Adsorbed
Td-IPV – TETANUS, DIPHTHERIA, INACTIVATED POLIOMYELITIS (ADULT)	n/a
Tdap – TETANUS, DIPHTHERIA, ACELLULAR PERTUSSIS	Adacel®, Boostrix®
Tdap-IPV – TETANUS, DIPHTHERIA, ACELLULAR PERTUSSIS, INACTIVATED POLIOMYELITIS	Adacel®-Polio, Boostrix®-Polio

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
(I) DIPHTHERIA, PERTUSSIS, TETANUS, POLIO	n/a
(I) DPTPH – DIPHTHERIA, TETANUS, PERTUSSIS, POLIO, HIB	n/a
(I) DT – DIPHTHERIA, TETANUS – PAEDIATRIC	n/a
(I) DT-IPV – Diphtheria, Tetanus, Inactivated Poliomyelitis (PAEDIATRIC)	n/a
(I) DTP – DIPHTHERIA, TETANUS, POLIO – PAED	n/a
(I) DaPPT – DIPHTHERIA, ACELLULAR PERTUSSIS, TETANUS, POLIO	n/a
(I) dTap – DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS (ADOLESCENT/ADULT)	n/a
(I) TdP – DIPHTHERIA, TETANUS, POLIO – ADULTS	n/a

Table 12c. List of “Agent” values and corresponding vaccine products for Hi

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
DTaP-IPV-Hib - Diphtheria, Tetanus, Acellular Pertussis, Inactivated Poliomyelitis, Haemophilus b (PEDIATRIC)	Infanrix®-IPV/Hib, Pediacel®, Pentacel®
Hib – HAEMOPHILUS INFLUENZAE TYPE B	Act-HIB®, Hiberix®, Liquid PedvaxHib®
(I) DPTPH – DIPHTHERIA, TETANUS, PERTUSSIS, POLIO, HIB	n/a

Table 12d. List of “Agent” values and corresponding vaccine products for Measles

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
MMR – MEASLES, MUMPS, RUBELLA	M-M-R®II, Priorix®
MMRV – MEASLES, MUMPS, RUBELLA, VARICELLA	Priorix-Tetra®, ProQuad®

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
(I) M – MEASLES	n/a
(I) MR – MEASLES, RUBELLA	n/a

Table 12e. List of “Agent” values and corresponding vaccine products for IMD

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
MEN-B - MENINGOCOCCAL - B	BEXSERO®, Trumenba®
Men-C-ACWY - MENINGOCOCCAL - CONJUGATE ACWY	Menactra®, Menveo®, Nimenrix®
Men-C-C - MENINGOCOCCAL - CONJUGATE C	Meningitec®, MENJUGATE®, NeisVac-C®,
Men-P-ACWY - MENINGOCOCCAL - POLYSACCHARIDE - ACWY	n/a
(I) Men – MENINGOCOCCAL	n/a
(I) Men-P-AC – MENINGOCOCCAL – POLYSACCHARIDE AC	n/a

Table 12f. List of “Agent” values and corresponding vaccine products for mumps

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
MMR – MEASLES, MUMPS, RUBELLA	M-M-R®II, Priorix®
MMRV – MEASLES, MUMPS, RUBELLA, VARICELLA	Priorix-Tetra®, ProQuad®
(I) Mu – MUMPS	n/a

Table 12g. List of “Agent” values and corresponding vaccine products for pertussis

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
DTaP-IPV – DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS, POLIO	Infanrix®-IPV, Quadracel®
DTaP-IPV-Hib – Diphtheria, Tetanus, Acellular Pertussis, Inactivated Poliomyelitis, Haemophilus b (PEDIATRIC)	Infanrix®-IPV/Hib, Pediacel®, Pentacel®
Tdap – TETANUS, DIPHTHERIA, ACELLULAR PERTUSSIS	Adacel®, Boostrix®
Tdap-IPV – TETANUS, DIPHTHERIA, ACELLULAR PERTUSSIS, INACTIVATED POLIOMYELITIS	Adacel®-Polio, Boostrix®-Polio
(I) aP – ACELLULAR PERTUSSIS	n/a
(I) DIPHTHERIA, PERTUSSIS, TETANUS, POLIO	n/a
(I) DPTPH – DIPHTHERIA, TETANUS, PERTUSSIS, POLIO, HIB	n/a
(I) DaPTP – DIPHTHERIA, ACELLULAR PERTUSSIS, TETANUS, POLIO	n/a
(I) dTap – DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS (ADOLESCENT/ADULT)	n/a

Table 12h. List of “Agent” values and corresponding vaccine products for poliomyelitis, acute

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
DTaP-IPV – DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS, POLIO	Infanrix®-IPV, Quadracel®
DTaP-IPV-Hib - Diphtheria, Tetanus, Acellular Pertussis, Inactivated Poliomyelitis, Haemophilus b (PEDIATRIC)	Infanrix®-IPV/Hib, Pediacel®, Pentacel®
IPV – INACTIVATED POLIOMYELITIS (VERO CELL)	Imovax® Polio
Tdap-IPV – TETANUS, DIPHTHERIA, ACELLULAR PERTUSSIS, INACTIVATED POLIOMYELITIS	Adacel®-Polio, Boostrix®-Polio

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
Td-IPV – TETANUS, DIPHTHERIA, INACTIVATED POLIOMYELITIS (ADULT)	n/a
(I) DIPHTHERIA, PERTUSSIS, TETANUS, POLIO	n/a
(I) DPTPH – DIPHTHERIA, TETANUS, PERTUSSIS, POLIO, HIB	n/a
(I) DT-IPV - Diphtheria, Tetanus, Inactivated Poliomyelitis (PEDIATRIC)	n/a
(I) DTP – DIPHTHERIA, TETANUS, POLIO – PAED	n/a
(I) DaPTP – DIPHTHERIA, ACELLULAR PERTUSSIS, TETANUS, POLIO	n/a
(I) IPV – INACTIVATED POLIOMYELITIS (DIPLOID CELL)	n/a
(I) OPV – POLIO – ORAL	n/a
(I) TdP – DIPHTHERIA, TETANUS, POLIO – ADULTS	n/a

Table 12i. List of “Agent” values and corresponding vaccine products for IPD

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
PNEU-P – PNEUMOCOCCAL – POLYSACCHARIDE 23 VALENT	Pneumo [®] 23, Pneumovax [®] 23
Pneu-C-7 – PNEUMOCOCCAL – CONJUGATE 7 VALENT	Prevnar [®]
Pneu-C-10 – PNEUMOCOCCAL – CONJUGATE 10 VALENT	Synflorix [®]
Pneu-C-13 – PNEUMOCOCCAL – CONJUGATE 13 VALENT	Prevnar [®] 13
(I) PNEU – PNEUMOCOCCAL	n/a
(I) PNEUMOCOCCAL – POLYSACCHARIDE 7 VALENT (PREVNAR)	n/a
(I) Pneu-P-14 – PNEUMOCOCCAL – POLYSACCHARIDE 14 VALENT	n/a

Table 12j. List of “Agent” values and corresponding vaccine products for rubella

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
MMR – MEASLES, MUMPS, RUBELLA	M-M-R®II, Priorix®
MMRV – MEASLES, MUMPS, RUBELLA, VARICELLA	Priorix-Tetra®, ProQuad®
(I) MR – MEASLES, RUBELLA	n/a
(I) R – RUBELLA	n/a

Table 12k. List of “Agent” values and corresponding vaccine products for tetanus

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
DTaP-IPV – DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS, POLIO	Infanrix®-IPV, Quadracel®
DTaP-IPV-Hib - Diphtheria, Tetanus, Acellular Pertussis, Inactivated Poliomyelitis, Haemophilus b (PEDIATRIC)	Infanrix®-IPV/Hib, Pediacel®, Pentacel®
Td – DIPHTHERIA, TETANUS – ADULT	Td Adsorbed
Td-IPV – TETANUS, DIPHTHERIA, INACTIVATED POLIOMYELITIS (ADULT)	n/a
Tdap – TETANUS, DIPHTHERIA, ACELLULAR PERTUSSIS	Adacel®, Boostrix®
Tdap-IPV – TETANUS, DIPHTHERIA, ACELLULAR PERTUSSIS, INACTIVATED POLIOMYELITIS	Adacel®-Polio, Boostrix®-Polio
(I) DIPHTHERIA, PERTUSSIS, TETANUS, POLIO	n/a
(I) DPTPH – DIPHTHERIA, TETANUS, PERTUSSIS, POLIO, HIB	n/a
(I) DT – DIPHTHERIA, TETANUS – PAEDIATRIC	n/a
(I) DT-IPV - Diphtheria, Tetanus, Inactivated Poliomyelitis (PEDIATRIC)	n/a

“Agent” values in iPHIS (as of September 28, 2018)	Product/trade name currently marketed in Canada
(I) DTP – DIPHTHERIA, TETANUS, POLIO – PAED	n/a
(I) DaPTP – DIPHTHERIA, ACELLULAR PERTUSSIS, TETANUS, POLIO	n/a
(I) dTap – DIPHTHERIA, TETANUS, ACELLULAR PERTUSSIS (ADOLESCENT/ADULT)	n/a
(I) T – TETANUS	n/a
(I) TdP – DIPHTHERIA, TETANUS, POLIO – ADULTS	n/a

Appendix 7: Instructions for aggregate varicella reporting

All cases of suspect varicella (including the individual cases that are already reported in iPHIS) are to be reported as aggregate cases in iPHIS. PHUs are required to report the number of aggregate varicella cases by age group in the Outbreak Summary Module every month, regardless of whether or not any counts were observed for a given month.

The process outlined below is a modified excerpt from the [FINAL Outbreak Summary User Guide v.5 2008-01-04](#).

Step 1: Create a new monthly outbreak

1. From the left navigation menu, select **Outbreak > Description**.
2. Enter at least three search criteria to check if the outbreak has previously been created.
3. Click **Search**.
4. If the outbreak has not yet been created, click **New Description**.
5. Enter the information in [Table 13](#) on the **Outbreak Description** screen (see [Appendix 8, screen shot 11.0a](#)).
6. Click **Save**.

Note: Ignore the warning that appears when you click **Save**. Since no cases or contacts will be created under this outbreak, it is okay to proceed as is (see [Appendix 8, screen shot 11.0a](#)).

Table 13: Detailed guide for Outbreak Description fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Primary Health Unit	Select the PHU reporting the counts.	All PHUs in Ontario.
M	Outbreak Name	Use the following naming convention to enter the outbreak name: <i>Chickenpox – Reporting Health Unit – Reporting Month Reporting Year</i> E.g., Chickenpox –Timiskaming Health Unit – 08 2018	

M/R/O	Field Name	Data Entry Information	Dropdown Values
R	Outbreak Type	Select "CHICKENPOX". <u>Do not use any other values.</u>	CHICKENPOX
M	Outbreak Status	Select "OPEN".	<p>OPEN Reporting is ongoing.</p> <p>CLOSED Reporting is complete.</p>
M	Status Date	<p>Enter the first day of the month that the counts are reported for. For example, if entering counts for September 2018, enter 2018-09-01.</p> <p>Time is optional as it not required for provincial surveillance.</p>	
M	Outbreak Classification	Select "CONFIRMED". <u>Do not use any other values.</u>	CONFIRMED
M	Classification Date	<p>Enter the first day of the month that the counts are reported for. For example, if entering counts for September 2018, enter 2018-09-01.</p> <p>Time is optional as it not required for provincial surveillance.</p>	
M	Contact Tracking Required	Select "NO".	NO

Step 2: Reporting info

1. Select **Reporting Info** tab from the top of the screen.
2. Enter the information in [Table 14](#) on the **Reporting Information** screen (see [Appendix 8, screen shot 11.0b](#)).
3. Click **Save**.

Table 14: Detailed guide for Reporting Information fields

Legend: ● M = mandatory field; ● R = required field; ● O = optional field

M/R/O	Field Name	Data Entry Information	Dropdown Values
M	Reported Date	Enter the first day of the month that the counts are reported for. For example, if entering counts for September 2018, enter 2018-09-01.	

Step 3: Entering aggregate counts

1. Select **Summary > Role** from the top of the screen.
2. Check the box for “OTHER” under the **Roles** screen.
3. Click **Save**.
4. Select **Summary > Age Range** from the top of the screen.
5. Enter the number of cases of varicella reported that month for each age group under the **Age Range Counts** screen (see [Appendix 8, Screen shot 11.0c](#)).

Note: If no cases of varicella are reported for that respective month, do not enter anything. Entering zeroes will not allow you to save the record. Instead, leave the screen blank and proceed to [Step 4](#) below.

6. Click **Save**.

Step 4: Closing and confirming the outbreak

1. When all reported cases have been entered for the month, the outbreak needs to be closed. Navigate back to the **Outbreak Description** screen by selecting **OB Desc.** from the top of the screen.
2. If no cases of varicella have been reported for that respective month (i.e., no aggregate counts are entered the **Age Range Counts** screen), enter “No cases reported for [Month] [Year]” in the **Outbreak Details** field. Otherwise, leave this field blank.
3. Update the **Outbreak Status** to “CLOSED”.
4. Click **Save**.

Appendix 8: iPHIS application screen shots

1.0 Creating a Case: Screen shots

Screen shot 1.0a: Outbreak Search ([return to section 1.0: Creating a Case](#))

The screenshot shows the 'Outbreak Search' form in the iPHIS application. The form is titled 'Outbreak Search' and is located under the 'Outbreak Management' section. The form contains several input fields and dropdown menus for searching outbreaks. The fields include: Outbreak Number, Outbreak Name, Outbreak Status, Outbreak Classification, Onset Date Range, Reported Date, Primary Investigator, Disease Group, Disease, Agent Type, Exposure Id, Exposure Type, Category/Transmission, Outbreak Type, Health Unit Responsible, Aetiologic Agent, Subtype, Exposure Name, and Exposure Location Name. The 'Health Unit Responsible' dropdown is currently set to 'MOHLTC - PHD (0)'. The 'Aetiologic Agent' dropdown is set to 'MUMPS'. The 'Subtype' dropdown is set to 'SUSPECT'. The 'Exposure Name' and 'Exposure Location Name' fields are empty.

Screen shot 1.0b: Outbreak Search Results ([return to section 1.0: Creating a Case](#))

The screenshot shows the 'Outbreak Search Results' table in the iPHIS application. The table is titled 'Outbreak Search Results' and is located under the 'Outbreak Management' section. The table has the following columns: Health Unit Responsible, Outbreak Number, Outbreak Name, Outbreak Classification, Disease, Reported Date, Onset Date, Outbreak Status, and Investigator. The data row shows: Health Unit Responsible: MOHLTC - PHD (0), Outbreak Number: 0000-2005-031, Outbreak Name: SPORADIC MUMPS CASES, Outbreak Classification: SUSPECT, Disease: MUMPS, Reported Date: (empty), Onset Date: (empty), Outbreak Status: OPEN, and Investigator: (empty). A 'Details' button is circled in red next to the Investigator column. Below the table are buttons for 'Search Again' and 'New Description'.

Health Unit Responsible	Outbreak Number	Outbreak Name	Outbreak Classification	Disease	Reported Date	Onset Date	Outbreak Status	Investigator
MOHLTC - PHD (0)	0000-2005-031	SPORADIC MUMPS CASES	SUSPECT	MUMPS			OPEN	

Screen shot 1.0c: Case Search Results ([return to section 1.0: Creating a Case](#))

The screenshot shows the 'Case Search Results' table in the iPHIS application. The table is titled 'Case Search Results' and is located under the 'Outbreak Management' section. The table has the following columns: Health Unit Responsible, Case ID, Case Name, Date of Birth, Case Classification, Case Disease, Case Disposition, Case Status, and Primary Investigator. The data row shows: Health Unit Responsible: MOHLTC - PHD (0), Case ID: 2246, Case Name: APPLE, AMY, Date of Birth: 1981-02-20, Case Classification: CONFIRMED, Case Disease: MUMPS, Case Disposition: PENDING, Case Status: OPEN, and Primary Investigator: (empty). A 'Details' button is circled in red next to the Primary Investigator column. Below the table are buttons for 'Search Again', 'New Case', and 'Link Cases'. Above the table are buttons for 'Contacts', 'Cases', 'Exposures', and 'Supply Orders'.

Health Unit Responsible	Case ID	Case Name	Date of Birth	Case Classification	Case Disease	Case Disposition	Case Status	Primary Investigator
MOHLTC - PHD (0)	2246	APPLE, AMY	1981-02-20	CONFIRMED	MUMPS	PENDING	OPEN	

Screen shot 1.0d: Client Sub-Search ([return to section1.0: Creating a Case](#))

Screen shot 1.1: Case Details ([return to section1.1: Case Details](#) or [11.0: Closing a Case](#))

Screen shot 1.2: Other Details and Reporting Information (return to [section 1.2: Other Details and Reporting Information](#))

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Outbreak Management

Outbreak Number	0000-2005-031	Outbreak Name	SPORADIC MUMPS CASES
Outbreak Type	RESPIRATORY / DIRECT CONTACT - COMMUNITY	Outbreak Status	OPEN
Health Unit Responsible	MOHLTC - PHD (0)	Reported Date	
Primary Disease	MUMPS		

Case ID 2246 Client Name Client ID 1478 Date of Birth [Details](#)

Episode Date 2012-10-14 Episode Date Type ONSET

[Contacts](#)
[Cases](#)
[Exposures](#)
[Supply Orders](#)

Other Details

Client Address at Time of Case

Sensitive Occupation

Travel Immigration and Other

Transcriber Information

Transcriber Last Name

Transcriber First Name

Date of Transcription

Created By BRUCE, CHERIE

Created Date 2010-09-21 10:19:01

Reporting Information

Received Date

Notification Method

Investigation Start Date

Reporting Source

* Enter External Source Type and either Source Name or City for filter

External Source Type Source Name City [Filter](#)

Type Name

Other Reporting Source Type

Other Reporting Source Name

[Save](#) [Check Classification](#)

[+ Physician](#)

[+ Assignment History](#)

2.0 Laboratory: Screen shots

Screen shot 2.1: Requisition Information (return to [section 2.1: Requisition Information](#) or [section 2.2: Test Information](#))

Lab Requisition Details

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Demographics
General
Administration
System Admin
CD
TB
STD
Lab
Mass
Public Health
Outbreak
Reports
Logoff

Outbreak Information
Outbreak Number: 0000-2005-031
Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible: MOHLTC - PHD (0)
Primary Disease: MUMPS
Outbreak Name: SPORADIC MUMPS CASES
Outbreak Status: OPEN
Reported Date:

Client Information
Case ID: 2246 Client Name: Client ID: 1478 Date of Birth: [Details]
Episode Date: 2012-10-14 Episode Date Type: ONSET

Requisition Information
Placer Requisition ID: 18C000150
Responsible Authority: MOHLTC - PHD
* Enter External Source Type and either Source Name or City for filter
External Source Type: [Dropdown] Source Name: [Text] City: [Text] [Filter]
Ordering Provider: [Dropdown]
External Number: [Text]
Comments: [Text]
Lab: [Dropdown]
Requisition Date: 2018-08-17 [Calendar Icon]

Test and Result Summary
Program Area: [Dropdown] Test Panel: [Dropdown]

Set ID	Specimen Type	Specimen ID	Def.	Body Site	Test Name	Test Result Status	Collection Date	Reported Date	[Add Test]
--------	---------------	-------------	------	-----------	-----------	--------------------	-----------------	---------------	------------

Screen shot 2.2: Test Information (return to [section 2.2: Test Information](#) or [section 2.3: Result Information](#))

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Lab Test Details

Outbreak Number: 0000-2005-031
 Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
 Health Unit Responsible: MOHLTC - PHD (0)
 Primary Disease: MUMPS
 Outbreak Name: SPORADIC MUMPS CASES
 Outbreak Status: OPEN
 Reported Date:

Case ID: 2246 Client Name: APPLE, AMY Client ID: 1478 Date of Birth: 1981-02-20 [Details]

Episode Date: 2012-10-14 Episode Date Type: ONSET

[Contacts] [Cases] [Exposures] [Supply Orders]

Client Information

Client Name: APPLE, AMY Birth Date: 1981-02-20
 Gender: FEMALE Health Unit: TORONTO (3895)
 Placer Requisition ID: 19C000150

[Requisition Details]

Test Information

Set ID: 1
 Specimen Type: Blood
 Specimen ID:
 Body Site: Blood
 Test Name: MICROBIOLOGY
 Test Result Status:
 Collection Date: 2018-08-17
 Reported Date: 2018-08-17
 Defining Specimen:

[Save] [New] [Delete]

Result Summary

Set OBX Id	Program Area	Result	Disease/Diagnosis	Resulted Test Code
				[Add Result]

Screen shot 2.3: Result Information (return to [section 2.3: Result Information](#))

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Lab Result Details

Outbreak Number: 0000-2005-031
 Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
 Health Unit Responsible: MOHLTC - PHD (0)
 Primary Disease: MUMPS
 Outbreak Name: SPORADIC MUMPS CASES
 Outbreak Status: OPEN
 Reported Date:

Case ID: 281 Client Name: * TOMATO, SAUCE Client ID: 103 Date of Birth: 1980-01-02 [Details]

Episode Date: 2006-12-04 Episode Date Type: REPORTED

[Contacts] [Cases] [Exposures] [Supply Orders]

Client and Test Information

Client Name: TOMATO, SAUCE Birth Date: 1980-01-02
 Gender: FEMALE Health Unit: MOHLTC - PHD (0)
 Placer Requisition ID: EXT1745
 Specimen Type: Swab Body Site: Nasopharyngeal
 Collected Date: Reported Date:

[Requisition Details] [Test Details]

Result Information

Set OBX Id:
 Health Unit: MOHLTC - PHD
 Branch: Not Applicable
 Program Area: CD
 Disease/Diagnosis: MUMPS
 Resulted Test Group Code: CD - Resp/Dir Cont Resulted Test Code: Culture - Viral
 Result: ISOLATED
 Assign result to case: 281, 2006-12-04, B26, MUMPS
 Observation Value:

[Save] [New] [Delete] [Create Default Case and Link]
 [Sensitivities]

3.0 Risk Factors: Screen shots

Screen shot 3.0: Risk Factors (return to [section 3.0: Risk Factors](#) or [3.1: Medical Risk Factors](#) or [3.2: Behavioural Social Factors](#))

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Outbreak Management

Outbreak Number: 0000-2005-031
Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible: MOHLTC - PHD (0)
Primary Disease: MUMPS

Case ID: 2246 Client Name: APPLE, AMY Client ID: 1478 Date of Birth: 1981-02-20 [Details](#)
Episode Date: 2012-10-14 Episode Date Type: ONSET

Contacts Cases Exposures Supply Orders

Outbreak Management > Case > Risks

Risks

Medical Risk Factors

IMMUNOCOMPROMISED (SPECIFY)	NOT ASKED					Notes
OTHER (SPECIFY)	NOT ASKED					Notes
PARTIALLY/INCOMPLETELY IMMUNIZED	NOT ASKED					Notes
UNIMMUNIZED	YES					Notes
UNKNOWN	NOT ASKED					Notes

[No to All](#)

Behavioural Social Factors

ATTENDS POST-SECONDARY INSTITUTION	NOT ASKED					Notes
OTHER (SPECIFY)	NOT ASKED					Notes
TRAVEL OUTSIDE ONTARIO WITHIN THE PAST MONTH	NOT ASKED					Notes
UNKNOWN	NOT ASKED					Notes

[No to All](#)

[Save](#)

4.0 Immunizations: Screen shots

Screen shot 4.0a: New Immunization (return to [section 4.0: Immunizations](#))

The screenshot displays the 'Outbreak Management' interface. The top navigation bar includes links for Home, Client Search, Wait Queue, Scheduling, To Do's, Lab, Site Map, Help, About, and Logoff. The left sidebar contains a menu with options: Demographics, General, Administration, System Admin, CD, TB, STD, Lab, Mass, Public Health, Outbreak, Reports, and Logoff. The main content area shows outbreak details for 'SPORADIC MUMPS CASES' (Outbreak Number: 0000-2005-031, Status: OPEN). It includes fields for Case ID (451), Client Name (LIME, COCONUT), Client ID (296), Date of Birth (2001-04-03), and Episode Date (2008-04-14). The 'Interventions' section is active, featuring a 'New Intervention' button and a table of existing interventions. A red circle highlights the 'Immunizations / Chemoprophylaxis' link and the 'New Immunization' button. Below the table, there are fields for External Provider Filter (Professional Status, Source Name, HU, City) and an External Provider dropdown.

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Outbreak Management

Demographics
General
Administration
System Admin
CD
TB
STD
Lab
Mass
Public Health
Outbreak
Reports
Logoff

Outbreak Number 0000-2005-031
Outbreak Type RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible MOHLTC - PHD (0)
Primary Disease MUMPS
Outbreak Name SPORADIC MUMPS CASES
Outbreak Status OPEN

Case ID 451 **Client Name** LIME, COCONUT **Client ID** 296 **Date of Birth** 2001-04-03 **Details**
Episode Date 2008-04-14 **Episode Date Type** CLINICAL

Contacts **Cases** **Exposures** **Supply Orders**
Outbreak Management > Case > Interventions

Interventions
New Intervention

Intervention Type
Start Date/Time End Date/Time
Internal Provider Location

* Enter either Professional Status, Source Name, HU, or City for filter.

External Provider Filter
Professional Status Source Name
HU City **Filter**
SIMCOE MUSKOKA DISTRICT (2260)

External Provider

Save

Intervention Type	Start Date/Time	End Date/Time	Internal Provider	External Provider	Location	
HOSPITALIZATION	2008-04-15 15:53:11		EXTERNAL, OTHER			Update Delete Notes

Immunizations / Chemoprophylaxis
New Immunization

Editable	Agent	Administration Date/Time	Dose #	Reason for Administration	Comments
----------	-------	--------------------------	--------	---------------------------	----------

Screen shot 4.0b: Immunizations (return to [section 4.0: Immunizations](#))

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Immunizations

Outbreak Number 0000-2005-031 **Outbreak Name** SPORADIC MUMPS CASES
Outbreak Type RESPIRATORY / DIRECT CONTACT - COMMUNITY **Outbreak Status** OPEN
Health Unit Responsible MOHLTC - PHD (0) **Reported Date**
Primary Disease MUMPS

Case ID 451 **Client Name** **Client ID** 296 **Date of Birth** [Details](#)
Episode Date 2008-04-14 **Episode Date Type** CLINICAL

[Contacts](#) [Cases](#) [Exposures](#) [Supply Orders](#)

Immunizations

Administration Date/Time Accurate

HU Branch

* Enter either Professional Status, Source Name, HU, or City for filter.

[Filter](#)

Provider/Personnel

Professional Status

Recorded By

Where Administered

Agent Formulary

Agent

Lot Number (Expiry Date)

Site Route

Dosage Dosage Units

Dose # Informed Consent

Reason for Administration

Source of Information Accurate

Comments

[Save](#) [Delete](#) [New](#)

5.0 Exposures: Screen shots

Screen shot 5.0a: Exposure Sub-Search (return to [section 5.0: Exposures](#))

Outbreak Management

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Demographics
 General
 Administration
 System Admin
 CD
 TB
 STD
 Lab
 Mass
 Public Health
 Outbreak
 Reports
 Logoff

Outbreak Number 0000-2005-031
Outbreak Type RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible MOHLTC - PHD (0)
Primary Disease MUMPS

Outbreak Name SPORADIC MUMPS CASES
Outbreak Status OPEN
Reported Date

Case ID 2246 **Client Name** APPLE, AMY **Client ID** 1478 **Date of Birth** 1981-02-20 [Details](#)
Episode Date 2012-10-14 **Episode Date Type** ONSET

[Contacts](#) [Cases](#) [Exposures](#) [Supply Orders](#)

Outbreak Management > Exposure Sub-Search

Exposure Sub-Search

Health Unit Responsible: MOHLTC - PHD (0) [v]
 Exposure ID: []
 Exposure Level: [v]
 Potential Source Case Last Name: []
 Potential Source Case First Name: []
 Exposure Name: []
 Earliest Exposure Date / Time: []
 Category/Transmission: [v]
 Source Details: [v]
 Exposure Setting: [v]
 Exposure Location Name: []

Branch Office Name: [v]
 Exposure Type: [v]
 Active: YES [v]
 Most Likely Source for the Outbreak: []
 Most Recent Exposure Date / Time: []
 Source: [v]
 Exposure Setting Type: [v]

Sort Order **Ascending/Descending**

Exposure Level: 1 ASCENDING [v]
 Exposure Name: 2 ASCENDING [v]
 Category/Transmission: 3 ASCENDING [v]
 Source: 4 ASCENDING [v]
 Source Details: 5 ASCENDING [v]
 Exposure Setting: 6 ASCENDING [v]
 Exposure Setting Type: 7 ASCENDING [v]
 Exposure Location Name: 8 ASCENDING [v]
 Earliest Exposure Date: 9 ASCENDING [v]
 Most Recent Exposure Date: 10 ASCENDING [v]

[Search](#) [Clear All](#) [Retrieve Criteria](#)

Screen shot 5.0b: Exposure Sub-Search Results (return to [section 5.0: Exposures](#))

Outbreak Management

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Demographics
 General
 Administration
 System Admin
 CD
 TB
 STD
 Lab
 Mass
 Public Health
 Outbreak
 Reports
 Logoff

Outbreak Number 0000-2005-031
Outbreak Type RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible MOHLTC - PHD (0)
Primary Disease MUMPS

Outbreak Name SPORADIC MUMPS CASES
Outbreak Status OPEN
Reported Date

Case ID 2246 **Client Name** *APPLE, AMY **Client ID** 1478 **Date of Birth** 1981-02-20 [Details](#)
Episode Date 2012-10-14 **Episode Date Type** ONSET

[Contacts](#) [Cases](#) [Exposures](#) [Supply Orders](#)

Outbreak Management > Exposure Sub-Search Results

Exposure Sub-Search Results

Level	Name	Category/Transmission	Source	Details	Setting	Setting Type	Exposure Location Name	Earliest Date	Most Recent Date	Most Likely Source	
CASE ONLY	VENEZUELA - TRAVEL - 2008-01-15	Person-to-person	Unknown	Unknown				2008-01-15 00:00:00			
OUTBREAK AND CASE	01-UNKNOWN-MUMPS	Unknown	Unknown	Unknown				1111-01-01 00:00:00			Select
OUTBREAK AND CASE	FRIDAY FRIDAY							2008-05-30 14:24:35			Select
OUTBREAK AND CASE	BETHUSBRAND, KELLY-1231-2007-07-15							2007-07-15 10:41:23			Select

[Search Again](#) [New Exposure](#)

Screen shot 5.1: Source and Exposure Address (return to [section 5.1: Source](#) or [section 5.2: Exposure Address](#))

The screenshot displays the 'Outbreak Management' interface. The top navigation bar includes links for Home, Client Search, Wait Queue, Scheduling, To Do's, Lab, Site Map, Help, About, and Logoff. The main content area is titled 'Outbreak Management' and shows details for Case ID 2246, Client Name 'APPLE, AMY', and Client ID 1478. The primary disease is MUMPS. The interface is divided into several sections: 'Source' (circled in red), 'Exposure Address' (circled in red), and 'Save' (circled in red). The 'Source' section includes fields for Exposure Level (OUTBREAK AND CASE), Exposure Type (PERSON), Case Onset Date, Exposure ID (1971), Health Unit Responsible (GREY BRUCE (2233)), Earliest Exposure Date (2010-08-15), Category/Transmission (Person-to-person), and Source Details (Airborne/Droplet spread). The 'Exposure Address' section includes fields for Country (CANADA), Province (ONTARIO), Street Number (123), Street Type (AVENUE), City (WALKERTON), and Postal Code (K0K0K0). The 'Save' button is located at the bottom left of the form.

Screen shot 5.2: Setting/Travel Location Description Details (return to [section 5.3: Setting/Travel Location Description Details](#))

Outbreak Management

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Demographics
General
Administration
System Admin
CD
TB
STD
Lab
Mass
Public Health
Outbreak
Reports
Logoff

Outbreak Number: 0000-2005-031
Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible: MOHLTC - PHD (0)
Primary Disease: MUMPS

Case ID 2246 Client Name: APPLE, AMY Client ID 1478 Date of Birth: 1981-02-20 [Details](#)

Episode Date 2010-09-21 Episode Date Type REPORTED

Contacts Cases Exposures Supply Orders

Health Unit Responsible: GREY BRUCE (2233) Branch Office: Grey Bruce Walkerton Office

Earliest Exposure Date / Time: 2010-08-15 Most Recent Exposure Date / Time: 2010-08-30

Category/Transmission: Person-to-person Source: Shared airspace

Source Details: Airborne/Droplet spread

Exposure Comments:

Exposure Address

[Save](#)

Setting/Travel Location Description Details

Exposure Setting: Exposure Setting Type:

* Enter External Source Type and either Source Name, Health Unit or City for filter

External Source Type: Source Name: Filter

HU#: MOHLTC - PHD (0) City:

Exposure Location Name:

Exposure Setting Comments:

Ward/Section: Room #: Floor: Bed #: HSA/PHD/Link Category:

[Save](#) [Delete](#) [Continue](#)

Screen shot 5.3: Timeframe Exposed (return to [section 5.4: Timeframe Exposed](#))

Outbreak Management

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Demographics
General
Administration
System Admin
CD
TB
STD
Lab
Mass
Public Health
Outbreak
Reports
Logoff

Outbreak Number: 0000-2005-031
Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible: MOHLTC - PHD (0)
Primary Disease: MUMPS

Case ID 2246 Client Name: Client ID 1478 Date of Birth: [Details](#)

Episode Date 2010-09-21 Episode Date Type REPORTED

Contacts Cases Exposures Supply Orders

Timeframe Exposed

Exposure Name: TORONTO MUSEUM - 123 LEARN AVE - 2005-01-20
Source: Shared airspace
Category/Transmission: Person-to-person
Source Details: Airborne/Droplet spread
Setting Type: Airborne/Droplet spread
Setting Type: Airborne/Droplet spread
Earliest Exposure Date / Time: 2010-08-15 00:00:00
Most Recent Exposure Date / Time: 2010-08-30 00:00:00

Client Earliest Exposure Date/Time: 2010-08-25

Client Most Recent Exposure Date/Time: 2010-08-31

Exposure Mode: ACQUISITION

Contact Level: Role: Nature Of Contact: Most Likely Source:

[Save](#)

6.0 Symptoms: Screen shots

Screen shot 6.0: Symptoms (return to [section 6.0: Symptoms](#))

Outbreak Management

Outbreak Number: 0000-2005-031
 Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
 Health Unit Responsible: MOHLTC - PHD (0)
 Primary Disease: MUMPS

Outbreak Name: SPORADIC MUMPS CASES
 Outbreak Status: OPEN
 Reported Date:

Case ID 2246 Client Name: Client ID 1478 Date of Birth: [Details]
 Episode Date 2012-10-14 Episode Date Type ONSET

Outbreak Management > Case > Signs and Symptoms

Signs and Symptoms

Symptom: [Dropdown] [Add]

Symptom	Delete Symptom	Response	Use As Onset	Onset Date	Onset Time	Recovery Date	Recovery Time	Duration Days	Duration Hours	Site / Description	Observed Value	Observed Unit	Notes
ASYMPTOMATIC	<input type="checkbox"/>	NOT ASKED	<input type="checkbox"/>										[Notes]
CHEWING PAIN	<input type="checkbox"/>	NOT ASKED	<input type="checkbox"/>										[Notes]
FATIGUE	<input type="checkbox"/>	NOT ASKED	<input type="checkbox"/>										[Notes]
FEVER	<input type="checkbox"/>	YES	<input type="checkbox"/>	2012-10-14									[Notes]
HEADACHE	<input type="checkbox"/>	NOT ASKED	<input type="checkbox"/>										[Notes]
MYALGIA (MUSCLE PAIN)	<input type="checkbox"/>	NOT ASKED	<input type="checkbox"/>										[Notes]
SALIVARY GLANDS INFLAMED (PAROTIDITIS)	<input type="checkbox"/>	YES	<input checked="" type="checkbox"/>	2012-10-14									[Notes]
SWALLOWING PAIN	<input type="checkbox"/>	NOT ASKED	<input type="checkbox"/>										[Notes]
WEAK	<input type="checkbox"/>	NOT ASKED	<input type="checkbox"/>										[Notes]
OVARY INFLAMMATION	<input type="checkbox"/>	NOT ASKED	<input type="checkbox"/>										[Notes]

[Save] [Delete]

7.0 Interventions: Screen shots

Screen shot 7.0: Interventions (return to [section 7.0: Interventions](#))

Outbreak Management

Outbreak Number: 0000-2005-031
 Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
 Health Unit Responsible: MOHLTC - PHD (0)
 Primary Disease: MUMPS

Outbreak Name: SPORADIC MUMPS CASES
 Outbreak Status: OPEN
 Reported Date:

Case ID 2246 Client Name: APPLE, AMY Client ID 1478 Date of Birth: 1981-02-20 [Details]
 Episode Date 2010-09-21 Episode Date Type REPORTED

Outbreak Management > Case > Interventions

Interventions

[New Intervention]

Intervention Type: [Dropdown]
 Start Date/Time: [Date/Time]
 Internal Provider: [Dropdown]

End Date/Time: [Date/Time]
 Location: [Text]

* Enter either Professional Status, Source Name, HU, or City for filter.

External Provider Filter:
 Professional Status: [Dropdown] Source Name: [Text]
 HU: MOHLTC - PHD (0) City: [Dropdown] [Filter]

External Provider: [Dropdown]

[Save]

Intervention Type	Start Date/Time	End Date/Time	Internal Provider	External Provider	Location	Update	Delete	Notes
COUNSELING						[Update]	[Delete]	[Notes]
EDUCATION						[Update]	[Delete]	[Notes]
EXCLUSION						[Update]	[Delete]	[Notes]
HOSPITALIZATION						[Update]	[Delete]	[Notes]
ISOLATION						[Update]	[Delete]	[Notes]
LETTER 1 - CLIENT						[Update]	[Delete]	[Notes]
LETTER 1 - PHYSICIAN						[Update]	[Delete]	[Notes]
LETTER 2 - CLIENT						[Update]	[Delete]	[Notes]
LETTER 2 - PHYSICIAN						[Update]	[Delete]	[Notes]
OTHER						[Update]	[Delete]	[Notes]

8.0 Complications: Screen shots

Screen shot 8.0: Complications (return to [section 8.0: Complications](#))

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Complications

Demographics
Outbreak Number: 0000-2005-031
Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible: MOHLTC - PHD (0)
Primary Disease: MUMPS
Outbreak Name: SPORADIC MUMPS CASES
Outbreak Status: OPEN
Reported Date: [blank]

Case ID 281 Client Name * TOMATO , SAUCE Client ID 103 Date of Birth 1980-01-02 [Details]
Episode Date 2006-12-04 Episode Date Type REPORTED

Contacts Cases Exposures Supply Orders

Complications

◆ Complication Start Date End Date [Add]

Encephalitis
Meningitis
None
Oophoritis
Orchitis
Other
Pancreatitis
Unknown

9.0 Outcome: Screen shots

Screen shot 9.0: Outcome (return to [section 9.0: Outcome](#))

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Outbreak Management

Demographics
Outbreak Number: 0000-2005-031
Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible: MOHLTC - PHD (0)
Primary Disease: MUMPS
Outbreak Name: SPORADIC MUMPS CASES
Outbreak Status: OPEN
Reported Date: [blank]

Case ID 281 Client Name * TOMATO , SAUCE Client ID 103 Date of Birth 1980-01-02 [Details]
Episode Date 2006-12-04 Episode Date Type REPORTED

Contacts Cases Exposures Supply Orders

Outbreak Management > Case > Outcome

Outcome

Outcome ◆ FATAL Outcome Date [calendar] Accurate
Funeral Date [calendar] Funeral Postponed / Delayed

[Save] [Notes]

Disposition Type ◆ [dropdown] Infection Notification
Facility Name ◆ [text] Liaison [text]
Street Number [text] Street Name [text]
Street Type [dropdown] Street Direction [dropdown]
City [dropdown] Municipality [dropdown]
Telephone [text]

[Add]

Disposition Type Infection Notification Facility Name Liaison Address Telephone

◆ Cause of Death ◆ Type Of Death [dropdown] Outbreak Related Source [text] [Add]

10.0 Case Notes: Screen shots

Screen shot 10.0: Case Notes (return to [section 10.0: Case Notes](#))

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Case Notes

Demographics
General
Administration
System Admin
CD
TB
STD
Lab
Mass
Public Health
Outbreak
Reports
Logoff

Outbreak Number: 0000-2005-031
Outbreak Type: RESPIRATORY / DIRECT CONTACT - COMMUNITY
Health Unit Responsible: NORTIC - PHD (0)
Primary Disease: MUMPS

Outbreak Name: SPORADIC MUMPS CASES
Outbreak Status: OPEN
Reported Date:

Case ID: 2246 Client Name: * APPLE, AMY Client ID: 1478 Date of Birth: 1981-02-20 [Details]
Episode Date: 2012-10-14 Episode Date Type: ONSET

Contacts Cases Exposures Supply Orders

Notes

Create New Note Print

Note Date and Time	Note	Provider	Created By	Created Date	Note Type
--------------------	------	----------	------------	--------------	-----------

Entering aggregate varicella cases: Screen shots

Screen shot 11.0a: Entering aggregate varicella cases – Outbreak Description (return to [Appendix 7: Step 1](#))

Home • Client Search • Wait Queue • Scheduling • To Do's • Lab • Site Map • Help • About • Logoff

Outbreak Description

Demographics
General
Administration
System Admin
CD
TB
STD
Lab
Mass
Public Health
Outbreak
Reports
Logoff

Outbreak Number: 2253-2018-001
Outbreak Type: CHICKENPOX
Health Unit Responsible: PEEL REGION (2253)
Primary Disease:

Outbreak Name: CHICKENPOX - PEEL REGION - 08 2018
Outbreak Status: OPEN
Reported Date:

Outbreak Description > Outbreak Description

Outbreak Description

Warning:
• Please verify the Case Definitions, Disease, Symptoms and Interventions for this Outbreak before creating any Cases or Contacts

New Description Search Outbreak Summary Report

Primary Health Unit: PEEL REGION (2253)
Outbreak Name: CHICKENPOX - PEEL REGION - 08 2018
Outbreak Details:
Outbreak Status: OPEN
Outbreak Classification: CONFIRMED
Onset Date / Time of Index Case:
Reported Date:
Onset Date / Time of Last Case:
Date Outbreak Declared Over:
Quarantine Required: No
Contact Tracking Required: NO
CIOSC Status:
Outbreak Comments:

Outbreak Number: 2253-2018-001
Outbreak Type: CHICKENPOX
Detailed Tracking:
Status Date: 2018-08-01 09:43:50 [History]
Classification Date: 2018-08-01 09:43:50 [History]
Outbreak Duration (days):
Recommended Isolation / Quarantine Duration:
CIOSC Status Date: [History]

Save Delete

Screen shot 11.0b: Entering aggregate varicella cases – Reporting Information (return to [Appendix 7: Step 2](#))

The screenshot shows the 'Reporting Information' section of the 'Outbreak Description' form. The 'Save' button is circled in red.

Outbreak Description

Outbreak Number: 0000-2006-072
 Outbreak Type: CHICKENPOX
 Health Unit Responsible: MOHLTC - PHD (0)
 Primary Disease: CHICKENPOX

Outbreak Name: HEALTH UNIT - 08 2006
 Outbreak Status: CLOSED
 Reported Date: 2006-07-01

Reporting Information

Reported Date: 2006-07-01
 Received By: [Dropdown]
 Notification Method: [Dropdown]
 Investigation Start Date: [Text]

Reporting Source

* Enter External Source Type and either Source Name or City for filter

External Source Type: [Dropdown] Source Name: [Text] City: [Dropdown] Filter: [Button]

Type: [Dropdown] Name: [Text]

Other Reporting Source Type: [Dropdown]
 Other Reporting Source Name: [Text]

Diagnosing HU: [Dropdown]
 Transferred to: [Text]

Save

Screen shot 11.0c: Entering aggregate varicella cases – Age Range Counts (return to [Appendix 7: Step 3](#))

The screenshot shows the 'Age Range Counts' section of the 'Outbreak Description' form. The 'Save' button is circled in red.

Outbreak Description

Outbreak Number: 0000-2018-020
 Outbreak Type: CHICKENPOX
 Health Unit Responsible: MOHLTC - PHD (0)
 Primary Disease: CHICKENPOX

Outbreak Name: CHICKENPOX - MOHLTC - 08 2018
 Outbreak Status: OPEN
 Reported Date: 2018-08-01

Age Range Counts

Age	OTHER
<1	<input type="text"/>
1-4	<input type="text"/>
5-9	<input type="text"/>
10-14	<input type="text"/>
15-19	<input type="text"/>
20-24	<input type="text"/>
25-29	<input type="text"/>
30-39	<input type="text"/>
40-49	<input type="text"/>
50-59	<input type="text"/>
60+	<input type="text"/>
Age Unknown	<input type="text"/>

Save Delete

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Protection and Promotion
Agence de protection et
de promotion de la santé