

# ODRS TIPS – Patient Demographics



## ODRS TEST

User: Tammy Shivers    Home    Disease Reporting    Analysis    Administration    Logout    Help

Disease Reporting: Person

ODRS ID: 6082671    Patient Name: Mama Baby

Reportable Condition: Hepatitis B (including delta) - chronic    Age: 27 Years

Classification Status: Suspected

Person Demographics    Go    Back    Next    Finish    Reset

**1** Last Name: (Required) Baby     Last Name Unknown

First Name: (Required) Mama     First Name Unknown

Middle Name:

Suffix:

Address:

Address at Diagnosis	As-of Date	Type	Street	City	State	Zip	
<input checked="" type="radio"/>	05/11/2015	Home	123 Main Street	Columbus	OH	43215	<input type="button" value="Edit"/> <input type="button" value="Delete"/>
<input type="button" value="Add"/>							

Phone Number:

As-of Date	Type	Phone Number	Extension	
05/11/2015	Office	(123) 456-7890		<input type="button" value="Edit"/> <input type="button" value="Delete"/>
<input type="button" value="Add"/>				

**3** Alias:    

Date of Birth: 1/12/1987

Age at Event: 27    Years        Current Age: 28 Years

Sex: Female   

Pregnant:

Pregnant	As-of Date	Due Date	Number Of Weeks	
<input checked="" type="checkbox"/>	5/1/2015	9/1/2015		<input type="button" value="Edit"/> <input type="button" value="Delete"/>
<input type="button" value="Add"/>				

Race:  White     Asian     Other  
 Black     Hawaiian Native or Pacific Islander     Unknown  
 Amer. Indian or Alaskan Native     Refused To Answer

Ethnicity: Hispanic Or Latino   

Patient Deceased:

Guardian:

Type	As-of Date	Last	First	Middle	Address	Phone	Country Of Birth	
<input type="button" value="Add"/>								

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Country of Birth:

Primary Language: Mandarin   

**5** Understand English:

**6** Speak English:

Track for Perinatal Transmission? Yes   

Artemis Case Number **7**

Notes

Add Note   

Person Demographics    Go    Back    Next    Finish    Reset

Please keep in mind information on the following fields when entering demographic data for perinatal case management:

1. **Name** – First and Last name must be entered on a case or you will receive an error message. If you do not have a name, the unknown boxes can be checked to the right of the name fields.
2. **Address** – Address information is entered and then validated through an external geocoding service. In order to assign a jurisdiction to a case, users click on the **Accept Validated** button after entering the address.
3. **Alias** – This is a field where any other identifying information besides name can be entered that you may have on a person including social security number, maiden name, nickname, prison identification number, etc.
4. **Pregnant** – This field only appears in cases where the previous field of 'Sex' is marked 'Female'. Information can be populated directly in this field or in the Pregnancy Information module where it will carry over so that pregnancy information is kept consistent.
5. **Primary language** – This field is for primary language of mother. If something other than English is selected, pop up boxes appear for 'Understand English' and 'Speak English'.
6. **Track for Perinatal Transmission (read only)**- This field is automatically marked 'Yes' when a woman with Hepatitis B (acute or chronic) is identified as pregnant. This 'yes' will be an indicator of which cases you want to fall under your Perinatal Hep B case management queue. You will be unable to edit this field once it is marked 'yes'; contact perinatal hepatitis B coordinator if this is marked yes in error.
7. **Artemis Case Number** – This field is a 'read only' field and indicates the case number of those cases which were migrated from Artemis into ODRS.

### **Adding Pregnancy Records**

Pregnancy information is captured in the Pregnancy Information module located after Vaccination History in ODRS. This module is unique to hepatitis B females and will appear when a pregnancy is recorded in Person Demographics module.

Basic pregnancy information can be found in patient demographics. More detailed information is found in this module and can be linked back to the pregnancy information on the Person Demographics page. Information includes pregnancy number, birth order, status of mother's pregnancy, prenatal care provider and delivery hospital.

1. **Add New Pregnancy** - The **Add New Pregnancy** button allows users to select from a pregnancy that was entered in the Person Demographics module or add a new pregnancy to the case. Any new pregnancies added in this module will be added to Person Demographics.

Pregnancy Information

No Pregnancies Found

From this screen users will also be able to select any pregnancies entered in the pregnancy control on the Person Demographics module to add additional information to. Once the user clicks the **Add New Pregnancy** button a window will display that allows users to select the pregnancy.

Existing Pregnancies				
Pregnant?	As-of Date	Due Date	Number Of Weeks	
Yes			40	Select
Yes	11/25/2013	06/01/2013		Select

### To add the Pregnancy

1. Click on Add New Pregnancy button.
2. Search results will display existing pregnancies in demographics module. Select pregnancy.
  - a. If the pregnancy you want to add isn't in the existing pregnancies, you can click 'cancel' and add it right there in the pregnancy module.
3. Make sure the following fields are populated:
  - a. Prenatal Notification – Yes, if case identified before mom gives birth. No, if case is identified after mom gives birth.
  - b. Date Identified
  - c. Date LHD Started Investigation
  - d. Is the Mother HBsAg positive?
  - e. When was the mother confirmed HBsAg positive?
  - f. Date of HBsAg Positive Test Result
  - g. Insurance type – this is the insurance type of the mother only
  - h. Status – Mark case as 'Active follow-up'. If they transferred in from another state, mark 'Active follow-up transferred from another state'.
  - i. Delivered –Mark 'No' if mom is still pregnant.

- j. **Important:** Click 'Save Pregnancy' at the bottom of the page; otherwise all information will be lost.

Pregnancy Id: 136333    Pregnant?  Yes  No    As-of Date:     Due Date:     Number Of Weeks:

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★ Prenatal Notification:  Yes  No   

Reporting Source:

★ Date Identified:  (mm/dd/yyyy)   

★ Date LHD Started Investigation:  (mm/dd/yyyy)   

★ Is the Mother HBsAg Positive?  Yes  No

★ When was the Mother Confirmed HBsAg Positive?

★ Date of HBsAg Positive Test Result:  (mm/dd/yyyy)

Expected Delivery Date:  (mm/dd/yyyy)

Pregnancy Number:

Birth Order:

★ Insurance Type:  9/1/2015

★ Status:

★ Delivered:  No  Yes

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**Prenatal Care Information**

Prenatal Facility:  [Add](#)

Prenatal Provider:  [Add](#)

Provider Contact:     Prenatal Chart Number:

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**Delivery Hospital Information**

Delivery Facility:  [Add](#)

Nursery Contact:     Nursery Phone:

**After Delivery: Enter Baby**

1. Go to Pregnancy Information module in mom's case.
2. Click on Edit Record on the line with the correct EDD in mom's case.

Pregnancy Information Go Back Next Finish Reset

Add New Pregnancy

ODRS ID	Name	Type	Pregnancy #	Birth Order	EDD	NotificationType	Status	
	<a href="#">Edit Record</a>		1	1	09/01/2015	Prior to Birth	Active follow-up	Remove

3. Change 'Delivered' to Yes and a new Search screen will appear.
4. Search on Baby's Name to make certain that baby is not in there with another reportable condition. Most likely, this will not be the case.
5. Add infant information in Person Demographics – name, address, date of birth, time, sex, race, and ethnicity.
6. Click 'Save Infant' button at bottom of window. Window should close and take you back to pregnancy module of mother.

**REMINDER: Send the following letters at this time. These letters are included in the Letters Module**

- Infant Referral Letter to Physician
- Birth Letter to Mother
- Introduction Letter to Mother

Last Name (Required):   Last Name Unknown

First Name (Required):   First Name Unknown

Middle Name:

Same Address as Mother

Address:

Address at Diagnosis	As-of Date	Type	Street	City	State	Zip	
<input type="radio"/>	09/01/2015	Home	123 Main Street	Columbus	OH	43215	<span>Edit</span> <span>Delete</span>

Add

Phone Number:

As-of Date	Type	Phone Number	Extension	
				<span>Add</span>

Alias:  Add

Date of Birth:

Time of Birth:  :  :  (Military Time: HH:MM:SS)

Sex:

Race:  White  Black  Amer. Indian or Alaskan Native  Asian  Hawaiian Native or Pacific Islander  Refused To Answer  Other  Unknown

Ethnicity:

✓ Save Infant Cancel

- Click "Save Pregnancy" at bottom of pregnancy module. **NOTE:** If you do not do this, baby case will not save.

**Additional Data – Baby’s Case**

- Clinical module – You will notice that some information from the mother’s case will auto fill on the baby’s case (prenatal notification, reporting source, date identified, and date LHD started investigation). Please fill in additional fields, such as Birth Weight, and Insurance Type of infant. Insurance type and birth weight were previously in alias fields in ODRS (and once the follow up is complete, fill in the date you close the investigation).

- Complete the immunization module. IMPACT can be helpful if you do not have all the child’s immunization dates in your records.

Vaccination Date	Vaccination Time	Type	Manufacturer	Lot Number	Administering Facility
6/6/2014	19:26:00	HBIG	Talecris		Hillcrest Hospital-Mayfield
6/6/2014	19:22:00	HBV			Hillcrest Hospital-Mayfield

- Upon completion of infant follow up, change the classification status.
  - If the child is found by post vaccination serological testing to be HBsAg negative, under the Administration module, change the classification status to "Not a Case" and close the case.

Administration		
<input type="button" value="Edit"/>		
Classification Status: Suspected		
ODH Investigation Status: New		
ODH Update status:		
LHD Investigation Status: Closed		
LHD Update Status: LHD Reviewed		
Event Date: 6/3/2014		
Date Type: Specimen Collection Date		
Send to CDC: <input type="checkbox"/>		
Link to Outbreak:		
Link to Duplicate Disease Report:	<input type="button" value="ODRS ID"/>	<input type="button" value="ODRS ID Of Merged Duplicate Case"/>
		<input type="button" value="CDC Case ID From Merged Duplicate Case"/>

- b. If the child is lost to follow up, or has not completed PVST after the appropriate number of attempts have been made to contact the case, leave the classification status as "Suspect "and close the case.
  - c. If the child is found by PVST to be HBsAg positive, change the classification status to "Confirmed," close the perinatal hepatitis B case and create a new reportable condition for chronic Hepatitis B. The child will then have two ODRS cases and two different reportable conditions.
4. For Status within clinical module, switch to 'closed' once the case is completed. If you are closing a case for any reason other than "Closed by infant completion," please explain in a note.
  - a. If the child has positive anti-HBs or Hepatitis surface antigen antibodies within therapeutic range note that as well.
  - b. If the child does not seroconvert to therapeutic antibody levels, note any additional actions related to that (i.e. second vaccine series, completed second series and is still not at therapeutic antibody level, so on).

### Hep B letters

1. Within Mother's case in the Hep B Letters module, you will find the following letters: Hospital Notification Letter, Introduction Letter to Mother, and Closure Letter to Mother. Once letters are printed an auto note is created in Letters History.

HepB Letters Go Back Next Finish Reset

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**HepB Letters**

**Select Letter:**

Hospital Notification Letter  
 Introduction Letter to Mother  
 Closure Letter to Mother

**Infant Information:**

Select Infant: 1 - 09/01/2015 - Johnny Baby ▼

Select Hospital: ▼

**Select Export Type:**

PDF  WORD

[Print](#)

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**Letters History:**

Letter Name	EDD	Infant Name	Date Printed	Printed By
Hospital Notification Letter	9/1/2015	Johnny Baby	9/3/2015	Tammy Shivers
Introduction Letter to Mother			9/3/2015	Tammy Shivers

2. Within Infant's case you will find the following letters in the Hep B Letters module: Case Transfer Form, Initial Reference Letter to Physician (3doses), Initial Reference Letter to Physician (4 doses), Birth Letter to Mother, Post Vaccination Serology Letter to Physician, and Post Vaccination Serology Letter to Mother. Once letters are printed an auto note is created in Letters History.

HepB Letters

HepB Letters

**Mother Name:**  
Mama Baby

**Select Letter:**

Case Transfer Form  
 Initial Reference Letter to Physician (3 doses)  
 Initial Reference Letter to Physician (4 doses)  
 Birth Letter to Mother  
 Post Vaccination Serology Letter to Physician  
 Post Vaccination Serology Letter to Mother

**Select Export Type:**

PDF  WORD

**Letters History:**

Letter Name	EDD	Infant Name	Date Printed	Printed By
Hospital Notification Letter	9/1/2015	Johnny Baby	9/3/2015	Tammy Shrivvers
Initial Reference Letter to Physician (3 doses)		Johnny Baby	9/3/2015	Tammy Shrivvers

As you are entering cases into ODRS, it is helpful to know who can be entered as a Perinatal Hepatitis B case. According to the Infectious Disease Control Manual, the case definition is as follows:

### CASE DEFINITION

#### Hepatitis B, Perinatal Virus Infection Acquired in the United States or U.S. Territories

#### Clinical Description

Perinatal hepatitis B in the newborn may range from asymptomatic to fulminant hepatitis.

#### Laboratory Criteria for Diagnosis

- HBsAg positive

#### Case Classification

Suspect: supportive serologic findings of hepatitis B infection in an infant aged **1-24 months**. Does **NOT** include infants born **outside of the United States or U.S. territories, or infants born to an HBsAg negative mother**.

Confirmed: HBsAg positivity in an infant aged 1-24 months who was born in the United States or in U.S. territories to an HBsAg positive mother.

We frequently find other possible perinatal hepatitis B cases while working on a current case. You may enter children who were not reported to the health department as long as they meet the case definition criteria for at least a suspect case. If you find children who do not meet the case definition for a perinatal case, but may be a household contact for a current perinatal case, please create a hepatitis B investigation case in ODRS for that individual.

For further information about perinatal hepatitis B including disease education and explanation of labs, please see the Perinatal Hepatitis B section of the Infections Disease Control Manual at <http://www.odh.ohio.gov/pdf/IDCM/hepbperi.pdf> or the Perinatal Hepatitis B program website [http://www.odh.ohio.gov/odhprograms/bid/peri\\_hb/phb1.aspx](http://www.odh.ohio.gov/odhprograms/bid/peri_hb/phb1.aspx).