Kentucky Health Information Exchange (KHIE)

Communicable Disease Lab Entry & Initiating Electronic Case Reports for Reportable Conditions

User Guide

August 2022
Copyright Notice

© 2022 Deloitte. All rights reserved.

Trademarks

“Deloitte,” the Deloitte logo, and certain product names that appear in this document (collectively, the “Deloitte Marks”), are trademarks or registered trademarks of entities within the Deloitte Network. The "Deloitte Network" refers to Deloitte Touche Tohmatsu Limited (DTTL), the member firms of DTTL, and their related entities. Except as expressly authorized in writing by the relevant trademark owner, you shall not use any Deloitte Marks either alone or in combination with other words or design elements, including, in any press release, advertisement, or other promotional or marketing material or media, whether in written, oral, electronic, visual, or any other form. Other product names mentioned in this document may be trademarks or registered trademarks of other parties. References to other parties’ trademarks in this document are for identification purposes only and do not indicate that such parties have approved this document or any of its contents. This document does not grant you any right to use the trademarks of other parties.

Illustrations

Illustrations contained herein are intended for example purposes only. The patients and providers depicted in these examples are fictitious. Any similarity to actual patients or providers is purely coincidental. Screenshots contained in this document may differ from the current version of the HealthInteractive asset.

Deloitte

Deloitte refers to one or more of Deloitte Touche Tohmatsu Limited, a UK private company limited by guarantee ("DTTL"), its network of member firms, and their related entities. DTTL and each of its member firms are legally separate and independent entities. DTTL (also referred to as "Deloitte Global") does not provide services to clients. In the United States, Deloitte refers to one or more of the US member firms of DTTL, their related entities that operate using the "Deloitte" name in the United States and their respective affiliates. Certain services may not be available to attest clients under the rules and regulations of public accounting. Please see www.deloitte.com/about to learn more about our global network of member firms.
## Document Control Information

### Document Information

<table>
<thead>
<tr>
<th>Document Name</th>
<th>Direct Lab Data Entry: Communicable Disease Lab Entry</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project Name</td>
<td>KHIE</td>
</tr>
<tr>
<td>Client</td>
<td>Kentucky Cabinet for Health and Family Services</td>
</tr>
<tr>
<td>Document Author</td>
<td>Deloitte Consulting</td>
</tr>
<tr>
<td>Document Version</td>
<td>1.0</td>
</tr>
<tr>
<td>Document Status</td>
<td>Revised Draft</td>
</tr>
<tr>
<td>Date Released</td>
<td>08/02/2022</td>
</tr>
</tbody>
</table>

### Document Edit History

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Additions/Modifications</th>
<th>Prepared/Revised by</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.1</td>
<td>08/02/2022</td>
<td>Initial Draft</td>
<td>Deloitte Consulting</td>
</tr>
<tr>
<td>0.2</td>
<td>08/04/2022</td>
<td>Revised Draft - KHIE Review</td>
<td>KHIE</td>
</tr>
<tr>
<td>1.0</td>
<td>08/05/2022</td>
<td>Revised Draft Per KHIE Review</td>
<td>Deloitte Consulting</td>
</tr>
</tbody>
</table>
# Table of Contents

1 **Introduction** .......................................................................................................................... 6  
   Overview ..................................................................................................................................... 6  
   Supported Web Browsers ............................................................................................................. 6  
   Mobile Device Considerations ...................................................................................................... 7  
   Accessing the ePartnerViewer ..................................................................................................... 7  

2 **Logging into the ePartnerViewer** ............................................................................................ 7  
   Terms and Conditions of Use and Logging In .............................................................................. 9  

3 **Understanding the Lab Data Entry Dropdown Menu** ............................................................... 11  

4 **Manage User Preferences** ........................................................................................................ 13  
   Create Ordering Provider Details ............................................................................................... 13  
   View & Edit Ordering Provider Details ....................................................................................... 16  
   Delete Ordering Provider Details ................................................................................................ 17  
   Create Ordering Facility Details ................................................................................................. 18  
   View & Edit Ordering Facility Details ......................................................................................... 21  
   Delete Ordering Facility Details ................................................................................................ 22  

5 **Tips for Manually Entering Lab Data** .................................................................................... 24  

6 **Communicable Disease Lab Entry** ........................................................................................ 26  
   User Roles Overview ................................................................................................................... 26  
   Communicable Disease Lab Entry Overview .............................................................................. 27  

7 **Patient Information** ................................................................................................................. 28  

8 **Observation** ............................................................................................................................ 33  
   Ordering Section ......................................................................................................................... 33  
   Observation Section .................................................................................................................... 35  
   Result Type Dynamic Fields ....................................................................................................... 45  
   Adding Multiple Observations .................................................................................................... 51  

9 **Ask on Order Entry** ................................................................................................................ 53  

10 **Lab Data Review** ................................................................................................................... 58  
   Click Hyperlinks to Edit .............................................................................................................. 61  

11 **Initiate Case Report from Communicable Disease Lab Entry** ............................................. 64  
   Initiate Feature Overview ........................................................................................................... 64  
   Communicable Disease Lab Entry Submission ......................................................................... 64  
   Case Report Entry User Summary .............................................................................................. 69  
   Lab Results Submitted by User ................................................................................................. 70  

---

DDE: Communicable Disease Lab Entry  Page 4 of 192  Kentucky Health Information Exchange
12 Initiate Other Reportable Conditions Case Report ........................................ 77
  Patient Information .................................................................................. 78
  Laboratory Information .......................................................................... 83
  Applicable Symptoms ............................................................................ 87
  Additional Information ........................................................................... 90
  Hospitalization, ICU & Death Information .............................................. 94
  Review and Submit: Other Reportable Conditions Case Report ........... 99

13 Initiate Sexually Transmitted Disease Case Report ............................ 101
  Patient Information ................................................................................ 102
  Laboratory Information ......................................................................... 106
  Applicable Symptoms ........................................................................... 109
  Hospitalization, ICU & Death Information ............................................. 113
  Review and Submit: STD Case Report .................................................. 117

14 Initiate Multi-Drug Resistant Organism Case Report ........................ 119
  Patient Information ................................................................................ 120
  Laboratory Information ......................................................................... 125
  Hospitalization, ICU, Disposition & Death Information ......................... 131
  Review and Submit: MDRO Case Report .............................................. 140

15 Initiate Perinatal Hepatitis Case Report ............................................. 142
  Patient Information ................................................................................ 143
  Laboratory Information ......................................................................... 148
  Applicable Symptoms ........................................................................... 154
  Exposure Information ............................................................................ 158
  Hospitalization, ICU & Death Information ............................................. 163
  Review and Submit: Perinatal Hepatitis Case Report ............................. 168

16 Initiate Child Hepatitis Case Report .................................................... 170
  Patient Information ................................................................................ 171
  Laboratory Information ......................................................................... 177
  Hospitalization, ICU & Death Information ............................................. 179
  Review and Submit: Child Hepatitis Case Report .................................. 182

17 Case Report Entry User Summary ...................................................... 185
  Review Previously Submitted Case Reports ......................................... 189
  Copy Previously Submitted Case Reports ............................................ 190
  Initiate Case Report ............................................................................. 191

18 Technical Support .................................................................................. 192
  Toll-Free Telephone Support ............................................................... 192
  Email Support ...................................................................................... 192
1 Introduction

Overview

The Kentucky Health Information Exchange (KHIE) utilizes the Kentucky Online Gateway (KOG) to authenticate if an individual is part of an organization that has access to review patient health information in KHIE. To access KHIE, Authorized Users must establish a KOG account.

As part of KHIE’s ongoing updates and maintenance, additional features have been added to KHIE’s Direct Lab Data Entry functionality to allow Users to enter test results for other reportable conditions. These enhancements made to the Direct Data Entry functionality allow Users with the DDELR Submitter user role to enter test results for any reportable condition. Additionally, Users with the Manual Case Reporter role have the option to submit any Case Report using information from a previously submitted Communicable Disease Lab Entry.

The purpose of this guide is to provide an overview of these changes and provide step-by-step instructions and screenshots showcasing the new features in the ePartnerViewer.

All examples and screenshots used in this guide are simulated with mock data; no Protected Health Information (PHI) is present.

Please Note: All screenshots shown throughout this document reflect how Users would interact with the ePartnerViewer while using a desktop or tablet device. While core functionality remains the same across multiple devices, interface components may vary in presentation.

Supported Web Browsers

Users must access the ePartnerViewer with a supported web browser. The ePartnerViewer is configured to support the following modern browsers on desktop, tablet, and mobile devices:

<table>
<thead>
<tr>
<th>Desktop Browser Version</th>
<th>Mobile Browser Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microsoft Edge</td>
<td></td>
</tr>
<tr>
<td>Version 44+</td>
<td>Version 40+</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Google Chrome</td>
<td></td>
</tr>
<tr>
<td>Version 70+</td>
<td>Version 70+</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Mozilla Firefox</td>
<td></td>
</tr>
<tr>
<td>Version 48+</td>
<td>Version 48+</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Apple Safari</td>
<td></td>
</tr>
<tr>
<td>Version 9+</td>
<td>iOS 11+</td>
</tr>
</tbody>
</table>

Please Note: The ePartnerViewer does not support Microsoft Internet Explorer. To access the ePartnerViewer, Users must use a modern browser such as Google Chrome, Microsoft Edge, Apple Safari, or Mozilla Firefox.
Mobile Device Considerations

The ePartnerViewer is based on responsive design. This means it renders in the best format based on the user’s device size. Responsive design applies to mobile, tablet, and desktop devices. Tablet devices in landscape display mode are considered desktop.

Accessing the ePartnerViewer

To access the ePartnerViewer, users must meet the following specifications:

1. Users must be part of an organization with a signed Participation Agreement with KHIE.
2. Users are required to have a Kentucky Online Gateway (KOG) account.
3. Users are required to complete Multi-Factor Authentication (MFA).

**Please Note:** For specific information about creating a KOG account and how to complete MFA, please review the *ePartnerViewer Login: Kentucky Online Gateway (KOG) and Multi-Factor Authentication (MFA) Quick Reference Guide*.

2 Logging into the ePartnerViewer

Users with the *DDELR Submitter* role in the ePartnerViewer are authorized to access the Communicable Disease Lab Entry to submit test results for any reportable condition. Users with the *Manual Case Reporter* role in the ePartnerViewer are authorized to submit any Case Report for any reportable condition.

To start, you must log into your Kentucky Online Gateway (KOG) account to access the ePartnerViewer:

1. Before accessing the ePartnerViewer, you must log out from any active KOG session or ePartnerViewer session and close the browser window.
2. To navigate to the ePartnerViewer, enter the following URL in a supported browser window: https://epartnerviewer.khie.ky.gov

**Please Note:** The ePartnerViewer does not support Microsoft Internet Explorer. To access the ePartnerViewer, Users must use a modern browser such as Google Chrome, Microsoft Edge, Apple Safari, or Mozilla Firefox.
3. The **Welcome to the Kentucky Online Gateway** screen displays. To login to the ePartnerViewer, click **Sign In**.

![Welcome to the Kentucky Online Gateway](image)

**Please Note:** If you are a State Employee, click **Email Address** under the **State Employee Gateway Login** section on the right side of the **Welcome to the Kentucky Online Gateway** screen.

4. The **KOG Sign In** screen displays. Enter your **Email Address**.

5. Enter your **Password**.

6. Click **Sign In**.

![Citizen (or) Business Partner Sign In](image)

**Please Note:** You must enter the email address and password used when you created your KOG account.
7. **Multi-Factor Authentication**. After logging in, you are asked to complete Multi-Factor Authentication or MFA. You have the option to receive an MFA passcode by Email or Text.

**Please Note:** For specific information on how to complete MFA, please review the ePartnerViewer Login: Kentucky Online Gateway (KOG) and Multi-Factor Authentication (MFA) Quick Reference Guide.

**Terms and Conditions of Use and Logging In**

After logging into the Kentucky Online Gateway, launching the ePartnerViewer application, and completing Multi-Factor Authentication, the **Terms and Conditions of Use** screen displays. Privacy and security obligations are outlined for review.

8. You must click **I Accept** every time before accessing a patient record in the ePartnerViewer.

**Please Note:** The right side of the Portal is grayed out and displays a message that states: **Access is restricted beyond this point. You must accept the terms and conditions before proceeding.**
9. Once you click I Accept, the grayed-out section becomes visible. A message appears that indicates you are associated with an organization. (This is the name of your organization.)

10. Click Proceed to Portal to continue.

---

**Please Note:** If you click Cancel, a pop-up notification displays that indicates that you are about to be logged out. *Use of the ePartnerViewer portal is subject to the acceptance of KHIE’s Terms of Use.*

To proceed to the ePartnerViewer, click either Logout Now or Cancel.
3 Understanding the Lab Data Entry Dropdown Menu

The **Lab Data Entry** tab dropdown menu includes the following items:

1. **COVID Lab Data Entry**:
   - Designed for Users to enter positive COVID-19 lab test results. However, Users can enter both positive and negative COVID-19 lab results here.
   - Allows Users to enter multiple test results at the *same* time for the *same* patient.

   **Please Note**: For specific information about COVID-19 lab reporting, please review the *Direct Data Entry User Guide, COVID-19 Variant Testing + Initiate Case Report Quick Reference Guide*, and the *Training Video: How to Use KHIE's Direct Data Entry (Lab) System* on the [KHIE website](https://www.khie.org).

2. **Communicable Disease Lab Entry**:
   - Designed for Users to enter lab results for communicable diseases.
   - Allows Users to enter up to 70 observations for *multiple diseases* at the *same* time for the *same* patient.

3. **Quick Entry for Negative COVID-19 Test Results**:
   - Designed for Users to enter negative test results more efficiently.
   - Allows Users to enter up to 10 negative test results for *multiple patients* at the *same* time, as long as the same details apply to all patients (i.e. the same Performing Facility, Ordering Facility/Provider, Specimen Type, Test Type, Test Name, Specimen Collection Date, and Observation Result Date).

   **Please Note**: For specific information about COVID-19 lab reporting for negative results, please review the *Direct Data Entry User Guide* and the *Training Video: Quick Entry for Negative COVID-19 Test Results* on the [KHIE website](https://www.khie.org).
4. **Lab Data Entry User Report:**

   ▪ Designed to provide a quick and easy way for Users to view lab results entered during a given time frame.

5. **Manage User Preferences:**

   ▪ Designed as an efficient method for Users to enter repetitive data that's required throughout the entry.

   ▪ Allows Users to enter the Ordering Provider and Ordering Facility details in their User Preferences which provides the ability for Users to quickly select an Ordering Provider or Ordering Facility from the dropdown menu options.

   **Please Note:** The existing Ordering Provider and Ordering Facility details entered for any previously submitted Lab Data Entry (i.e., COVID-19 Lab Data Entry or Quick Entry for Negative COVID-19 Test Results) will be displayed as dropdown menu options on the **Observation** screen of any new Communicable Disease Lab Entry.

   This means you can select the same Ordering Provider and Ordering Facility details previously entered for a different lab data entry for a new Communicable Disease Lab Entry.
4 Manage User Preferences

These are your User Preferences. Prior to entering your lab results, you are required to enter information about your Ordering Provider and Ordering Facility on the Manage User Preferences screen. By entering the Ordering Provider and Ordering Facility details here in your user preferences, you will be able to quickly select an Ordering Provider or Ordering Facility from the dropdown menu options. These dropdown menus are located on the Observation screen for the Communicable Disease Lab Entry.

Create Ordering Provider Details

1. When entering the ePartnerViewer, you must click the Lab Data Entry Tab located in the blue ribbon Navigation Bar at the top of the screen.

2. From the Lab Data Entry Tab dropdown menu, select Manage User Preferences.

3. To create Ordering Provider details, you must select Create Ordering Provider Details.
4. The **Create Ordering Provider** screen displays. From here, you must enter the Ordering Provider Details. There are **mandatory** fields marked with **red asterisks** (*).

5. If available, select the **Prefix** and **Suffix** from the appropriate dropdown menus.

6. Enter the Ordering Provider's **First Name** and **Last Name**.
7. Enter the Ordering Provider’s **Address, City, State, and Zip Code**.

8. Enter the **Provider NPI**.

9. If available, enter the Ordering Provider’s **Phone Number**.

10. After completing the mandatory fields, click **Save**.

11. The *Create Ordering Provider Details* pop-up window displays. Click **OK** to proceed to the **View & Edit Ordering Provider Details** screen.
View & Edit Ordering Provider Details

12. The **View & Edit Ordering Provider Details** screen displays. To edit an Ordering Provider's details, click the **Edit icon** located next to the appropriate Ordering Provider.

13. The **Update Ordering Provider Details** pop-up displays. You can edit the appropriate fields. Once complete, click **Save** to save the updates and close out of the pop-up.
14. Once the update is successfully saved, a pop-up message displays. To proceed, click **OK**.

15. To delete an Ordering Provider from the User Preferences, click the **Trash Bin Icon** located next to the appropriate Ordering Provider.

16. The **Delete Ordering Provider Details** pop-up displays. To delete the Ordering Provider, click **OK**. Click **Cancel** if you do not want to delete the Ordering Provider.

17. To search for a specific Ordering Provider in the User Preferences, click **Apply Filter**.
18. The Filter fields display. You can search by entering the Ordering Provider’s Name, NPI, Address, City, State, Zip Code, and/or Phone Number in the corresponding Filter fields.

Create Ordering Facility Details
1. When entering the ePartnerViewer, you must click the Lab Data Entry Tab located in the blue ribbon Navigation Bar at the top of the screen.
2. From the Lab Data Entry Tab dropdown menu, select Manage User Preferences.
3. From Manage User Preferences, select **Create Ordering Facility Details**.

![Screen capture of the ePartnerViewer interface with the Create Ordering Facility Details section highlighted.](image)

4. The **Create Ordering Facility Details** screen displays. From here, Users must enter the Ordering Facility details. There are mandatory fields marked with red asterisks (*).

5. Enter the **Facility Name**, **Address**, **City**, **State**, and **Zip Code**.
6. If available, enter the Ordering Facility's **Phone Number**.

7. After completing the mandatory fields, click **Save**.

![CREATE ORDERING FACILITY](image)

8. The Create Ordering Facility Details pop-up window displays. Click **OK** to proceed to the **View & Edit Ordering Facility Details** screen.

![Create Ordering Facility Details](image)
View & Edit Ordering Facility Details

9. The **View & Edit Ordering Facility Details** screen displays. To edit an Ordering Facility's details, click the **Edit icon** located next to the appropriate Ordering Facility.

![View & Edit Ordering Facility Details](image)

10. The **Update Ordering Facility Details** pop-up displays. Users can edit the appropriate fields. Once complete, click **Save** to save the updates.

![Update Ordering Facility Details](image)

11. Once the update is successfully saved, a pop up message displays. To proceed, click **OK**.

![Update Ordering Facility Details](image)
Delete Ordering Facility Details

12. To delete an Ordering Facility from the User Preferences, click the **Trash Bin Icon** located next to the appropriate Ordering Facility.

13. The Delete Ordering Provider Details pop-up displays. To delete the Ordering Facility, click **OK**. Click **Cancel** if you don't want to delete the Ordering Facility.

14. To search for a specific Ordering Facility in the User Preferences, click **Apply Filter**.
15. The Filter fields display. Search by entering the **Facility Name, Address, City, State, Zip Code**, and/or **Phone Number** in the corresponding Filter fields.
5  **Tips for Manually Entering Lab Data**

Become familiar with these tips prior to entering lab results. Please keep in mind several key notes when entering patient data:

- There are **mandatory** fields marked with **red asterisks** (*). These fields must be completed in order to proceed. In addition to completing the mandatory fields, Users are encouraged to enter as much information as possible.

- **Help Icons** are available to guide Users while entering data in the fields.
• For entering address information, all States are available for selection in the State dropdown menu. When Users select the state of Kentucky, all Kentucky counties are available for selection in the County dropdown menu.

- However, when Users select **any state other than Kentucky**, the system will display the message *Out of System State* and will **not** display counties in the County dropdown menu.

**Please Note:** The Kentucky Department for Public Health does not report test results to other states. If you are required to report results to other states, you will be responsible to do so.

*Let’s Get Started with Communicable Disease Lab Entry!*
6 Communicable Disease Lab Entry

User Roles Overview

The following user roles have access to either the Communicable Disease Lab Entry functionality and/or the Case Report functionality in the ePartnerViewer:

1. Users with the **DDELR Submitter** role in the ePartnerViewer are authorized to access the Communicable Disease Lab Entry functionality to submit test results for any reportable condition. Users with the **DDELR Submitter** role also have access to the COVID-19 Lab Data Entry functionality to submit COVID-19 test results.

2. Users with the **Manual Case Reporter** role can submit electronic case reports from the ePartnerViewer by completing an online case report. The process generates a manual electronic initial case report (eICR) which is routed to the Kentucky Department for Public Health (KDPH).

3. Only Users with **both** the **DDELR Submitter** role and the **Manual Case Reporter** role have access to initiate any Case Report (i.e., Other Reportable Conditions, MDRO, STD, Hepatitis, Perinatal Hepatitis, Child Hepatitis) for the applicable reportable condition(s) using the information from a previously submitted Communicable Disease Lab Entry.

<table>
<thead>
<tr>
<th>Only DDELR Submitter Role</th>
<th>Only Manual Case Reporter Role</th>
<th>Both DDELR Submitter and Manual Case Reporter Roles</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ User <strong>can</strong> access the Communicable Disease Lab Entry functionality to submit test results for any reportable condition</td>
<td>✓ User <strong>can</strong> access the Communicable Disease Lab Entry functionality to submit test results for any reportable condition</td>
<td>✓ User <strong>can</strong> access the Communicable Disease Lab Entry functionality to submit test results for any reportable condition</td>
</tr>
<tr>
<td>✓ User <strong>cannot</strong> submit any Case Reports for reportable conditions</td>
<td>✓ User <strong>can</strong> submit any Case Report for reportable conditions</td>
<td>✓ User <strong>can</strong> submit any Case Report for reportable conditions</td>
</tr>
<tr>
<td>✓ User <strong>cannot</strong> initiate any Case Report from a previously submitted Communicable Disease Lab Entry</td>
<td>✓ User <strong>cannot</strong> initiate any Case Report from a previously submitted Communicable Disease Lab Entry</td>
<td>✓ User <strong>can</strong> initiate any Case Report from a previously submitted Communicable Disease Lab Entry</td>
</tr>
</tbody>
</table>

**Please Note:** Users with the **Manual Data Submission** role can access only the COVID-19 Lab Data Entry functionality to enter COVID-19 test results.

Users with the **Manual Data Submission** role **cannot** initiate a COVID-19 Case Report unless they are also provisioned with **Manual Case Reporter** role.
Communicable Disease Lab Entry Overview

The Communicable Disease Lab Entry is a five-step process where Users enter (1) Patient Information, (2) Observation Results, and answers to specific questions on the (3) Asked on Order Entry screen. The (4) Lab Data Review screen is where Users must review the information entered. The final step is (5) submitting the Communicable Disease Lab Entry.

Users with the *DDELR Submitter* role are authorized to access the Communicable Disease Lab Entry functionality in the ePartnerViewer.

1. To enter communicable disease test results, click the **Lab Data Entry Tab** in the blue Navigation Bar at the top of the screen.

2. Select **Communicable Disease Lab Entry** from the dropdown menu.

**Please Note:** Only Users with the *DDELR Submitter* role have access to the **Communicable Disease Lab Entry** dropdown option on **Lab Data Entry Tab**.

The **Communicable Disease Lab Entry** dropdown option will **not** display for Users who do not have the *DDELR Submitter* role.
7 Patient Information

1. To start the Communicable Disease Lab Entry, you must complete the mandatory fields marked with red asterisks (*) on the Patient Information screen.
2. Select the **Performing Facility Name** from the dropdown menu. This will be the name of the organization that resulted the lab for which you are entering results. This is usually the name of the organization with which you are associated.

![Performing Facility Name dropdown menu](image)

3. You must enter the **Patient Medical Record Number (MRN)**. An MRN is an organization specific, unique identification number assigned to a patient by a healthcare organization. If your organization does not use an MRN, you MUST create a way to uniquely identify your patient so that the patient is registered in the KHIE system.

![Patient Information form with MRN input](image)

4. If available, enter the appropriate **Prefix** and **Suffix** from the dropdown menus.

![Prefix and Suffix dropdown menus](image)
5. Enter the patient's **First Name** and **Last Name**. If available, enter the patient's **Middle Initial**.

6. If available, enter the patient's **Social Security Number**.

7. Enter the patient's **Date of Birth** by clicking the **Date of Birth** field to bring up a calendar.
   - You can click a **date on the calendar** or use the field dropdown menu to select the month and year. You **should ensure** you selected the correct year when using the calendar function.
   - If the patient is either under one year old or more than 100 years old, a notification pop-up will display to confirm the correct birth year has been entered or selected. You cannot proceed to the next page until you update or confirm the patient's birth year.

**Please Note:** If the date of birth is incorrect, click **No** to enter the correct date of birth. If the date of birth is correct, click **Yes** to confirm that the patient is either under one year old or more than 100 years old.
8. Select the appropriate **Patient Sex** from the dropdown menu.

9. Select the patient’s **Ethnicity** and **Race** from the appropriate dropdown menus.

10. If available, enter the patient’s **Street Address, City, State, Zip Code, and County**.
    - Enter the patient’s home address. However, in cases of congregate care, you should enter the address of the nursing home, group home, or similar congregate care facility.
    - Hover over the **Help Icon** to assist with entering the correct address information for the patient tested.
11. If available, enter the patient’s **Phone Number** and **Email Address**.

12. When you have completed the **Patient Information** screen, click **Next** to proceed to the **Observation** screen.
8 Observation

Ordering Section

On the Observation screen, you must select at least one of the options available for ordering details: EITHER the Ordering Facility OR the Ordering Provider. While it is not required to select an Ordering Provider and an Ordering Facility, you are encouraged to select an option for both sections if the information is available. The dropdown menu options display the Ordering Provider and Ordering Facility details entered on the Manage User Preferences screen.

![Observation screen with instructions and options](image)
1. On the **Observation** screen, you must select **at least one** of the options available in the **Ordering** section: **Facility Name** or **Provider Name**.

   - If applicable, select the appropriate **Facility Name** from the dropdown menu.

   ![Facility Name dropdown menu](image1)

   - If applicable, select appropriate **Provider Name** from the dropdown menu.

   ![Provider Name dropdown menu](image2)

   - Upon selecting the **Provider Name** from the dropdown menu, the **Provider NPI** field automatically populates.

   ![Provider NPI field](image3)
Please Note: If you click Next but do not select at least one Provider or Facility, a banner displays with a message that states: You must select at least one of the options available for ordering details: Ordering Facility or Ordering Provider.

You must select a Facility Name and/or Provider Name from the appropriate dropdown menu in order to add observations or proceed to the Ask on Order Entry screen.

Observation Section
After completing the Ordering section, you must enter observation results in the Observation section.

2. Select Specimen Collection Date Time from the calendar and time function.
3. If available, select the appropriate **Specimen Site** from the dropdown menu.

![Specimen Site dropdown menu](image)

4. You must select a **Specimen Type** from the dropdown menu. The **Specimen Type** describes the method by which the sample was obtained.

![Specimen Type dropdown menu](image)

5. Enter the **Filler Order Number**.

![Filler Order Number entry](image)
6. Select the appropriate **Test Order LOINC** from the dropdown menu.

   ![Dropdown menu with Test Order LOINC and Test Order Name fields]

   - **Please Note:** The **Filler Order Number** or Lab Accession Number is typically utilized by laboratories and generally refers to the number assigned to a lab sample when it is checked in. If your organization does not log the receipt of specimens, you should create a system to uniquely track the specimen when you check it in.

   

7. Upon selecting the Test Order LOINC, the **Test Order Name** field is automatically populated.

   ![Populated Test Order Name]

   - You can select a different **Test Order Name** from the dropdown menu, if needed.
8. Select the **Test Order Date Time** from the calendar and time function.

![Select Test Order Date Time](image)

9. Click the **Select Disease Type hyperlink** to view a filterable and categorized list of disease types and disease names.

![Select Disease Type](image)

10. The **Test Name Details** pop-up displays the disease types, conditions, and observation names.

![Test Name Details](image)

**Please Note:** The **Test Order Name** dropdown menu displays only the test order options that apply to the selected **Test Order LOINC**.
11. To search for a specific disease type, condition, and/or observation name, click **Apply Filter**.

12. The Filter fields display. Search by entering the **Disease Type**, **Condition**, and/or **Observation Name** in the corresponding Filter fields.

13. Once complete, click **OK** to close out of the pop-up.
14. Select the appropriate **Disease Type** from the *Select Disease Type* dropdown menu.

**Please Note:** The *Select Disease Type* dropdown menu displays **Perinatal Hepatitis** as a dropdown option only when **Female** is selected for the **Patient Sex** field on the **Patient Information** screen. This is because Perinatal Hepatitis Case Reports apply only to female patients.

- When **Male**, **Other**, or **Unknown** is selected as the Patient Sex, the *Select Disease Type* field does **not** display **Perinatal Hepatitis** as a dropdown option.

The *Select Disease Type* dropdown menu displays **Child Hepatitis** as a dropdown option only when the patient is under 5 years old, as indicated in the **Date of Birth** field on the **Patient Information** screen.

- When the patient is over 5 years old, the *Select Disease Type* field does **not** display **Child Hepatitis** as a dropdown option.
Please Note: The Select Condition dropdown menu does not display options until the Disease Type has been selected. The Select Condition dropdown menu displays only the conditions that apply to the selected Disease Type.

15. Select the appropriate Disease Condition from the Select Condition dropdown menu.
   - When Child Hepatitis is selected as the Disease Type, the Select Condition dropdown menu displays Child Hepatitis B and C conditions.

Please Note: The Select Disease Type field displays Child Hepatitis as a dropdown option only when the patient is under 5 years old.
• When **MDRO** is selected as the Disease Type, the *Select Condition* dropdown menu displays MDRO conditions.

• When **Other Conditions** is selected as the Disease Type, the *Select Condition* dropdown menu displays Other Reportable Conditions.

• When **Perinatal Hepatitis** is selected as the Disease Type, the *Select Condition* dropdown menu displays Perinatal Hepatitis B and C conditions.
Please Note: The Select Disease Type field displays *Perinatal Hepatitis* as a dropdown option only when *Female* is selected as the Patient Sex.

- When **STD** is selected as the Disease Type, the Select Condition dropdown menu displays Sexually Transmitted Disease conditions.

- Click the Select Condition hyperlink to view a filterable and categorized list of disease types and disease names. This is the same Test Name Details pop-up that displays upon clicking the Select Disease Type hyperlink.

16. Select the appropriate Observation LOINC from the dropdown menu.
Please Note: The Observation LOINC dropdown menu does not display options until the Condition has been selected. The Observation LOINC dropdown menu displays only the conditions that apply to the selected Condition.

Please Note: Upon selecting the Observation LOINC, the Observation Name field is automatically populated with an applicable Observation Name. The Observation Name dropdown menu displays the Observation Name options that apply only to the selected Observation LOINC.

17. Select the appropriate Observation Name from the dropdown menu. You can select a different Observation Name from the dropdown menu, if needed.
• Click the **Observation Name hyperlink** to view a filterable and categorized list of disease types and disease names. This is the same *Test Name Details* pop-up that displays upon clicking the **Select Disease Type hyperlink**.

18. Select the appropriate **Result Type** from the dropdown menu.

**Result Type Dynamic Fields**

The **Result Type** field is a dynamic field. Based on the selected **Result Type**, the **Observation** screen will display different subsequent fields. Prior to selecting the **Result Type**, the following subsequent fields display:

- **Observation Result Date Time** field (Mandatory field)
- **Observation Units** field (Optional field)
19. Upon selecting **Coded Results** as the Result Type, the mandatory **Observation Result** field displays.
   - You must select the appropriate **Observation Result** from the dropdown menu.

20. Upon selecting **Numeric** as the Result Type, the mandatory **Observation Result** textbox field displays, and the **Observation Units** field becomes mandatory.
   - You must enter the **Observation Result** in the textbox field.
   - You must select the appropriate **Observation Units** from the dropdown menu.
21. Upon selecting **String Data** as the Result Type, the mandatory **Observation Result** textbox field displays.

- You must enter the **Observation Result** in the textbox field.

22. Upon selecting **Structured Numeric** as the Result Type, the following four (4) fields display:

- **Comparator** dropdown menu (Optional)
- **Result Value 1** textbox (Mandatory)
- **Separator** dropdown menu (Optional)
- **Result Value 2** textbox (Optional)

- If applicable, select the appropriate **Comparator** from the dropdown menu.
- You must enter the **Result Value 1** in the textbox field.
• If applicable, select the appropriate **Separator** from the dropdown menu.
• If applicable, enter the **Result Value 2** in the textbox field.

23. Select the **Observation Result Date Time** from the calendar and time function.

**Please Note:** The **Specimen Collection Date Time** cannot occur **after** the **Observation Result Date Time**. The **Specimen Collection Date Time** must occur on the **same date** or any date **BEFORE** the **Observation Result Date Time**.

If you enter a **Specimen Collection Date** that occurs after the **Observation Result Date**, both fields are marked as invalid. If you click **Next**, the **Observation** screen is grayed out and displays a message that states: **Specimen date cannot be later than the Observation date, please provide valid Specimen date.**

To proceed, you must enter a valid **Specimen Collection Date Time** that occurs **on** or **BEFORE** the **Observation Result Date Time**.
24. If applicable, select the appropriate **Observation Units** from the dropdown menu.

**Please Note:** The **Observation Units** field becomes mandatory only when **Numeric** is selected as the Result Type.
25. If applicable, enter the **Reference Range** in the textbox field.

![Reference Range and Abnormal Flag](image)

26. If applicable, select the appropriate **Abnormal Flag** from the dropdown menu.

![Abnormal Flag dropdown menu](image)

27. If applicable, enter **Notes about the observation** in the **Notes** textbox.

![Notes textbox](image)
Adding Multiple Observations

28. You can click **Add Observation** to log the details for multiple observations. This means that you can easily enter additional observation details on the same patient.

**Please Note:** The Communicable Disease Lab Entry allows Users to enter **up to 70** observations for multiple diseases at the same time for the same patient.
29. Once the **Observation** screen is complete, click **Next** to proceed to the **Ask on Order Entry** screen.
9  Ask on Order Entry

There are a series of questions that healthcare providers may ask patients regarding communicable disease testing. Users should enter the answers to these questions on the Ask on Order Entry screen.

30. Select the appropriate answer from the First Test dropdown menu to report whether this is the first time the patient has ever been tested for the reportable condition(s) of interest. The objective is to find out whether the patient has ever been tested anywhere not just at your organization.

Please Note: Hovering over the Help Icon provides additional reporting guidance for each field on the Ask on Order Entry screen.
31. Select the **appropriate answer** from the *Symptoms* dropdown menu to report whether the patient has symptoms related to the condition(s) of interest.

- When *Yes* is selected, the subsequent *Onset Date* field is enabled. You must enter the **Date of Onset** by entering the month, day, and year when symptoms began in the *Onset Date* field.

- When *No* is selected, the subsequent *Onset Date* field is grayed out and disabled.
32. Select the **appropriate answer** from the **ICU** dropdown menu to report whether the patient has been admitted or transferred to the Intensive Care Unit (ICU).

![ICU Dropdown Menu]

33. Select the **appropriate answer** from the **HCW** dropdown menu to report whether the Patient is a Health Care Worker (HCW).

![HCW Dropdown Menu]
34. Select the **appropriate answer** from the *Hospitalization* dropdown menu to report whether the patient has been hospitalized.

![Hospitalization Dropdown](image)

**Please Note:** You should select **No** from the *Hospitalization* dropdown menu if this test was ordered during an ER visit.

35. Select the **appropriate answer** from the *Congregate* dropdown menu to report whether the patient is a resident in a congregate care setting. Hovering over the **Help Icon** provides guidance to identify congregate care settings and assist with answering this question.

![Congregate Dropdown](image)
36. Select the **appropriate answer** from the *Pregnant* dropdown menu to report the status of pregnancy for the patient.

- The *Pregnant* dropdown menu options include: *Not pregnant, Patient currently pregnant, Possible pregnancy, or Unknown.*

**Please Note:** The *Pregnant* field is enabled only when *Female* is selected for the *Patient Sex* field on the *Patient Information* screen. When *Male, Other, or Unknown* is selected as the Patient Sex, the *Pregnant* field is grayed out and disabled.

37. Once the *Ask on Order Entry* screen is complete, click *Next* to proceed to the *Lab Data Review* screen.
10 Lab Data Review

The **Lab Data Review** screen displays a summary of the information you have entered. The **Lab Data Review** screen is not a submission of the lab results entered. Prior to submitting the lab results, review this screen to verify the accuracy of the information entered. You must click **Submit** in order to submit the Communicable Disease Lab Entry.
38. Review the *Patient Information* section.

- Click the **header** of any section to hide or display the details for that section.
39. Review the *Ordering* section.

Please Note: If both an Ordering Facility and an Ordering Provider are selected, the **Lab Data Review** screen will display the details for the Ordering Facility and the Ordering Provider.

40. Review the *Observation* section.

Please Note: If multiple Observations are added, the **Lab Data Review** screen will display all Observations in numbered order.
41. Review the *Ask on Order Entry* section.

42. If after reviewing, changes are required, click the corresponding *section header hyperlink* to navigate to the appropriate screen or section to edit the information.

- For example, to navigate to the *Observation* screen, click the *Observation hyperlink* in the section header.

- If multiple observations are entered, click the appropriate *numbered Observation hyperlink* to navigate directly to that specific Observation. For example, upon clicking the *Observation 1 hyperlink*, you will be navigated directly to the *Observation 1* section of the *Observation* screen.
43. Once the appropriate edits are completed on the selected screen or section, click Next until you navigate back to the Lab Data Review screen.

44. Review your edits on the Lab Data Review screen.
45. After verifying the information is accurate and/or the appropriate changes have been made, you must click **Submit** to submit the Communicable Disease Lab Entry.

46. All data submissions are final. You have one more opportunity to select **Cancel** to continue reviewing the Communicable Disease Lab Entry or **Submit** to finalize the Communicable Disease Lab Entry.

**Please Note:** Upon clicking **Submit** to finalize the Communicable Disease Lab Entry submission, the **Lab Data Review** screen displays a pop-up notification that provides the option for Users to initiate an applicable Case Report for the same patient.
11 Initiate Case Report from Communicable Disease Lab Entry

Initiate Feature Overview

The Initiate feature allows Users with both the DDELR Submitter role and the Manual Case Reporter role to initiate any applicable Case Report with information from a previously submitted Communicable Disease Lab Entry. This allows Users to copy the information from a completed Communicable Disease Lab Entry into an applicable Case Report, enter additional details, and submit the Case Report for the patient. This means that certain information entered on the Communicable Disease Lab Entry will be auto-populated in the initiated Case Report. Users can update the appropriate information and submit an applicable Case Report for the same patient.

There are three (3) methods for initiating a Case Report from a previously submitted Communicable Disease Lab Entry:

1. Initiate an applicable Case Report upon Communicable Disease Lab Entry submission from the Lab Data Review screen.
2. Initiate an applicable Case Report from the Case Report Entry User Summary screen.
3. Initiate an applicable Case Report from the Lab Results Submitted by User screen.

Communicable Disease Lab Entry Submission

These steps cover how to initiate a Case Report Form for reportable test results upon submitting a Communicable Disease Lab Entry in the ePartnerViewer. The Lab Data Review screen displays a pop-up notification that provides the option for authorized ePartnerViewer Users to initiate a Case Report upon submitting a Communicable Disease Lab Entry.

1. Once you complete the Communicable Disease Lab Entry, review the information you entered on the Lab Data Review screen. After verifying the information is accurate and/or the appropriate changes have been made, click Submit to submit the Communicable Disease Lab Entry.
2. A pop-up notification displays to confirm the submission. Select **Cancel** to continue reviewing the Communicable Disease Lab Entry or **Submit** to finalize the Communicable Disease Lab Entry.

3. Upon clicking **Submit**, the *Communicable Disease Lab Entry* pop-up notification displays to provide the option to initiate an applicable Case Report for the patient.

- If the Communicable Disease Lab Entry had only one condition or multiple observations with the same condition, the pop-up notification will display with a message that states:

  *Do you want to submit a [selected condition] Case Report Form?*  
  **NOTE:** A Case Report Form is only required when the results are reportable.

**Please Note:** The *Communicable Disease Lab Entry* pop-up displays only the Case Report option(s) that apply to the condition(s) entered on the submitted Communicable Disease Lab Entry.
4. You have the option to select **Cancel** if you do not want to initiate the Case Report. To initiate the applicable Case Report for the same patient, click **Initiate**.

**Please Note:** Upon clicking **Cancel** on the *Communicable Disease Lab Entry* pop-up notification, you are automatically navigated to the **Patient Information** screen of a blank Communicable Disease Lab Entry. From here, you can start a new Communicable Disease Lab Entry.

Upon clicking **Initiate** on the *Communicable Disease Lab Entry* pop-up notification, you are automatically navigated to the **Patient Information** screen of the selected Case Report.

- For specific information on the **Patient Information** screen of the selected Case Report, please review the appropriate **Initiate Case Report** section of this guide.

- If the Communicable Disease Lab Entry had **multiple** observations for **different conditions**, the pop-up notification will display the applicable Case Report options with a message that states:

  Please select the appropriate Case Report Form. **NOTE:** A Case Report Form is required when the results are reportable. Users may select up to 5 conditions at a time.
5. Click the **Checkbox** next to the appropriate **condition(s)** to initiate the applicable Case Report(s) for the patient. You are required to select **at least one** condition to initiate a Case Report.

---

**Please Note:** If you clicked **Initiate** but did not select a condition on the **Communicable Disease Lab Entry** pop-up notification, the following error message will display:

*Please select at least one condition to initiate eICR form.*

To initiate a Case Report, you must select **at least one** condition on the **Communicable Disease Lab Entry** pop-up notification. If applicable, you have the option to select **up to 5** conditions.
6. Once you have selected at least one Case Report, click **Initiate** to start the applicable Case Report for the same patient.

![Communicable Disease Lab Entry](image)

7. If you selected multiple Case Reports and clicked **Initiate** on the *Communicable Disease Lab Entry* pop-up notification, you are automatically navigated to the **Case Report User Summary** screen.

![Case Report User Summary](image)
Please Note: If you selected only one Case Report Form on the Communicable Disease Lab Entry pop-up notification, you are automatically navigated to the Patient Information screen of the selected Case Report.

- For specific information on the Patient Information screen of the selected Case Report, please review the appropriate Initiate Case Report section of this guide.

Case Report Entry User Summary

Users are automatically navigated to the Case Report User Summary screen upon selecting multiple Case Report Forms on the Communicable Disease Lab Entry pop-up notification or upon submission of a Case Report. The Case Report Entry User Summary screen displays all submitted and in-progress case reports you have entered. Users must select which Case Report they wish to initiate for the patient. These steps cover how to initiate an applicable Case Report from a previously submitted Communicable Disease Lab Entry on the Case Report User Summary screen.

8. The Case Report Entry User Summary screen displays multiple applicable Case Reports for the different conditions entered on the Communicable Disease Lab Entry submitted for the patient. You can choose which Case Report you wish to complete first for the patient.

9. To initiate a Case Report for the patient, click Continue next to the appropriate Report Type.
Lab Results Submitted by User

These steps cover how to initiate a Case Report from a previously submitted Communicable Disease Lab Entry on the Lab Results Submitted by User screen.

1. To initiate a Case Report from a previously submitted Communicable Disease Lab Entry, click the Lab Data Entry Tab in the blue Navigation Bar at the top of the screen.

2. Select Lab Data Entry User Report from the dropdown menu.

3. The Lab Results Submitted by User screen displays. By default, the screen does not display previously submitted lab data entries. You must use the Date Range buttons to do a custom search for previous lab data entries entered within the last 6 months.

Please Note: Upon clicking Continue, you will be automatically navigated to the Patient Information screen of the selected Case Report.

For specific information on the Patient Information screen of each Case Report, please review the appropriate Initiate Case Report section of this guide.
4. To retrieve lab data entries for a specific date range within the last 6 months, enter the appropriate **Start Date** and **End Date**.

5. Click **Retrieve Data** to generate the lab data entries.
6. To search for a specific lab data entry, click **Apply Filter**.
7. The Filter fields display. You can search by entering the **Performing Facility Name, Patient MRN, First Name, Last Name, Date of Birth, Patient Sex, Test Name, Test Result, Processed Date**, and/or **Case Report Form** in the corresponding Filter fields.

8. To view more details on each lab entry, click the **Plus Icon** under the **Detailed View** column.
9. The **Condition(s)**, **Test Name(s)**, and **Test Result(s)** for the lab entry display in the detailed view.

![Lab Entry Table]

10. To initiate a Case Report with the information from a completed Communicable Disease Lab Entry that has been previously submitted, click **Initiate**, located on the right side of the appropriate Communicable Disease Lab Entry.

![Initiate Button]

11. Upon clicking **Initiate**, the **Communicable Disease Lab Entry** pop-up notification displays to provide the option to initiate an applicable Case Report from a previously submitted Communicable Disease Lab Entry.

   • If only one Case Report applies to the Communicable Disease Lab Entry, click **Initiate** to start the Case Report for the patient.

![Pop-up Notification]
• If there are multiple Case Report options, click the **Checkbox** next to the appropriate **condition(s)** to initiate an applicable Case Report for the patient.

12. To initiate a Case Report for the patient, click **Initiate**.

Please Note: If you selected multiple Case Report Forms and clicked **Initiate** on the *Communicable Disease Lab Entry* pop-up notification, you are automatically navigated to the **Case Report User Summary** screen to select which Case Report to initiate for the patient.

* For specific information on the **Case Report Entry User Summary** screen, please review section 17: **Case Report Entry User Summary** of this guide.

If you initiated only one Case Report Form on the *Communicable Disease Lab Entry* pop-up notification, you are automatically navigated to the **Patient Information** screen of the selected Case Report.

* For specific information on the **Patient Information** screen of each Case Report, please review the appropriate **Initiate Case Report** section of this guide.

13. Once the Case Report has been initiated, the “Initiated” status displays under the **Case Report Form** column.
If a Case Report has already been initiated from a completed Communicable Disease Lab Entry with multiple applicable Case Reports, the **Partially Initiated** button displays under the *Case Report Form* column. These steps cover how to partially initiate another Case Report from a previously submitted Communicable Disease Lab Entry with multiple applicable Case Reports on the **Lab Results Submitted by User** screen.

14. To initiate another Case Report with the information from a completed Communicable Disease Lab Entry with multiple applicable Case Reports, click **Partially Initiated**, located on the right side of the appropriate Communicable Disease Lab Entry.

15. The **Communicable Disease Lab Entry** pop-up notification displays. The Checkbox next to the previously initiated Case Report is grayed out and disabled. You must select the **enabled Checkbox** next to the appropriate **condition(s)** and click **Initiate** to begin the Case Report.

---

**Please Note:** If you initiated only one Case Report Form on the **Communicable Disease Lab Entry** pop-up notification, you are automatically navigated to the **Patient Information** screen of the selected Case Report.

- For specific information on the **Patient Information** screen of each Case Report, please review the appropriate **Initiate Case Report** section of this guide.
12  Initiate Other Reportable Conditions Case Report

Upon initiating an Other Reportable Conditions Case Report on the Communicable Disease Lab Entry pop-up notification, Users are automatically navigated to the Patient Information screen of the Other Reportable Conditions Case Report.

The Other Reportable Conditions Case Report is an eight-step process where Users enter (1) Patient Information, (2) Laboratory Information, (3) Applicable Symptoms, (4) Additional Information, (5) Hospitalization, ICU & Death Information, (6) Vaccination History, (7) Additional Comments, (8) Review and Submit. The Review & Submit screen is where Users must review the information entered and submit the Other Reportable Conditions Case Report.

The following Other Reportable Conditions screens display certain fields of information that have been auto-populated based on the information entered on the previously submitted Communicable Disease Lab Entry. When necessary, you can edit the auto-populated information and enter different details in any of the enabled fields.

- Patient Information screen
- Applicable Symptoms screen
- Laboratory Information screen
- Additional Information screen
- Hospitalization, ICU & Death Information screen
Patient Information

The **Patient Information** screen auto-populates with the existing patient demographic details entered on the previously submitted Communicable Disease Lab Entry. Users can change the auto-populated information in any of the enabled fields, as applicable. Users cannot change auto-populated details in disabled fields.

Users **cannot** edit the following auto-populated **Disease/Organism**, **Patient ID (MRN)**, **Affiliation/Organization** for Patient ID (MRN), and patient demographic fields which are grayed out and disabled:

- Disease/Organism
- Is the Affiliation/Organization the same for Patient ID (MRN), Person Completing Form, and Attending Physician/Clinician?
- Patient ID (MRN)
- Affiliation/Organization for Patient MRN
- Date of Birth
- First Name
- Middle Name
- Last Name
- Prefix
- Suffix
- Patient Sex

**Please Note:** The Disease/Organism, Patient ID (MRN), Affiliation/Organization for Patient ID (MRN), and patient demographic fields are the only disabled fields. All other fields on the Patient Information screen and all subsequent screens are enabled. You have the option to edit any of the enabled fields on all screens of the Other Reportable Conditions Case Report.
1. You have the option to **edit the auto-populated information** in the following enabled fields:

- **Ethnicity**
- **Race**
- **Address, City, State, Zip Code, County**
- **Phone**
- **Email**
- **Is the patient currently pregnant?**

**Please Note:** The *Is the patient currently pregnant?* field is enabled only when **Female** is selected for the **Patient Sex** field on the **Patient Information** screen of the previously submitted Communicable Disease Lab Entry.

- If **Yes** is selected for the *Is the patient currently pregnant?* field, the subsequent field is enabled.

To proceed, enter the **Due Date** in the subsequent field: *If yes, please enter the due date (EDC).*
2. To complete the **Patient Information** screen, you must **enter the appropriate information** in the mandatory blank fields marked with **red asterisks (*)&**, as applicable:

- **Date of Diagnosis**
- **Person Completing Form**
- **Affiliation/Organization of Person Completing Form**
- **Attending Physician/Clinician**
- **Affiliation/Organization of Attending Physician/Clinician**

![Patient Information Screen](image)

**Please Note:** If the appropriate name does not display in the **Person Completing Form** dropdown menu, you must create details for a new Person Completing Form by clicking the **Person Completing Form hyperlink**. Upon clicking the hyperlink, the **Person Completing Form pop-up** displays. To proceed, enter the details in the appropriate fields of the **Person Completing Form** pop-up and click **Save**.
Please Note: If the appropriate name does not display in the Attending Physician/Clinician dropdown menu, you must create details for a new Attending Physician/Clinician by clicking the Attending Physician/Clinician hyperlink. Upon clicking the hyperlink, the Attending Physician/Clinician pop-up displays. Enter the details in the appropriate fields of the Attending Physician/Clinician pop-up and click Save.

Please Note: If Other is selected from one of the Affiliation/Organization dropdown menus for the Person Completing Form or the Attending Physician/Clinician, the subsequent textbox field is enabled.

To proceed, you must enter the name of the organization associated with the person completing the form and/or the organization associated with the Attending Physician/Clinician in the subsequent textbox: if other, please specify.
3. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Laboratory Information** screen.
Laboratory Information

The **Laboratory Information** screen displays details about the laboratory test that have been auto-populated based on the information previously entered on the Communicable Disease Lab Entry.

4. You have the option to **edit the auto-populated information** in the following enabled fields:

- Does the patient have a lab test?
- Laboratory Name
- Test Name
- Filler Order/Accession Number
- Specimen Source
- Test Result
- Test Result Date
- Specimen Collection Date
- Additional Information

![Laboratory Information Screen](image-url)
• You can change the selection from Yes to No or Unknown, or vice versa for the conditional question at the top of the Laboratory Information screen: Does the patient have a lab test?

Please Note: if No or Unknown is selected for the conditional question at the top of the Laboratory Information screen, the subsequent fields are disabled.

• If you change the selection for the conditional question, a pop-up notification will display with a message that states: Please note that all selections on this screen will be reset. Are you sure you want to change your response?

• To reset the previous selection for the conditional question, click Yes on the pop-up notification.
5. You can also click **Add Test** to log the details for multiple lab tests. This means that you can easily enter additional lab test results on the same patient.

- To delete an additional lab test, click the **Trash Bin Icon** located at the top right.
6. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Applicable Symptoms** screen.
Applicable Symptoms

The **Applicable Symptoms** screen asks questions about the patient's symptoms.

7. You have the option to **edit the auto-populated information** in the following enabled fields:

- **Were symptoms present during the course of illness?**
- **Onset Date**

---

**Please Note:** If the patient was marked as symptomatic on the Communicable Disease Lab Entry, the selection for the conditional question at the top of the **Applicable Symptoms** screen is auto-populated as **Yes: Were symptoms present during the course of illness?**

- If **Yes** is selected for the conditional question at the top of the **Applicable Symptoms** screen, the subsequent fields are enabled.

If an onset date for symptoms was entered on the Communicable Disease Lab Entry, the same date is auto-populated for the **Onset Date** field on the **Applicable Symptoms** screen.
You can change the selection from **Yes** to **No** or **Unknown**, or vice versa for the conditional question at the top of the **Applicable Symptoms** screen: *Were symptoms present during the course of illness?*

- If you change the selection for the conditional question, a pop-up notification will display with a message that states: *Please note that all selections on this screen will be reset. Are you sure you want to change your response?*
- To reset the previous selection for the conditional question, click **Yes** on the pop-up notification.

**Please Note:** If **No** is selected for the conditional question at the top of the **Applicable Symptoms** screen, all subsequent fields are disabled and marked with **No**.

If **Unknown** is selected for the conditional question, all subsequent fields are disabled and marked as **Unknown**.
8. To complete the **Applicable Symptoms** screen, you must select the **appropriate answers** for the mandatory enabled fields marked with **red asterisks** (*).

9. Once the appropriate edits and additions have been made, click **Next** to proceed to the **Additional Information** screen.

---

**Please Note:** The symptom fields on the **Applicable Symptoms** screen vary based on the selected reportable condition.
Additional Information

The **Additional Information** screen collects additional details about the patient and displays information that has been auto-populated based on the previously submitted Communicable Disease Lab Entry.

10. You have the option to **edit the auto-populated information** in the following enabled fields:
   - **Does any of the following apply to the patient?**
   - **Healthcare Worker**
     - Healthcare Worker
   - **Long-term care facility resident**

You can change the selection from **Yes** to **No** or **Unknown**, or vice versa for the conditional question at the top of the **Additional Information** screen: **Does any of the following apply to the patient?**
• If you change the selection from Yes to No or Unknown, or vice versa for the conditional question, a pop-up notification will display a message that states: Please note that all selections on this screen will be reset. Are you sure you want to change your response?

• To reset the previous selection for the conditional question, click Yes on the pop-up notification.

Please Note: If No is selected for the conditional question at the top of the Additional Information screen, the subsequent fields are disabled and marked with No.

If Unknown is selected for the conditional question, the subsequent fields are disabled and marked as Unknown.

The outbreak-related question at the bottom of the screen is not impacted by the selected answer for the conditional question: Does any of the following apply to the patient?

• You can change the selection from Yes to No or Unknown, or vice versa for the following auto-populated fields:
  • Healthcare Worker  
  • Long-term care facility resident
Please Note: If Yes is selected for any of the descriptive questions, the subsequent textbox is enabled for Users to specify the name of appropriate setting.

For example, if Yes is selected for the Healthcare worker field, the subsequent textbox field is enabled. To proceed, you must enter the name of the healthcare facility in the subsequent field: If yes, please specify the name of the healthcare facility.

11. To complete the Additional Information screen, select the appropriate answers for the blank enabled fields to indicate descriptions that apply to the patient.
Please Note: If Yes is selected for any of the descriptive questions, the subsequent textbox is enabled for Users to specify the name of appropriate setting. To proceed, you must enter the name of the setting in the subsequent textbox field: If yes, please specify.

12. Once the appropriate edits and additions have been made in the enabled fields, click Next to proceed to the Hospitalization, ICU & Death Information screen.
Hospitalization, ICU & Death Information

The **Hospitalization, ICU & Death Information** screen displays details about a patient's hospitalizations that have been auto-populated based on the previously submitted Communicable Disease Lab Entry.

13. You have the option to **edit the auto-populated information** in the following enabled fields:

- **Was the patient hospitalized?**
- **Was the patient admitted to an intensive care unit (ICU)?**

![Hospitalization, ICU & Death Information Screen]

**Please Note:** If the Communicable Disease Lab Entry indicated that the patient was hospitalized, the selection for the conditional question at the top of the **Hospitalization, ICU & Death Information** screen is auto-populated as **Yes**: *Was the patient hospitalized?*

- If **Yes** is selected for the conditional question at the top of the screen, the subsequent hospitalization-related fields and ICU-related fields are enabled.

If the Communicable Disease Lab Entry indicated that the patient was admitted to the ICU, the selection for the ICU-related question is auto-populated as **Yes**: *Was the patient admitted to an intensive care unit (ICU)?*

- If **Yes** is selected for the ICU-related question, the subsequent **Admission Date** and **Discharge Date** fields are enabled.
You can change the selection from *Yes* to *No* or *Unknown*, or vice versa for the conditional question at the top of the *Hospitalization, ICU & Death Information* screen: *Was the patient hospitalized?*

**Please Note:** If *No* or *Unknown* is selected for the conditional question at the top of the *Hospitalization, ICU & Death Information* screen, the subsequent hospitalization-related fields and ICU-related fields are disabled.

- Death-related questions are not impacted by the selected answer for the conditional question: *Was the patient hospitalized?*

You can change the selection from *Yes* to *No* or *Unknown*, or vice versa for the ICU-related question: *Was the patient admitted to an intensive care unit (ICU)?*
Please Note: If Yes is selected for the ICU-related question, the subsequent Admission Date and Discharge Date fields are enabled.

- To proceed, enter the Admission Date to ICU and the Discharge Date from ICU in the appropriate fields.

14. To complete the Hospitalization, ICU & Death Information screen, you must complete the following mandatory fields marked with red asterisks (*), if enabled:

- If yes, please specify hospital name
- Admission Date
- Discharge Date
- Admission Date to ICU
- Discharge Date from ICU
- Did the patient die as a result of this illness?
Please Note: If the Still Hospitalized checkbox is selected, the subsequent death-related field is disabled: *Did the patient die as a result of this illness?*

**Please Note:** If **Yes** is selected for the field: *Did the patient die as a result of this illness?*, the subsequent field is enabled.

To proceed, enter the **Date of Death** in the subsequent enabled field: *Date of Death.*
15. Once the appropriate edits and additions have been made, click **Next** to proceed to the **Vaccination History** screen.

**Please Note:** The subsequent **Vaccination History** and **Additional Comments** screens of the Other Reportable Conditions Case Report do **not** include any auto-populated information from the Communicable Disease Lab Entry.

- To proceed, you must enter the **appropriate information** in the enabled fields on each screen. Once complete, click **Next** until you navigate to the **Review and Submit** screen.

For specific information on how to complete these screens of the Other Reportable Conditions Case Report, please review the *Direct Data Entry for Electronic Case Reports: Other Reportable Conditions User Guide* on the [KHIE website](https://www.khie.org).
Review and Submit: Other Reportable Conditions Case Report

Once the appropriate edits and additions have been made on all the Other Reportable Conditions Case Report screens, you will be navigated to the **Review and Submit** screen. The **Review and Submit** screen displays the summary of the information you have entered. Prior to submitting the Other Reportable Conditions Case Report, review the information on this screen to verify its accuracy. You must click **Submit** to submit the case report.

16. Review the information on the **Review and Submit** screen.

![Review and Submit Screen]

17. After verifying the information is accurate and/or the appropriate changes have been made, you must click **Submit** to submit the Other Reportable Conditions Case Report Entry.

![Submit Button]

18. All case report submissions are final. You have one more opportunity to select **Cancel** to continue reviewing the Case Report or click **Submit** to submit the report.

![Cancel and Submit Buttons]
19. Click OK to acknowledge the case report has been submitted successfully.

Please Note: Clicking OK when the case report entry has been submitted successfully will automatically navigate you to the Case Report Entry User Summary screen where the submitted case report displays.

- For specific information on the Case Report Entry User Summary screen, please review section 17: Case Report Entry User Summary of this guide.
13 Initiate Sexually Transmitted Disease Case Report

Upon initiating a Sexually Transmitted Diseases (STD) Case Report on the Communicable Disease Lab Entry pop-up notification, Users are automatically navigated to the Patient Information screen of the Sexually Transmitted Diseases Case Report.

The STD Case Report is a ten-step process where Users enter (1) Patient Information, (2) Laboratory Information, (3) Applicable Symptoms, (4) Medical Conditions, (5) Travel Information, (6) Hospitalization, ICU & Death Information, (7) Additional Information, (8) Treatment Information, (9) Additional Comments, and (10) Review and Submit. The Review & Submit screen is where Users must review the information entered and submit the STD Case Report.

The following STD Case Report screens display certain fields of information that have been auto-populated based on the information entered on the previously submitted Communicable Disease Lab Entry. When necessary, you can change the auto-populated information and enter different details in any of the enabled fields.

- Patient Information screen
- Applicable Symptoms screen
- Laboratory Information screen
- Hospitalization, ICU & Death Information screen
Patient Information

The **Patient Information** screen auto-populates with the existing patient demographic details entered on the previously submitted Communicable Disease Lab Entry. Users can change the auto-populated information in any of the enabled fields, as applicable. Users cannot change auto-populated details in disabled fields.

Users **cannot** edit the following auto-populated *Disease/Organism*, *Patient ID (MRN)*, *Affiliation/Organization* for *Patient ID (MRN)*, and patient demographic fields which are grayed out and disabled:

- Disease/Organism
- Is the Affiliation/Organization the same for Patient ID (MRN), Person Completing Form, and Attending Physician/Clinician?
- Patient ID (MRN)
- Affiliation/Organization for Patient MRN
- Date of Birth
- First Name
- Middle Name
- Last Name
- Prefix
- Suffix
- Patient Sex

![Patient Information Screen](image)
Please Note: The Disease/Organism, Patient ID (MRN), Affiliation/Organization for Patient ID (MRN), and patient demographic fields are the only disabled fields. All other fields on the Patient Information screen and all subsequent screens are enabled. You have the option to edit any of the enabled fields on all screens of the STD Case Report.

1. You have the option to **edit the auto-populated information** in the following enabled fields:

- **Ethnicity**
- **Race**
- **Address, City, State, Zip Code, County**
- **Phone**
- **Email**
- **Is the patient currently pregnant?**

Please Note: The Is the patient currently pregnant? field is enabled only when Female is selected for the Patient Sex field on the Patient Information screen of the previously submitted Communicable Disease Lab Entry.

If Yes is selected for the Is the patient currently pregnant? field, the subsequent field is enabled.

To proceed, enter the **Due Date** in the subsequent field: *if yes, please enter the due date (EDC).*
2. To complete the **Patient Information** screen, you must enter the appropriate information in the mandatory blank fields marked with **red asterisks** (*), as applicable:

- **Date of Diagnosis**
- **Person Completing Form**
- **Affiliation/Organization of Person Completing Form**
- **Attending Physician/Clinician**
- **Affiliation/Organization of Attending Physician/Clinician**

**Please Note:** If the appropriate name does not display in the **Person Completing Form** or **Attending Physician/Clinician** dropdown menus, you must create details for a new Person Completing Form or a new Attending Physician/Clinician.

- To create details for a new Person Completing Form, click the **Person Completing Form hyperlink**. Upon clicking the hyperlink, the **Person Completing Form** pop-up displays.

- To create details for a new Attending Physician/Clinician, click the **Attending Physician/Clinician hyperlink**. Upon clicking the hyperlink, the **Attending Physician/Clinician** pop-up displays.

To proceed, enter the details in the appropriate fields of the pop-up and click **Save**.
3. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Laboratory Information** screen.
Laboratory Information

The **Laboratory Information** screen displays details about the laboratory test that have been auto-populated based on the information previously entered on the Communicable Disease Lab Entry.

4. You have the option to **edit the auto-populated information** or **enter the appropriate information** in the following enabled fields:

- **Does the patient have a lab test?**
- **Laboratory Name**
- **Test Name**
- **Filler Order/Accession Number**
- **Specimen Source**
- **Test Result**
- **Test Result Date**
- **Specimen Collection Date**
- **Additional Information**
• You can change the selection from Yes to No or Unknown, or vice versa for the conditional question at the top of the **Laboratory Information** screen: *Does the patient have a lab test?*

![Laboratory Information Screen]

**Please Note:** If No or Unknown is selected for the conditional question at the top of the **Laboratory Information** screen, the subsequent fields are disabled.

• If you change the selection for the conditional question, a pop-up notification will display with a message that states: *Please note that all selections on this screen will be reset. Are you sure you want to change your response?*

• To reset the previous selection for the conditional question, click **Yes** on the pop-up notification.

![Pop-up Notification]

5. You also have the option to click **Add Test** to add additional tests for the patient.
6. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Applicable Symptoms** screen.
Applicable Symptoms

The Applicable Symptoms screen asks questions about the patient’s symptoms.

7. You have the option to edit the auto-populated information in the following enabled fields:

- Were symptoms present during the course of illness?
- Onset Date

**Please Note:** If the patient was marked as symptomatic on the Communicable Disease Lab Entry, the selection for the conditional question at the top of the Applicable Symptoms screen is auto-populated as Yes: Were symptoms present during the course of illness?

- If Yes is selected for the conditional question at the top of the Applicable Symptoms screen, the subsequent fields are enabled.

If an onset date for symptoms was entered on the Communicable Disease Lab Entry, the same date is auto-populated for the Onset Date field on the Applicable Symptoms screen.
• You can change the selection from **Yes** to **No** or **Unknown**, or vice versa for the conditional question at the top of the **Applicable Symptoms** screen: *Were symptoms present during the course of illness?*

![Screenshot of applicable symptoms screen with options Yes, No, Unknown]

• If you change the selection for the conditional question, a pop-up notification will display with a message that states: *Please note that all selections on this screen will be reset. Are you sure you want to change your response?*

• To reset the previous selection for the conditional question, click **Yes** on the pop-up notification.

**Please Note:** If **No** is selected for the conditional question at the top of the **Applicable Symptoms** screen, all subsequent fields are disabled and marked with **No**.

If **Unknown** is selected for the conditional question, all subsequent fields are disabled and marked as **Unknown**.
8. To complete the **Applicable Symptoms** screen, you must select the **appropriate answers** for the mandatory symptom fields marked with **red asterisks** (*).
9. Once the appropriate edits and additions have been made, click **Next** to proceed to the **Medical Conditions** screen.

**Please Note:** The subsequent **Medical Conditions** and **Travel Information** screens of the STD Case Report do **not** include any auto-populated information from the Communicable Disease Lab Entry.

- To proceed, you must enter the **appropriate information** in the enabled fields on each screen. Once complete, click **Next** until you navigate to the **Hospitalization, ICU & Death Information** screen.
Hospitalization, ICU & Death Information
The **Hospitalization, ICU & Death Information** screen displays details about a patient's hospitalizations that have been auto-populated based on the previously submitted Communicable Disease Lab Entry.

10. You have the option to **edit the auto-populated information** in the following enabled fields:
   - *Was the patient hospitalized?*
   - *Was the patient admitted to an intensive care unit (ICU)?*

   ![Image of Hospitalization, ICU & Death Information screen](image)

   **Please Note:** If the Communicable Disease Lab Entry indicated that the patient was hospitalized, the selection for the conditional question at the top of the **Hospitalization, ICU & Death Information** screen is auto-populated as **Yes: Was the patient hospitalized?**
   - If **Yes** is selected for the conditional question at the top of the screen, the subsequent hospitalization-related fields and ICU-related fields are enabled.

   If the Communicable Disease Lab Entry indicated that the patient was admitted to the ICU, the selection for the ICU-related question is auto-populated as **Yes: Was the patient admitted to an intensive care unit (ICU)?**
   - If **Yes** is selected for the ICU-related question, the subsequent **Admission Date** and **Discharge Date** fields are enabled.
• You can change the selection from Yes to No or Unknown, or vice versa for the conditional question at the top of the Hospitalization, ICU & Death Information screen: Was the patient hospitalized?

Please Note: If No or Unknown is selected for the conditional question at the top of the Hospitalization, ICU & Death Information screen, the subsequent hospitalization-related fields and ICU-related fields are disabled.

• Death-related questions are not impacted by the selected answer for the conditional question: Was the patient hospitalized?

• You can change the selection from Yes to No or Unknown, or vice versa for the ICU-related question: Was the patient admitted to an intensive care unit (ICU)?

Please Note: If Yes is selected for the ICU-related question, the subsequent Admission Date and Discharge Date fields are enabled.

• To proceed, enter the Admission Date to ICU and the Discharge Date from ICU in the appropriate fields.
11. To complete the **Hospitalization, ICU & Death Information** screen, you must complete the following mandatory fields marked with **red asterisks** (*), if enabled:

- If yes, please specify hospital name
- Admission Date
- Discharge Date
- Admission Date to ICU
- Discharge Date from ICU
- Did the patient die as a result of this illness?

**Please Note:** If the **Still Hospitalized** checkbox is selected, the subsequent death-related field is disabled: **Did the patient die as a result of this illness?**

**Please Note:** If **Yes** is selected for the field: **Did the patient die as a result of this illness?**, the subsequent field is enabled. To proceed, enter the **Date of Death** in the subsequent enabled field: **Date of Death**.
12. Once the appropriate edits and additions have been made, click **Next** to proceed to the **Additional Information** screen.

**Please Note:** The subsequent **Additional Information**, **Treatment Information**, and **Additional Comments** screens of the STD Case Report do **not** include any auto-populated information from the Communicable Disease Lab Entry.

- To proceed, you must enter the **appropriate information** in the enabled fields on each screen. Once complete, click **Next** until you navigate to the **Review and Submit** screen.

For specific information on how to complete these screens of the STD Case Report, please review the *Direct Data Entry for Electronic Case Reports: Sexually Transmitted Diseases User Guide* on the [KHIE website](https://www.khie.org).
Review and Submit: STD Case Report

Once the appropriate edits and additions have been made on all the STD Case Report screens, you will be navigated to the Review and Submit screen. The Review and Submit screen displays the summary of the information you have entered. Prior to submitting the STD Case Report, review the information on this screen to verify its accuracy. You must click Submit to submit the case report.

13. Review the information on the Review and Submit screen.

14. After verifying the information is accurate and/or the appropriate changes have been made, you must click Submit to submit the STD Case Report Entry.

15. All case report submissions are final. You have one more opportunity to select Cancel to continue reviewing the Case Report or click Submit to submit the report.
16. Click **OK** to acknowledge the case report has been submitted successfully.

**Please Note:** Clicking **OK** when the case report entry has been submitted successfully will automatically navigate you to the **Case Report Entry User Summary** screen.

- For specific information on the **Case Report Entry User Summary** screen, please review section 17: **Case Report Entry User Summary** of this guide.
14 Initiate Multi-Drug Resistant Organism Case Report

Upon initiating a Multi-Drug Resistant Organism (MDRO) Case Report on the Communicable Disease Lab Entry pop-up notification, Users are automatically navigated to the Patient Information screen of the MDRO Case Report.

The MDRO Case Report is a six-step process where Users enter (1) Patient Information, (2) Laboratory Information, (3) Exposure Information, (4) Hospitalization, ICU & Death Information, (5) Additional Comments, (6) Review and Submit. The Review and Submit screen is where Users must review the information entered and submit the MDRO Case Report.

The following MDRO Case Report screens display certain fields of information that have been auto-populated based on the information entered on the previously submitted Communicable Disease Lab Entry. When necessary, you can change the auto-populated information and enter different details in any of the enabled fields.

- Patient Information screen
- Laboratory Information screen
- Hospitalization, ICU, Disposition & Death Information screen
Patient Information

The **Patient Information** screen auto-populates with the existing patient demographic details entered on the previously submitted Communicable Disease Lab Entry. Users can change the auto-populated information in any of the enabled fields, as applicable. Users cannot change auto-populated details in disabled fields.

Users **cannot** edit the following auto-populated MDRO Type, Patient ID (MRN), Affiliation/Organization for Patient ID (MRN), and patient demographic fields which are grayed out and disabled:

- MDRO Type
- Is the Affiliation/Organization the same for Patient ID (MRN), Person Completing Form, and Attending Physician/Clinician?
- Patient ID (MRN)
- Affiliation/Organization for Patient ID (MRN)
- Date of Birth

- First Name
- Middle Name
- Last Name
- Prefix
- Suffix
- Patient Sex

**Please Note:** The Disease/Organism, Patient ID (MRN), Affiliation/Organization for Patient ID (MRN), and patient demographic fields are the only disabled fields. All other fields on the Patient Information screen and all subsequent screens are enabled. You have the option to edit any of the enabled fields on all screens of the MDRO Case Report.
1. You have the option to **edit the auto-populated information** in the following enabled fields:

- **Ethnicity**
- **Race**
- **Address, City, State, Zip Code, County**
- **Phone**
- **Email**
- **Is the patient currently pregnant?**

---

**Please Note:** The *Is the patient currently pregnant?* field is enabled only when **Female** is selected for the **Patient Sex** field on the **Patient Information** screen of the previously submitted Communicable Disease Lab Entry.

If **Yes** is selected for the *Is the patient currently pregnant?* field, the subsequent field is enabled. To proceed, enter the **Due Date** in the subsequent field: *if yes, please enter the due date (EDC).*
To complete the Patient Information screen, you must enter the appropriate information in the mandatory blank fields marked with red asterisks (*), as applicable:

- Organism Name
- Date of Diagnosis
- Person Completing Form
- Affiliation/Organization of Person Completing Form
- Attending Physician/Clinician
- Affiliation/Organization of Attending Physician/Clinician

![Image of Patient Information screen with highlighted fields]
Please Note: If the appropriate name does not display in the Person Completing Form or Attending Physician/Clinician dropdown menus, you must create details for a new Person Completing Form or new Attending Physician/Clinician.

- To create details for a new Person Completing Form, click the Person Completing Form hyperlink. Upon clicking the hyperlink, the Person Completing Form pop-up displays.

- To create details for a new Attending Physician/Clinician, click the Attending Physician/Clinician hyperlink. Upon clicking the hyperlink, the Attending Physician/Clinician pop-up displays.

To proceed, enter the details in the appropriate fields of the pop-up and click Save.
2. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Laboratory Information** screen.
Laboratory Information

The **Laboratory Information** screen displays details about the laboratory test that have been auto-populated based on the information previously entered on the Communicable Disease Lab Entry.

3. You have the option to **edit the auto-populated information** in the following enabled fields:

- **Does the patient have a lab test?**
- **Laboratory Name**
- **Test Name**
- **Filler Order/Accession Number**
- **Specimen Source**
- **Test Result**
- **Test Result Date**
- **Specimen Collection Date**
- **Additional Information**
• You can change the selection from Yes to No or Unknown, or vice versa for the conditional question at the top of the Laboratory Information screen: Does the patient have a lab test?

Please Note: If No or Unknown is selected for the conditional question at the top of the Laboratory Information screen, the subsequent fields are disabled.

• If you change the selection for the conditional question, a pop-up notification will display with a message that states: Please note that all selections on this screen will be reset. Are you sure you want to change your response?

• To reset the previous selection for the conditional question, click Yes on the pop-up notification.

Please Note: If Other is selected from the Test Name, Specimen Source, or Test Result dropdown menus, the subsequent textbox fields are enabled.

To proceed, you must enter the appropriate details in the subsequent textbox field(s), if enabled: If other, please specify.
4. You must **enter the appropriate information** in the following blank fields, as applicable:

- **Ordering Provider/Clinician**
- **Type of Culture (Optional)**
- **Location of patient at the time of specimen collection**
- **Facility Name/Location**
- **Facility County**
Please Note: If the appropriate name does not display in the *Ordering Provider/Clinician* dropdown menu, you must create details for a new Ordering Provider/Clinician by clicking the *Ordering Provider/Clinician* hyperlink. Upon clicking the hyperlink, the *Ordering Provider/Clinician* pop-up displays. To proceed, enter the details in the appropriate fields of the *Ordering Provider/Clinician* pop-up and click **Save**.

Please Note: If **Other healthcare setting** is selected from the *Location of the patient at the time of specimen collection* dropdown menu, the subsequent textbox field is enabled.

To proceed, you must **enter the name of the healthcare setting** in the subsequent textbox field: *If other, please specify*.

5. You also have the option to click **Add Test** to add additional tests for the patient.

- To delete an additional lab test, click the **Trash Bin Icon** located at the top right.
6. To complete the Laboratory Information screen, you must enter the appropriate information in the mandatory blank fields marked with red asterisks (*):

- Is this part of an outbreak?
- Was the organism previously identified?

**Please Note:** If Yes is selected for the Is this part of an outbreak? field, the subsequent textbox field is enabled. To proceed, you must enter the name of the outbreak in the subsequent textbox field: If other, please specify the name of the outbreak.

**Please Note:** If Yes is selected for the Was the organism previously identified? field, the subsequent field is enabled. To proceed, you must enter the date when organism was identified in the subsequent textbox field: If other, please provide the date.
7. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Exposure Information** screen.

**Please Note:** The subsequent **Exposure Information** screen of the MDRO Case Report does **not** include any auto-populated information from the Communicable Disease Lab Entry.

To proceed, you must enter the **appropriate information** in the enabled fields on the screen. Once complete, click **Next** to navigate to the subsequent **Hospitalization, ICU & Death Information** screen.
Hospitalization, ICU, Disposition & Death Information

The **Hospitalization, ICU, Disposition & Death Information** screen displays details about a patient’s hospitalizations that have been auto-populated based on the previously submitted Communicable Disease Lab Entry.

8. You have the option to **edit the auto-populated information** in the following enabled fields:

   - *Was the patient hospitalized at the time of specimen collection?*
   - *Was the patient admitted to an intensive care unit (ICU)?*
Please Note: If the Communicable Disease Lab Entry indicated that the patient was hospitalized, the selection for the conditional question at the top of the Hospitalization, ICU, Disposition & Death Information screen is auto-populated as Yes: Was the patient hospitalized at the time of specimen collection?

- If Yes is selected for the conditional question at the top of the screen, the subsequent hospitalization-related fields and ICU-related fields are enabled.

If the Communicable Disease Lab Entry indicated that the patient was admitted to the ICU, the selection for the ICU-related question is auto-populated as Yes: Was the patient admitted to an intensive care unit (ICU)?

- If Yes is selected for the ICU-related question, the subsequent Admission Date and Discharge Date fields are enabled. To proceed, you must enter the Admission Date to ICU and the Discharge Date from ICU in the appropriate fields.

Please Note: If No or Unknown is selected for the conditional question at the top of the Hospitalization, ICU, Disposition & Death Information screen, the subsequent hospitalization-related fields and ICU-related fields are disabled.

- The Was the patient previously hospitalized at your facility within the last 6 months? field is not impacted by the selected answer for the conditional question: Was the patient hospitalized at the time of specimen collection?
9. You must **enter the appropriate information** in the mandatory fields marked with **red asterisks** (*), if enabled:

- **If yes, please specify the hospital name**
- **If hospitalized, please specify the type of facility that the patient was admitted from.**
- **Facility Name**
- **Admission Date**
  - **Discharge Date**
• If Long Term Care Facility, Other Health Care Facility, or Other is selected from the If hospitalized, please specify the type of facility that the patient was admitted from dropdown menu, the subsequent field is enabled.
  o To proceed, you must enter the name of the facility that the patient was admitted from in the subsequent enabled field: Facility Name.

Please Note: If Home is selected from the If hospitalized, please specify the type of facility that the patient was admitted from dropdown menu, the subsequent Facility Name field is disabled.

Please Note: If the patient is deceased, click the Expired Checkbox below the Discharge Date field. Upon clicking the Expired Checkbox, the subsequent death-related field is enabled. To proceed, enter the Date of Death in the subsequent field: Date of Death.

Please Note: Upon entering the Discharge Date, the subsequent Date of Death field is disabled, while the discharge-related field is enabled. Select the type of location from the subsequent dropdown menu: If discharged, please specify the location.
• If **Long Term Care Facility, Other Health Care Facility, or Other** is selected from the **If discharged, please specify the location** dropdown menu, the subsequent fields are enabled.
  
  o To proceed, you must **enter the appropriate information** in the subsequent fields:
    
    • **Please specify the name of the facility/location where the patient has been discharged to.**
    
    • **Was the receiving facility notified of the patient’s MDRO?**

    ![Image of location field and MDRO notification options]

**Please Note:** If **Home** is selected from the **If discharged, please specify the location** dropdown menu, the subsequent fields are disabled:

• **Please specify the name of the facility/location where the patient has been discharged to.**

• **Was the receiving facility notified of the patient’s MDRO?**

![Image of location field and MDRO notification options for Home selection]

• You can change the selection from **Yes** to **No** or **Unknown**, or vice versa for the ICU-related question: **Was the patient admitted to an intensive care unit (ICU)?**
Please Note: If Yes is selected for the ICU-related question, the subsequent Admission Date and Discharge Date fields are enabled.

- To proceed, enter the Admission Date to ICU and the Discharge Date from ICU in the appropriate fields.

10. To complete the Hospitalization, ICU, Disposition & Death Information screen, you must complete the following mandatory fields marked with red asterisks (*), if enabled:

- Admission Date to ICU
- Discharge Date from ICU
- Was the patient previously hospitalized at your facility within the last 6 months?

- If Yes is selected for the Was the patient previously hospitalized at your facility within the last 6 months? field, the subsequent fields are enabled. To proceed, you must enter the appropriate information in the subsequent enabled fields:
  - If yes, please specify the hospital name.
  - Admission Date
  - Discharge Date
You also have the option to click **Add Additional Hospitalization Date** to add additional hospitalization dates if the patient has been hospitalized at your facility multiple times within the last 6 months.

**Please Note:** All subsequent fields are disabled if **No** or **Unknown** is selected for the field: *Was the patient previously hospitalized at your facility within the last 6 months?*
12. Once the appropriate edits and additions have been made, click **Next** to proceed to the **Additional Comments** screen.

**Please Note:** The subsequent **Additional Comments** screen of the MDRO Case Report does **not** include any auto-populated information from the Communicable Disease Lab Entry.

- To proceed, enter the **additional information** in the enabled textbox field. Once complete, click **Next** to navigate to the **Review and Submit** screen.

For specific information on how to complete these screens of the MDRO Case Report, please review the *Direct Data Entry for Electronic Case Reports: Multi-Drug Resistant Organism User Guide* on the [KHIE website](https://www.khie.org).
Review and Submit: MDRO Case Report

Once the appropriate edits and additions have been made on all the MDRO Case Report screens, you will be navigated to the Review and Submit screen. The Review and Submit screen displays the summary of the information you have entered. Prior to submitting the MDRO Case Report, review the information on this screen to verify its accuracy. You must click Submit to submit the case report.

13. Review the information on the Review and Submit screen.

14. After verifying the information is accurate and/or the appropriate changes have been made, you must click Submit to submit the MDRO Case Report Entry.

15. All case report submissions are final. You have one more opportunity to select Cancel to continue reviewing the Case Report or click Submit to submit the report.
16. Click **OK** to acknowledge the case report has been submitted successfully.

**Please Note:** Clicking **OK** when the case report entry has been submitted successfully will automatically navigate you to the **Case Report Entry User Summary** screen.

- For specific information on the **Case Report Entry User Summary** screen, please review the **Case Report Entry User Summary** section of this guide.
15 Initiate Perinatal Hepatitis Case Report

Upon initiating a Perinatal Hepatitis Case Report on the Communicable Disease Lab Entry pop-up notification, Users are automatically navigated to the Patient Information screen of the Perinatal Hepatitis Case Report.

The Perinatal Hepatitis Case Report is a nine-step process where Users enter (1) Patient Information, (2) Laboratory Information, (3) Applicable Symptoms, (4) Medical Conditions, (5) Exposure Information, (6) Hospitalization, ICU & Death Information, (7) Vaccination History, (8) Additional Comments, (9) Review and Submit. The Review & Submit screen is where Users must review the information entered and submit the Perinatal Hepatitis Case Report.

The following Perinatal Hepatitis Case Report screens display certain fields of information that have been auto-populated based on the information entered on the previously submitted Communicable Disease Lab Entry. When necessary, you can change the auto-populated information and enter different details in any of the enabled fields.

- Patient Information screen
- Applicable Symptoms screen
- Hospitalization, ICU & Death Information screen
- Laboratory Information screen
- Additional Information screen
**Patient Information**

The **Patient Information** screen auto-populates with the existing patient demographic details entered on the previously submitted Communicable Disease Lab Entry. Users can change the auto-populated information in any of the enabled fields, as applicable. Users cannot change auto-populated details in grayed out and disabled fields.

Users **cannot** edit the following auto-populated Disease/Organism, Patient ID (MRN), Affiliation/Organization for Patient ID (MRN), and patient demographic fields which are grayed out and disabled:

- Disease/Organism
- Is the Affiliation/Organization the same for Patient ID (MRN), Person Completing Form, and Attending Physician/Clinician?
- Patient ID (MRN)
- Affiliation/Organization for Patient MRN
- Date of Birth
- First Name
- Middle Name
- Last Name
- Prefix
- Suffix
- Patient Sex
Please Note: The Disease/Organism, Patient ID (MRN), Affiliation/Organization for Patient ID (MRN), and patient demographic fields are the only disabled fields. All other fields on the Patient Information screen and all subsequent screens are enabled. You have the option to edit any of the enabled fields on all screens of the Perinatal Hepatitis Case Report.

1. You have the option to edit the auto-populated information in the following enabled fields:
   - Ethnicity
   - Race
   - Address, City, State, Zip Code, County
   - Phone
   - Email
   - Is the patient currently pregnant?

Please Note: The Is the patient currently pregnant? field is enabled only when Female is selected for the Patient Sex field on the Patient Information screen of the previously submitted Communicable Disease Lab Entry.

   • If Yes is selected for the Is the patient currently pregnant? field, the subsequent field is enabled.

To proceed, enter the Due Date in the subsequent field: If yes, please enter the due date (EDC).
2. You must **enter the appropriate information** in the mandatory blank fields marked with red asterisks (*):

- Date of Diagnosis
- Person Completing Form
- Affiliation/Organization of Person Completing Form
- Attending Physician/Clinician
- Affiliation/Organization of Attending Physician/Clinician
Please Note: If the appropriate name does not display in the Person Completing Form or Attending Physician/Clinician dropdown menus, you must create details for a new Person Completing Form or new Attending Physician/Clinician.

- To create details for a new Person Completing Form, click the Person Completing Form hyperlink. Upon clicking the hyperlink, the Person Completing Form pop-up displays.
- To create details for a new Attending Physician/Clinician, click the Attending Physician/Clinician hyperlink. Upon clicking the hyperlink, the Attending Physician/Clinician pop-up displays.

To proceed, enter the details in the appropriate fields of the pop-up and click Save.

3. To complete the Patient Information screen, you must select the appropriate answer for the mandatory blank fields marked with red asterisks (*), if enabled:
   - Is the patient postpartum?
   - Does the patient have a history of incarceration?
Please Note: If Yes is selected for the *Is the patient currently pregnant?* field, the subsequent postpartum-related field is disabled: *Is the patient postpartum?*

Please Note: If No or Unknown is selected for the *Is the patient currently pregnant?* field, the subsequent due date-related field is disabled: *If yes, please enter the due date (EDC).* Additionally, the postpartum-related field is enabled if No or Unknown is selected for the *Is the patient currently pregnant?* field.

4. Once the appropriate edits and additions have been made in the enabled fields, click Next to proceed to the Laboratory Information screen.
Laboratory Information

The Laboratory Information screen displays details about the laboratory test that have been auto-populated based on the information previously entered on the Communicable Disease Lab Entry.

5. You have the option to edit the auto-populated information in the following enabled fields:

- Does the patient have a lab test?
- Hepatitis Marker
- Results
- Test Result Date
- Specimen Collection Date
- Laboratory Name
• You can change the selection from Yes to No or Unknown, or vice versa for the conditional question at the top of the Laboratory Information screen: Does the patient have a lab test?

Please Note: If No or Unknown is selected for the conditional question at the top of the Laboratory Information screen, the subsequent fields are disabled.
6. You have the option to click **Add Hepatitis Marker** to log the details for multiple hepatitis markers for the patient.

**Please Note:** The *Hepatitis Marker* dropdown menu displays only the hepatitis marker options that apply to the Disease/Organism selected in the submitted Communicable Disease Lab Entry.
• You also have the option to click **Add ALT** to log the details for an ALT.

• You have the option to click **Add AST** to log the details for an AST.
You can also click **Add Bilirubin** to log the details for Bilirubin.
7. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Applicable Symptoms** screen.
Applicable Symptoms

The **Applicable Symptoms** screen asks questions about the patient’s symptoms.

8. You have the option to **edit the auto-populated information** in the following enabled fields:

- *Were symptoms present during the course of illness?*
- *Onset Date*

---

**Please Note:** If the patient was marked as symptomatic on the Communicable Disease Lab Entry, the selection for the conditional question at the top of the **Applicable Symptoms** screen is auto-populated as **Yes**: *Were symptoms present during the course of illness?*

- If **Yes** is selected for the conditional question at the top of the **Applicable Symptoms** screen, the subsequent fields are enabled.

If an onset date for symptoms was entered on the Communicable Disease Lab Data Entry, the same date is auto-populated for the *Onset Date* field on the **Applicable Symptoms** screen.
9. You have the option to **edit the auto-populated information** in the enabled fields.

   - You can change the selection from **Yes** to **No** or **Unknown**, or vice versa for the conditional question at the top of the **Applicable Symptoms** screen: *Were symptoms present during the course of illness?*

   - If you change the selection for the conditional question, a pop-up notification will display with a message that states: *Please note that all selections on this screen will be reset. Are you sure you want to change your response?*

   - To reset the previous selection for the conditional question, click **Yes** on the pop-up notification.

   **Please Note:** If **No** is selected for the conditional question at the top of the **Applicable Symptoms** screen, all subsequent fields are disabled and marked with **No**.

   If **Unknown** is selected for the conditional question, all subsequent fields are disabled and marked as **Unknown**.

   ![Applicable Symptoms Screen](image-url)
10. To complete the **Applicable Symptoms** screen, you must select the **appropriate answers** for the mandatory symptom fields marked with **red asterisks** (*).

**Please Note:** The symptom fields on the **Applicable Symptoms** screen vary based on the selected reportable condition.
11. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Medical Conditions** screen.

**Please Note:** The subsequent **Medical Conditions** screen of the Perinatal Hepatitis Case Report does **not** include any auto-populated information from the Communicable Disease Lab Entry.

To proceed, you must enter the **appropriate information** in the enabled fields on the screen. Once complete, click **Next** to navigate to the subsequent **Exposure Information** screen.
Exposure Information

The **Exposure Information** screen collects exposure details about the patient and displays information that has been auto-populated based on the previously submitted Communicable Disease Lab Entry.

12. You have the option to **edit the auto-populated information** in the following enabled fields:

- *Did the patient have any of the following exposures in the past 6 months?*
- *Adult congregate living facility (nursing, assisted living, or long-term care facility)*
• You can change the selection from Yes to No or Unknown, or vice versa for the conditional question at the top of the Exposure Information screen: Did the patient have any of the following exposures in the past 6 months?

• If you change the selection from Yes to No or Unknown, or vice versa for the conditional question, a pop-up notification will display a message that states: Please note that all selections on this screen will be reset. Are you sure you want to change your response?

• To reset the previous selection for the conditional question, click Yes on the pop-up notification.

Please Note: If No is selected for the conditional question at the top of the Exposure Information screen, the subsequent fields are disabled and marked with No.

If Unknown is selected for the conditional question, the subsequent fields are disabled and marked as Unknown.

The outbreak-related question at the bottom of the screen is not impacted by the selected answer for the conditional question: Does any of the following apply to the patient?

• You can change the selection from Yes to No or Unknown, or vice versa for the auto-populated field: Adult congregate living facility (nursing, assisted living, or long-term care facility)
Please Note: If Yes is selected for any of the descriptive questions, the subsequent textbox is enabled for Users to specify the name of appropriate setting.

For example, if Yes is selected for the Adult congregate living facility (nursing, assisted living, or long-term care facility) field, the subsequent textbox field is enabled.

To proceed, you must enter the name of the living facility in the subsequent field: If yes, please specify the nursing, assisted living or long-term care facility.

13. To complete the Exposure Information screen, select the appropriate answers for the blank enabled fields to indicate descriptions that apply to the patient.
Please Note: If Yes is selected for the Correctional Facility, Tattoos, Piercings, Foreign Born, or Is this part of an outbreak? fields, the subsequent field is enabled for Users to specify the name of appropriate setting.

To proceed, you must enter the **appropriate setting** in the subsequent field: *If yes, please specify.*

<table>
<thead>
<tr>
<th>Field</th>
<th>Yes</th>
<th>No</th>
<th>Unknown</th>
<th>If yes, please specify name of correctional facility*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Field</th>
<th>Yes</th>
<th>No</th>
<th>Unknown</th>
<th>If yes, please specify the setting*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Field</th>
<th>Yes</th>
<th>No</th>
<th>Unknown</th>
<th>If yes, please specify country*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Field</th>
<th>Yes</th>
<th>No</th>
<th>Unknown</th>
<th>If yes, please specify the name of the outbreak*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please Note: If Other is selected from one of the *If yes, please specify the setting* dropdown menus for the Tattoos field or the Piercings field, the subsequent textbox field is enabled.

To proceed, enter the **appropriate setting** in the subsequent textbox: *If other, please specify.*
14. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Hospitalization, ICU & Death Information** screen.
Hospitalization, ICU & Death Information

The Hospitalization, ICU & Death Information screen displays details about a patient's hospitalizations that have been auto-populated based on the previously submitted Communicable Disease Lab Entry.

15. You have the option to edit the auto-populated information in the following enabled fields:

- Was the patient hospitalized?
- Was the patient admitted to an intensive care unit (ICU)?

Please Note: If the Communicable Disease Lab Entry indicated that the patient was hospitalized, the selection for the conditional question at the top of the Hospitalization, ICU & Death Information screen is auto-populated as Yes: Was the patient hospitalized?

- If Yes is selected for the conditional question at the top of the screen, the subsequent hospitalization-related fields and ICU-related fields are enabled.

If the Communicable Disease Lab Entry indicated that the patient was admitted to the ICU, the selection for the ICU-related question is auto-populated as Yes: Was the patient admitted to an intensive care unit (ICU)?

- If Yes is selected for the ICU-related question, the subsequent Admission Date and Discharge Date fields are enabled. To proceed, you must enter the Admission Date to ICU and the Discharge Date from ICU in the appropriate fields.
• You can change the selection from Yes to No or Unknown, or vice versa for the conditional question at the top of the Hospitalization, ICU & Death Information screen: Was the patient hospitalized?

Please Note: If No or Unknown is selected for the conditional question at the top of the Hospitalization, ICU & Death Information screen, the subsequent hospitalization-related fields and ICU-related fields are disabled.

• Death-related questions are not impacted by the selected answer for the conditional question: Was the patient hospitalized?

• You can change the selection from Yes to No or Unknown, or vice versa for the ICU-related question: Was the patient admitted to an intensive care unit (ICU)?
Please Note: If Yes is selected for the ICU-related question, the subsequent Admission Date and Discharge Date fields are enabled.

- To proceed, enter the Admission Date to ICU and the Discharge Date from ICU in the appropriate fields.

16. To complete the Hospitalization, ICU & Death Information screen, you must complete the following mandatory fields marked with red asterisks (*), if enabled:

- If yes, please specify hospital name
- Admission Date
- Discharge Date
- Admission Date to ICU
- Discharge Date from ICU
- Did the patient die as a result of this illness?
Please Note: If the Still Hospitalized checkbox is selected, the subsequent death-related field is disabled: *Did the patient die as a result of this illness?*

Please Note: If *Yes* is selected for the field: *Did the patient die as a result of this illness?,* the subsequent field is enabled. To proceed, enter the **Date of Death** in the subsequent enabled field: **Date of Death.**
17. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Vaccination History** screen.

**Please Note:** The subsequent **Vaccination History** and **Additional Comments** screens of the Perinatal Hepatitis Case Report do **not** include any auto-populated information from the Communicable Disease Lab Entry.

- To proceed, you must enter the **appropriate information** in the enabled fields on each screen. Once complete, click **Next** until you navigate to the **Review and Submit** screen.

For specific information on how to complete these screens of the Perinatal Hepatitis Case Report, please review the *Direct Data Entry for Electronic Case Reports: Perinatal Hepatitis User Guide* on the [KHIE website](https://www.khie.org).
Review and Submit: Perinatal Hepatitis Case Report

Once the appropriate edits and additions have been made on all the Perinatal Hepatitis Case Report screens, you will be navigated to the Review and Submit screen. The Review and Submit screen displays the summary of the information you have entered. Prior to submitting the Perinatal Hepatitis Case Report, review the information on this screen to verify its accuracy. You must click Submit to submit the case report.

18. Review the information on the Review and Submit screen.

19. After verifying the information is accurate and/or the appropriate changes have been made, you must click Submit to submit the Perinatal Hepatitis Case Report Entry.

20. All case report submissions are final. You have one more opportunity to select Cancel to continue reviewing the Case Report or click Submit to submit the report.
21. Click **OK** to acknowledge the case report has been submitted successfully.

**Please Note:** Clicking **OK** when the case report entry has been submitted successfully will automatically navigate you to the **Case Report Entry User Summary** screen.

- For specific information on the **Case Report Entry User Summary** screen, please review section 17: *Case Report Entry User Summary* of this guide.
16 Initiate Child Hepatitis Case Report

Upon initiating a Child Hepatitis Case Report on the Communicable Disease Lab Entry pop-up notification, Users are automatically navigated to the Patient Information screen of the Child Hepatitis Case Report.

The Child Hepatitis Case Report Form is a seven-step process where Users enter (1) Patient Information, (2) Laboratory Information, (3) Exposure Information, (4) Hospitalization, ICU, & Death Information, (5) Vaccination History, and (6) Additional Comments. (7) Review and Submit is where Users must review the information entered and submit the Child Hepatitis Case Report.

The following Child Hepatitis Case Report screens display certain fields of information that have been auto-populated based on the information entered on the previously submitted Communicable Disease Lab Entry. When necessary, you can change the auto-populated information and enter different details in any of the enabled fields.

- Patient Information screen
- Hospitalization, ICU & Death Information screen
- Laboratory Information screen
Patient Information

The **Patient Information** screen auto-populates with the existing patient demographic details entered on the previously submitted Communicable Disease Lab Entry. Users can change the auto-populated information in any of the enabled fields, as applicable. Users cannot change auto-populated details in grayed out and disabled fields.

Users **cannot** edit the following auto-populated Disease/Organism, Patient ID (MRN), Affiliation/Organization for Patient ID (MRN), and patient demographic fields which are grayed out and disabled:

- Disease/Organism
- Is the Affiliation/Organization the same for Patient ID (MRN), Person Completing Form, and Attending Physician/Clinician?
- Patient ID (MRN)
- Affiliation/Organization for Patient ID (MRN)
- Middle Name
- Last Name
- Prefix / Suffix
- Patient Sex
- Date of Birth
- First Name
- Last Name
- Prefix
- Suffix
- Patient Sex
- Ethnicity
- Race
- Mother’s Current Legal Name and Address

**Please Note:** The Disease/Organism, Patient ID (MRN), Affiliation/Organization for Patient ID (MRN), and patient demographic fields are the only disabled fields. All other fields on the **Patient Information** screen and all subsequent screens are enabled. You have the option to edit any of the enabled fields on all screens of the Child Hepatitis Case Report.
1. You have the option to **edit the auto-populated information** in the following enabled fields:

- Ethnicity
- Race
- Address, City, State, Zip Code, County
- Phone
- Email

2. To complete the **Patient Information** screen, you must **enter the appropriate information** in the mandatory blank fields marked with **red asterisks** (*), as applicable:

- Date of Diagnosis
- Person Completing Form
- Affiliation/Organization of Person Completing Form
- Attending Physician/Clinician
- Affiliation/Organization of Attending Physician/Clinician
- Mother's First Name
- Mother's Last Name
Please Note: If the appropriate name does not display in the Person Completing Form or Attending Physician/Clinician dropdown menus, you must create details for a new Person Completing Form or new Attending Physician/Clinician.

- To create details for a new Person Completing Form, click the Person Completing Form hyperlink. Upon clicking the hyperlink, the Person Completing Form pop-up displays.
- To create details for a new Attending Physician/Clinician, click the Attending Physician/Clinician hyperlink. Upon clicking the hyperlink, the Attending Physician/Clinician pop-up displays.

To proceed, enter the details in the appropriate fields of the pop-up and click Save.

3. You must select the appropriate answers for the following mandatory fields:

- Does the patient have Neonatal Abstinence Syndrome? • Who does the infant/child live with?
Please Note: If **Other** is selected in response to the question *Who does the Infant/Child live with?*, then the following subsequent field is enabled.

To proceed, you must enter the **description of the person with whom the infant/child is living** (i.e., Legal Guardian, etc.) in the subsequent field: *If other, please specify.*

Please Note: If **Mother** is selected in response to the question *Who does the Infant/Child live with?*, then the subsequent contact information fields for the person with whom the child is living are automatically populated with the patient's mother's contact information.

This means the patient's mother's contact information previously entered in the *Mother's Current Legal Name and Address* section is automatically populated in the *Please enter the contact info of person the child is living with* section.
Please Note: If **Father, Grandparent, Other, or Unknown** is selected in response to *Who does the infant/child live with?*, then the subsequent section is enabled.

To proceed, you must complete the fields in the subsequent section: *Please enter the contact info of person the child is living with.*
4. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Laboratory Information** screen.
Laboratory Information

The Laboratory Information screen displays details about the laboratory test that have been auto-populated based on the information previously entered on the Communicable Disease Lab Entry.

5. You have the option to edit the auto-populated information in the following enabled fields:
   - **Does the patient have a lab test?**
   - **Hepatitis Marker**
   - **Results**
   - **Test Result Date**
   - **Specimen Collection Date**
   - **Laboratory Name**

6. You have the option to click Add Hepatitis Marker to log multiple hepatitis markers.

Please Note: If No or Unknown is selected for the Does the patient have a lab test? question at the top of the Laboratory Information screen, all subsequent fields are disabled and grayed out.
7. You also have the option to click **Add ALT, Add AST, and/or Add Bilirubin.**

8. Once the appropriate edits and additions have been made in the enabled fields, click **Next** to proceed to the **Exposure Information** screen.

---

**Please Note:** The subsequent **Exposure Information** screen of the Child Hepatitis Case Report does **not** include any auto-populated information from the Communicable Disease Lab Entry.

To proceed, you must enter the **appropriate information** in the enabled fields on each screen. Once complete, click **Next** to navigate to the **Hospitalization, ICU & Death Information** screen.
Hospitalization, ICU & Death Information
The Hospitalization, ICU & Death Information screen displays details about a patient’s hospitalizations that have been auto-populated based on the previously submitted Communicable Disease Lab Entry.

9. You have the option to edit the auto-populated information in the following enabled fields:

- **Was the patient hospitalized?**
- **Was the patient admitted to an intensive care unit (ICU)?**

**Please Note:** If the Communicable Disease Lab Entry indicated that the patient was hospitalized, the selection for the conditional question at the top of the Hospitalization, ICU & Death Information screen is auto-populated as Yes: Was the patient hospitalized?

- If Yes is selected for the conditional question at the top of the screen, the subsequent hospitalization-related fields and ICU-related fields are enabled.

If the Communicable Disease Lab Entry indicated that the patient was admitted to the ICU, the selection for the ICU-related question is auto-populated as Yes: Was the patient admitted to an intensive care unit (ICU)?

- If Yes is selected for the ICU-related question, the subsequent Admission Date and Discharge Date fields are enabled. To proceed, you must enter the Admission Date to ICU and the Discharge Date from ICU in the appropriate fields.
10. To complete the Hospitalization, ICU & Death Information screen, you must complete the following mandatory fields marked with red asterisks (*), if enabled:

- If yes, please specify hospital name
- Admission Date
- Discharge Date
- Admission Date to ICU
- Discharge Date from ICU
- Did the patient die as a result of this illness?

Please Note: If No or Unknown is selected for the conditional question at the top of the Hospitalization, ICU & Death Information screen, the subsequent hospitalization-related fields and ICU-related fields are disabled.

- Death-related questions are not impacted by the selected answer for the conditional question: Was the patient hospitalized?

Please Note: If the Still Hospitalized checkbox is selected, the subsequent death-related field is disabled: Did the patient die as a result of this illness?
Please Note: If Yes is selected for the field: Did the patient die as a result of this illness?, the subsequent field is enabled.

To proceed, enter the Date of Death in the subsequent enabled field: Date of Death.
11. Once the appropriate edits and additions have been made, click **Next** to proceed to the **Vaccination History** screen.

![Child Hepatitis Case Report Form](image)

**Please Note:** The subsequent **Vaccination History** and **Additional Comments** screens of the Child Hepatitis Case Report do **not** include any auto-populated information from the Communicable Disease Lab Entry.

- To proceed, you must enter the **appropriate information** in the enabled fields on each screen. Once complete, click **Next** until you navigate to the **Review and Submit** screen.

**Review and Submit: Child Hepatitis Case Report**

Once the appropriate edits and additions have been made on all the Child Hepatitis Case Report screens, you will be navigated to the **Review and Submit** screen. The **Review and Submit** screen displays the summary of the information you have entered. Prior to submitting the Other Reportable Conditions Case Report, review the information on this screen to verify its accuracy. You must click **Submit** to submit the case report.
12. Review the information on the **Review and Submit** screen.

![Review and Submit Screen](image)

13. After verifying the information is accurate and/or the appropriate changes have been made, you must click **Submit** to submit the Child Hepatitis Case Report Entry.

![Submit Button](image)

14. All case report submissions are final. You have one more opportunity to select **Cancel** to continue reviewing the Case Report or click **Submit** to submit the report.

![Cancel and Submit Buttons](image)

15. Click **OK** to acknowledge the case report has been submitted successfully.
Please Note: Clicking OK when the case report entry has been submitted successfully will automatically navigate you to the Case Report Entry User Summary screen.

- For specific information on the Case Report Entry User Summary screen, please review section 17: Case Report Entry User Summary of this guide.
17 Case Report Entry User Summary

The **Case Report Entry User Summary** screen displays all submitted and in-progress case reports you have entered. By default, the **Case Report Entry User Summary** screen displays the case reports from the last updated date. You can use the Date Range buttons to do a custom search for previous case reports entered within the last 6 months.

1. Users are automatically navigated to the **Case Report User Summary** screen upon completing one of the following actions:
   - Initiating multiple Case Report Forms when a Communicable Disease Lab Entry has been submitted successfully.
Communicable Disease Lab Entry and Initiating Case Reports User Guide

- Clicking **OK** on the *Case Report Entry* pop-up when the Case Report has been submitted successfully from the *Review and Submit* screen.

**Please Note:** Users with the *Manual Case Reporter* role have the access to the *Case Report Entry User Summary* screen at any time.

2. To navigate to the *Case Report Entry User Summary* screen at any time, click the *Case Report Entry Tab* in the blue Navigation Bar at the top of the screen.

3. Select *Case Report Entry User Summary* from the dropdown menu.

4. To retrieve case reports for a specific date range within the last 6 months, enter the appropriate **Start Date** and **End Date**.

5. Click **Retrieve Data** to generate the case reports.
6. To delete an initiated Case Report for the patient, click **Delete** next to the appropriate **Report Type**.

7. The **Case Report Deletion** pop-up displays. To delete the Case Report, click **Confirm**. Click **Cancel** if you do not want to delete the Case Report.
8. To search for a specific Case Report, click **Apply Filter**.

9. The Filter fields display. Search by entering the **Report Type**, **Disease/Organism**, **Affiliation/Organization**, **Patient MRN**, the patient's **First Name**, **Last Name**, **Date of Birth**, **Patient Sex**, **Status**, **Last Updated**, and/or **Submission Date** in the corresponding Filter fields.
Review Previously Submitted Case Reports

10. To review a summary of a completed case report that has been previously submitted, click View located next to the appropriate case report.

11. The Case Report Details pop-up displays a summary of the previously submitted case report.
   - Click Print to print the case report.
   - Click Download to download a PDF version of the case report.

12. Click OK to close out of the pop-up.
Copy Previously Submitted Case Reports

The Copy feature allows Users to copy the information from a completed case report, make edits, then submit a new case report for the same patient. This means you can copy the information from a previously submitted case report into a new case report, update the appropriate information, then submit as a new case report for the patient.

13. To copy the information from a completed case report that has been previously submitted, click Copy located next to the appropriate case report.

Please Note: Clicking Copy will automatically navigate you to the Patient Information screen of the appropriate Case Report. By default, the Patient Information screen displays auto-populated information entered on the previously submitted case report.

You have the option to edit the auto-populated information entered in any of the enabled fields and submit a new case report for the patient.

- For specific information on the Patient Information screen of each Case Report, please review the appropriate Initiate Case Report section of this guide.

By default, the Patient Summary screen displays the information entered on the previously submitted case report. Users can change the information entered in any of the enabled fields and submit a new case report for the patient. However, Users cannot change the disease/organism, affiliation/organization, and patient demographic fields which are grayed out and disabled:

- Disease/Organism
- Patient ID (MRN)
- Affiliation/Organization of the Patient ID (MRN)
- Prefix
- Suffix

- First Name
- Middle Name
- Last Name
- Date of Birth
Initiate Case Report

14. To complete a Case Report that has been previously initiated for the patient, click Continue next to the appropriate Report Type.
Please Note: Upon clicking Continue, you will be automatically navigated to the Patient Information screen of the selected Case Report. By default, the Patient Information screen displays auto-populated information entered on the previously submitted Communicable Disease Lab Entry.

- For specific information on the Patient Information screen of each Case Report, please review the appropriate Initiate Case Report section of this guide.

18 Technical Support

Toll-Free Telephone Support
For questions and assistance regarding the ePartnerViewer, please call 1 (877) 651-2505.

Email Support
To submit questions electronically or request support regarding the ePartnerViewer, please email KHIESupport@ky.gov.

Please Note: To seek assistance or log issues, you can use the Support Tab located in the blue navigation bar at the top of the screen in the ePartnerViewer.