



# P16-0371 Panorama Project

# Panorama Investigation Management User Manual

# **PNS IOM 104 Exposures**

Version 1.0

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## TABLE OF CONTENTS

1	EXPOSURES OVERVIEW	1
	1.1 EXPOSURE - BASIC FLOW (CONTACT TRACING)	1
2	VIEW EXPOSURE SUMMARY	3
3	QUICK ENTRY – TRANSMISSION EVENT	4
4	CREATE TRANSMISSION EVENT	5
5 NO <sup>-</sup>	BASIC CONTACT TRACING PROCESS FLOW #1 - CLIENT & INVESTIGATION FIFICATION ALREADY CREATED	<b>10</b>
	5.2 ADD KNOWN CONTACTS- SEARCH FOR INVESTIGATIONS.	10
	5.3 ADD KNOWN CONTACTS - SEARCH FOR PREVIOUSLY CREATED COHORT	19
	5.4 Add Unknown/Anonymous Contacts	23
	5.5 SEARCH AND UPDATE UNKNOWN/ANONYMOUS CONTACT INFORMATION	27
	5.6 CONVERTING UNKNOWN CONTACT TO KNOWN CONTACT	30
6	<ul> <li>INVALIDATING TRANSMISSION EVENT ENTERED IN ERROR.</li> <li>6.1 UNLINK ALL AE(s) ATTACHED TO INCORRECT INVESTIGATION.</li> <li>6.2 OPENTE A NEW INVESTIGATION AND TRANSMISSION EVENT.</li> </ul>	<b>36</b> 36
_	0.2 CREATE A NEW INVESTIGATION AND TRANSMISSION EVENT	50
7	QUICK ENTRY – ACQUISITION EVENT	39
8	CREATE ACQUISITION EVENT.         8.1       CREATE ACQUISITION EVENT.         8.2       ADD AE SOURCE AND SOURCE INVESTIGATION ID.	<b>40</b> 40 44
9	INVALIDATING ACQUISITION EVENT ENTERED IN ERROR	48
	<ul> <li>9.1 UPDATE ACQUISITION EVENT (AE) AND MARK AS INVALID.</li> <li>9.2 UPDATE TRANSMISSION EVENT – INVALIDATE/UNLINK</li></ul>	48 50 54
10	COPY TRANSMISSION AND ACQUISITION EVENTS	64
	10.1 COPY A TRANSMISSION EVENT	64
	10.2 COPY AN ACQUISITION EVENT	67
11	VIEW OR UPDATE TE/AE DETAILS	71
12	LINK TRANSMISSION TO AN ACQUISITION EVENT	74
13 CRI	BASIC CONTACT TRACING FLOW #2 - USING CLIENT FROM CLIENT/CONTACT LIST EATE INVESTIGATION	то 78



# **1 EXPOSURES OVERVIEW**

Panorama's Exposures functionality provides users the ability to track individual Subjects, their exposure to disease and a list of contacts they may have exposed.

An Acquisition Event (AE) describes details of a subject's exposure to a potential source of a communicable disease. An AE must have an associated investigation, which is defined as the contact investigation.

A Transmission Event (TE) describes the details of a subject's potential transmission of a communicable disease to another subject. The transmitting subject in this situation may be a human who has a case of a disease or a non-human subject such as an animal, food, water, fomite, or vector capable of transmitting a disease agent. A TE may have an associated investigation, which is defined as the source investigation.

Transmission Events can record three types of contacts: known, unknown and anonymous. A known contact is one where the Client exists in the System and is recorded as an Acquisition Event. An Unknown contact is recorded when there is limited data available about the individual, and the information may or may not be correct. An Anonymous contact is one where there is insufficient contact information about the individual to try to contact them. The system simply records an overall anonymous contact count.

Transmission Events are always recorded in the context of an Investigation or an Outbreak. Acquisition Events are always recorded in the context of an Investigation.

A TE could be linked to zero, one or more AEs, which allows a source investigation to be linked to zero or more contact investigations. An AE may or may not be linked to a TE since the source of the disease may not be known. An AE may not be directly linked to another AE, but they could be indirectly linked via a common TE, which allows contact investigations to be linked indirectly with other contact investigations.

The generalized exposures described above enable investigation of person-to-person and food or waterborne, fomite and vector borne exposures to be recorded. Trace back investigations can be recorded and examined using the TE and AE functions.

## 1.1 Exposure - Basic Flow (Contact Tracing)

The basic workflow for recording an exposure in an investigation starts with identifying the transmitter (subject) and associated investigation record. From here, the user can enter details about the TE. Upon submission of the TE, the User may search for a cohort, a subject, or an existing investigation to add new contact record(s). If a cohort or subject is selected, the User will create the new investigation(s) and return. A new AE record(s) will be created for the investigation(s) with the appropriate AE details and linked to the TE. The user is left at the subject's TE details screen where additional data or another AE can be entered. AEs can still be associated to a subject (and a contact investigation created in the system) even if no TE details are available.

The system provides quick entry capability from the exposure summary screen at the investigation level, replicates contact events across a cohort, copies a TE or AE to another investigation, copies TEs for use in an outbreak, and allows links between investigations, outbreaks, and TEs. Searching TEs by exposure name, ID, mode of transmission, source,



source details, start and end dates, location, setting name and type, sub-jurisdiction, city, and source investigation identifying information is supported. The Search and Link Exposures functionality allows Users to search for Transmission Events (Exposures) that have been entered into the System. Users are able to update a selected Transmission Event, create a Transmission Event for the Investigation or Outbreak in Context, and associate a Transmission to an Acquisition Event.

Whenever TE or AE details are updated, the system validates that the associated AE or TE still falls within the appropriate timeframe. The user is given the choice whether to keep the contact linked even though the AE falls outside the range. Additionally, the User can redefine the range or unlink associated records that now fall outside the range.



## 2 VIEW EXPOSURE SUMMARY

1. After setting a Client and Investigation in Context in the Investigations Module, navigate to the **Left-Hand Navigation** menu, select **Exposure Summary**.

	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN	
Recent Work  Search	Exposure	Summary					0	Ē
Search Investigations Search Lab							ACT	IVE
Search Exposures Search Interventions	Client ID:	Name(Last, First Middle	e)/Gender:	Health Card No:	Date	of Birth / Age:		
Search Clients Search Non-Human Subjects	Phone Number: -(-)	Jurisdiction Info: Department of Health an	d Wellness,Nova	- Additional ID Typ Additional ID: Provincial healths	pe / service	Aug 01741 years		
✓ Investigation		Scotia Health Authority		provider identifier	/-			
Subject Summary Investigation Summary Investigation Details Lab	Investigation ID: 180 Disease:	Status: OPEN PHAC Date/Typ	Disp Inve prog e: Etio	oosition: stigation in ress logic Agent:	Investigator: - Authority/Classifical	tion:	Investigation	
Encounter Details Signs & Symptoms Complications	Measles Transmission	2018 Aug 09 / Da Reported	ate -		National / Case - Pers 09	son Under Investigatio ☆ Hide Trar	n / 2018 Aug	mary
Outcomes Basic Assessment	0 Transmission E Row Actions:	events Found. 0 Contacts	Found.		G	Quick Entry Create	e Transmission Ever	nt
Medical History ADT Record Incubation &	<u>TE</u>	ID Transmission Si	tart Transmis	sion End 🔻 Loca	ation Name 🔻 Setti	ing Type 🔻 Outbr	eak ID 🔻 Invalid	
<ul> <li>Treatment &amp; Interventions</li> </ul>	Acquisition E	vent Summary				<b>☆</b> Hide A	cquisition Event Sum	mary
<ul> <li>Medications</li> <li>Exposure Summary</li> </ul>	0 Acquisition Eve Row Actions:	ents Found. Search and Link TE	Сору		]	Quick Entry Cre	ate Acquisition Ever	nt
View Client Imms profile  Subject		TE Source D Name	Acquisition / Start	Acquisition Loc End Na	cation Setting me Type	Exposed L	ikely <b>T</b> Invali Source	<u>d</u>

Exposure Summary screen displays.

 Scroll through the Transmission Event Summary section and Acquisition Event Summary section of the screen to view TEs and AEs. If the Client is in Context, all TEs and AEs for the client are displayed. If an Investigation is In Context, all TEs and AEs for the investigation in Context are displayed.

**Note**: Transmission Event Summary section is not available if the investigation In Context has a disease classification of **Case - Not a Case**.

3. To view the list of Contacts (AEs) for the TW, click the plus sign '+' hyperlink beside the Transmission Event the **Exposure Summary** screen.



# **3 QUICK ENTRY – TRANSMISSION EVENT**

The Quick Entry – Transmission Event screen **will not be used** in Nova Scotia as it does not capture business mandatory information.



## **4 CREATE TRANSMISSION EVENT**

1. After setting a Client and Investigation in Context in the Investigations Module, navigate to the **Left-Hand Navigation** menu, select **Exposure Summary**.

	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN	
Recent Work  Search	Exposure	Summary					0	
Search Investigations Search Lab							ACT	IVE
Search Exposures Search Interventions	Client ID:	Name(Last, First Middle	e)/Gender:	Health Card No:	Date	of Birth / Age:		
Search Clients Search Non-Human Subjects	Phone Number: -(-)	Jurisdiction Info: Department of Health an	d Wellness.Nova	- Additional ID Ty Additional ID: Provincial health	pe / service	Aug 01741 years		
<ul> <li>Investigation</li> </ul>	()	Scotia Health Authority		provider identifier	1-			
Subject Summary Investigation Summary Investigation Details Lab Encounter Details Signs & Symptoms Complications Outcomes Basic Assessment Medical History ADT Record Incubation & Communicability	Investigation D: 180 Disease: Measles Transmission f Row Actions: TE	Status: OPEN PHAC Date/Typ 2018 Aug 09 / Dr Reported Event Summary Events Found. 0 Contacts Copy ID Transmission St	Disp Inve prog ate - Found.	stigation in ress logic Agent: sion End	Investigator: - Authority/Classifica National / Case - Perr 09	tion: son Under Investigation Hide Tran Quick Entry Creat ing Type Outbr	A Investigation n / 2018 Aug nsmission Event Sum e Transmission Even eak ID Invalid	mary
<ul> <li>Treatment &amp; Interventions</li> <li>Medications</li> </ul>	Acquisition E	vent Summary				<b>☆</b> Hide A	cquisition Event Sum	mary
Exposure Summary View Client Imms profile Subject	0 Acquisition Eve Row Actions:	ents Found. Search and Link TE TE Source Name	Copy Acquisition ^ /	Acquisition Lo End Na	cation Setting me Type	Quick Entry Cre	ate Acquisition Even ikely Invali Source	nt

Exposure Summary screen displays.

2. Under the Transmission Event Summary section, click Create Transmission Event.



#### Maintain Transmission Event Details

ACTIVE Name(Last, First Middle)/Gender: Health Card No: Date of Birth / Age: Client ID: 211 Test1, Lauren / Female 1977 Aug 01 / 41 years Additional ID Type / Phone Jurisdiction Info: Number: Additional ID: Provincial health service Department of Health and Wellness,Nova -(-) Scotia Health Authority provider identifier / Investigation Investigation Status: Disposition: Investigator: ID: 180 OPEN Investigation in progress PHAC Date/Type: 2018 Aug 09 / Date Reported Authority/Classification: National / Case - Person Under Investigation / 2018 Aug Disease: Etiologic Agent: Measles 09 Save Clear Cancel \*Required field **Transmission Event Details** A Hide Transmission Event Details \* Exposure Name: Transmission Event ID:

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#### Maintain Transmission Event Details page displays.

3. In the **Transmission Event Details** section, enter **Exposure Name** and select a **Responsible Organization** 

Note: Responsible Organization refers to the PHO managing the case.

* Exposure Name:	Measles	Exposure	721	Transmi	ssion Event ID:	-
nvalid:				Invalid F	leason:	
Responsible Organizational	To specify an Organ wish to specify, selec	ization first click on the ' ct it and click on 'Select' i	Find' button. Then search button. Then click 'Close'	, or type the name o to close.	f the Organization you	<i>.</i>
Unit:	Organization: Pa Wellness > Nova	anorama Cloud > Prov Scotia Health Authorit	ince of Nova Scotia > D y > Central Zone > [Ha	epartment of Heal	th and Find C	2
					Close X	
	Type Se	arch			Close X	
	Туре Se	arch Start typing the name appear below. Select the match with	e of the Organization. Ma 1 the keyboard or mouse.	tches will begin to	Close X	•
	Type Sea	Start typing the name appear below. Select the match with Halifax Public Hee	s of the Organization. Ma I the keyboard or mouse. alth Office, -	tches will begin to	Close X	•
	Type Sea Organization Name:	arch Start typing the name appear below. Select the match with Halifax Public Hee City, Province:	s of the Organization. Ma h the keyboard or mouse. alth Office, - Hierarchy Type: Jurisdictional	tches will begin to <b>Status:</b> Active	Close X	•

- 4. The **Source** section is prepopulated with a source ID, investigation ID and source name. Add in a Source Description if needed.
- 5. In the Source Details section, select Mode of Transmission.



**Note**: Mode of Acquisition value "Through the provision of healthcare" refers to hospitalized acquired infections.

6. As an optional field, select one or more **Nature of Transmission** values (filtered by potential mode of acquisition) and click **Add** to move to **Selected** box.

Source	✓ Contains Data	Show Source
Source Details		☆ Hide Source Details
Mode of Transmission: Waterborne	<b>\</b>	
Nature of Transmission:	Selected:	
Exposure to contaminated water	Add > Consumption of conta	minated water
	Add All >>	
	< Remove	
	<< Remove All	

7. Enter information into Unknown/Anonymous Contacts sections, if known.

Note: Transmission Event Investigator Information section will not be used.

Transmission Eve	nt Investigator	Information				Transmission Event Investigator Information								
*Required field (for Ad	ld/Update only)													
* Workgroup: 🧲	<b>* User:</b> 🜲													
* Assigned Date:	2018 / 09 yyyy mm	/ 06	Assigned Time:	10 : 54 hh mr	1 :ADT n									
End Date:	yyyy mm	dd												
Investigator Type:	Primary \$													
							Add	Clear						
Row Actions: Delet	te Update													
Investigator	Workg	roup T	Investigator Ty	' <u>pe</u>	▼ Assigne	ed Date/Time	End Date	•						
Acquisition Event	S						Show Acquisitior	Events						
Unknown/Anonym	nous Contacts					\$	Hide Unknown/Anonymous (	Contacts						
* Required field (for Ad * Name / Description	ld/Update only) :													
Contact Info:														
Contact Details:														
* Disposition:				\$										
Disposition Details:														
							1,							
							(2000 characters rema	ining )						

- 8. From the Transmission Event Date/Time section, select an **Exposure Start Date** (and, optionally, an **End Date**).
- 9. Expand the Exposure Location section, enter an Exposure Location Name.



- 10. Select an Exposure Setting Type.
- 11. Select an Exposure Setting (filtered by Exposure Setting Type).
- 12. Enter **Country** and **Address** (if known).

Transmission Event I	Date/Time				☆ Hide Transmission Event Date/Time	
Disease Earliest Pos Communica	<u>ssible</u> ability From	Earliest Pro	<u>obable</u> ability From	Latest Probable Communicability To	Latest Possible Communicability To	
Measles -		-		-	-	
* Transmission Start:	2018 / 08 уууу mm	/ 01	hh mm	ADT Estimated		
Transmission End:	2018 / 08 yyyy mm	/ 01	hh mm	:ADT Estimated		
Exposure Duration:	0 Days					
Exposure Location					A Hide Exposure Location	
Exposure Location Nam	e: PSN Hospital					
Exposure Setting Type:	Health care	setting	<b>\$</b>			
Exposure Setting:	Hospital			\$		
Country:	Canada			\$		
Address:		123	PNS Street			
	Unit No.	Street No.	Street Name	Street Type	Street Direction	
	P.O. Box	STN	RPO	Rural Route		
Province/Territory:	Nova Scotia	City	Halifax			
Postal Code:	N1N 1N1					
Geo-coding Information						
Geo-code Status:						
Latitude:		Longitude	:			

- 13. If known, enter information in the **Transmission Event Location Liaison Details** section providing details about an individual or organization relevant to the TE.
- Note: only one Liaison can be added to a Transmission Event.

Note: the Transmission Event Control Measures section will not be used.



Transmission	Event Lo	cation Lia	aison Detai	ls		\$	Hide Transmissior	event Location Liaison Details
First Name:			Las	st Name:				
Phone Number: ( ) - ext		ext	☐ International					
Fax Number:	( )	-	ext	🗆 Inte	rnational			
Email:								
							A LUda Torra	
Transmission	Event Co	ontrol Mea	isures				Alide Transn	hission Event Control Measures
*Required field (f	or Add/Upd	ate only)						
* Intervention Ty	ype:	Exclusio	n	\$	Intervention Sub-Type	Attend	I/Work/Volunteer -	school 🗘
Intervention Dis	position:	Complet	ed 🛟					
* Start Date:		2018	/9 /3 mm dd		End Date:		/ / /	Ħ
Implemented By	:	,,,,,				,,,,,		
								Add Clear
Row Actions:	Delete U	pdate						
Interventi	on Type		ention Sub-Ty	p <u>e</u> 🔻	Intervention Disposition	▼ Start Date	End Date	Implemented By
								Save Clear Cancel

14. Click Save.

#### Maintain Transmission Event Details

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						ACTIVE
Client	Name(Last, First Middle)/Gender: He Test1, Lauren / Female -		Health Card No: -		Date of Birth / Age:	
<u>211</u>					1977 Aug 01 / 41 years	
Phone Number:	Jurisdiction Info:	llagan Nava	Additional ID Type / Additional ID:			
-(-)	Department of Health and Wellness,Nova Scotia Health Authority		provider identifier / -			
					Â.	nvestigation
Investigation	Status:	Dispo	sition:	Investigat	or:	
<u>180</u>	OPEN	Investi progre	gation in ss	-		
Disease: Measles	PHAC Date/Type: Etiol 2018 Aug 09 / Date - Reported		ogic Agent: Authori National 09		ority/Classification: onal / Case - Person Under Investigation / 2018 Aug	
ansmission eve	nt successfully saved.					

Screen refreshes and confirmation message 'Transmission event successfully saved' displays.



# 5 BASIC CONTACT TRACING PROCESS FLOW #1 -CLIENT & INVESTIGATION NOTIFICATION ALREADY CREATED



## 5.1 Add Known Contacts - Search for Existing Client

Upon saving a TE, the Known Contact Search section becomes available. Users can now add Client(s), Investigation(s), and/or a Cohorts. When a User adds a Client or a Cohort, an investigation will be created for each.

1. After setting a Client and Investigation in Context in the Investigations Module, navigate to the **Left-Hand Navigation** menu, select **Exposure Summary**.

	WORK MGMN1	INVESTIGATIONS	OUTBREAKS	IMMUNIZATIO	N FAMILY HEAL	TH INVENTO	ADMIN	
Recent Work  Search	Exposur	e Summary	,	,	,	,	0	) 凰
Search Investigations	-	-						
Search Lab							AC	TIVE
Search Exposures	Ollant	Name (Last First Midd	la V <b>C</b> and any	Uselth Card N		Data of Disth / Ass		
Search Interventions	ID:	Name(Last, First Midd	ime(Last, First Middle)/Gender:		10:	Date of Birth / Age	:	
Search Clients	211	Test1, Lauren / Female	1, Lauren / Female			1977 Aug 01 / 41 ye	ears	
Search Non-Human	Phone Number:	Jurisdiction Info:		Additional ID Additional ID:	Type /			
Subjects	-(-)	Department of Health an	nd Wellness,Nova	Provincial heal	Ith service			
- Investigation		Scotia Health Authority		provider identif	tier / -			
Subject Summary							Investigation	
Investigation Summary	Investigatio	n Status:	Disp	osition:	Investigator:			
Investigation Details	180	OPEN	OPEN Investiga		gation in -			
▶ Lab	Disease	PHAC Date/Tvr	PHAC Date/Type: Etiologi		Authority/Class			
Encounter Details	Measles	2018 Aug 09 / E	Date -	National / Case - Person L		- Person Under Inve	stigation / 2018 Aug	
Signs & Symptoms		Reported			09			
Complications	Transmissio	n Event Summary				<b>☆</b> H	ide Transmission Event Sur	mmary
Outcomes	2 Transmission	Events Found, 0 Contacts	s Found.					
Basic Assessment	Row Actions:	Сору				Quick Entry	Create Transmission Eve	ent
Medical History	Т	E ID Transmission S	start 🔺 Transmiss	ion End 🔽 Loc	cation Name 🔍 S	etting Type	Outbreak ID 🔽 Invali	d
ADT Record								
Incubation & Communicability	○ ⊕ 15	2018 Aug 1	2018 Aug 1	PSI	N Hospital H	ealth care setting		
▶ Treatment & Interventions	○ ⊕ 14	4 2018 Aug 1	2018 Aug 1	Hos	spital H	ealth care setting		
▶ Medications								
Exposure Summary								
View Client Imms profile								

Exposure Summary screen displays.

2. Click on the TE ID hyperlink.



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#### Maintain Transmission Event Details

						ACTIVE
Client	Name(Last, First Middle)/Gender:		Health Card No:	Date of Bir	th / Age:	
<u>211</u>	Test1, Lauren / Female		-	1977 Aug 0	1 / 41 years	
Phone Number: -(-)	Jurisdiction Info: Department of Health and Wellness, Scotia Health Authority	Nova	Additional ID Type Additional ID: Provincial health se provider identifier /	rvice		
					☆ Investig	ation
Investigation	n Status:	Dispos	ition:	Investigator:		
180	OPEN	Investig	gation in	-		
Disease: Measles	PHAC Date/Type: 2018 Aug 09 / Date Reported	Etiolog -	ic Agent:	Authority/Classification: National / Case - Person Un 09	der Investigation / 2018 Aug	
* Doguirod field					Save Reset	Cancel
Transmissio	n Event Details	~	Contains Data		Show Transmission E	event Details
Source		√ (	Contains Data		<b>∀</b> S	how Source
Source Deta	ils	~	Contains Data		<b>\$</b> Show So	ource Details
Transmissio	n Event Investigator Informatio	on		<b>Show</b> Tra	ansmission Event Investigator	r Information
Known Cont	act Search				✿ Hide Known Cor	ntact Search
Cohort Res	sult Set: -					
O Client:	- n Subjectu					
	n Subject					
Univestigati	vii					
					Searc	h Add

Maintain Transmission Event Details page displays.

- 3. Scroll to the **Known Contact Search** section, and click **Show Known Contact Search** to expand the section.
- 4. Select the radio button next to **Client**, and click **Search**.

Investigations	Search Clients	Search Search Jurisdictional Reg	gistry Retrieve	Reset Cancel
=	Basic Search Criteria			
🛠 Recent Work	Client Number: Client Number	er Type:		Select all that apply:
Q Search ~	Gender:			Include Indeterminate Clients
Search Investigations				Use Phonetic Matches
Search Lab	Last Name: First Name	e: Middle Name:	Mother's Name:	
Search Exposures				
Search Interventions	Choose one:			
Search Clients	Date of Birth or Age Range Not Applicable			
Search Non-Human Subjects	Date of Birth:			
Investigation ~	Data of Disth Dances	fective From: To:		
Subject Summary	Date of birth Range:			
Investigation Summary	Age:	.g. 2 or 0-18 or 18 Year(s)		
Investigation Details ~	Telephone Number:			
Lab ~	Country: Number:			
Encounter Details	· · · · · · · · · · · · · · · · · · ·	x		
Signs & Symptoms	Health Region Organization:			
Complications	e.g. Organization Display Name	Q Exact Match		



Search Clients screen displays.

5. Enter **Client** information.

Search Clients	Search	Se	earch Jurisdictional Registry	Retrieve		Reset	ancel	) : [	?
Basic Search Criteria									\$
Client Number: Client Number Tyj	•					Select all that ap	ply: ctive Clier eterminate tic Matche	nts e Clients es	;
Last Name: test2 Choose one: Date of Birth or Age Range Not Applicable			Middle Name:	Mother's Na	me:		]		
Date of Birth:									

6. Click Search.

	Search Results												
	Search Results												
Client Quick Entry Create Cli									reate Client				
Preview Select and Return Subject Summary													
	Client ID   Health Card Number   Last Name First Name Gender   Gender   Date of Birth					Date of Birth	Health Region ≎	Active \$					
		0	212			Test2	Lauren	Female	1978 Feb 01	NSHA	Active		
Total: 1 3 5									50 \$				

Search Results Set displays with Client.

7. Click the radio button beside the applicable Client and click Select and Return button.



Screen refreshes and searched for Client is displayed on the **Maintain Transmission Event Details** screen within the **Known Contact Search** section.

8. Click Add button.



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#### Create Investigation

				ACTIVE
Client	Name(Last, First Middle)/Gender:	Health Card No:	Date of Birth / Age:	
1D: 212	Test2, Lauren / Female	-	1978 Feb 01 / 40 years	
Phone Number:	Jurisdiction Info:	Additional ID Type / Additional ID:		
-(-)	Department of Health and Wellness,Nova Scotia Health Authority	Provincial health service provider identifier / -		

Additional details (e.g., disease, diagnosis, attached documents) may be entered after the investigation has been created. \*Required field

Disease Summ	nary	_	\$	Hide
Disease Event -	Measles			
Disease	Etiologic Agent	Epi Markers	Authority / Classification   Classif. Date (	
Measles	-	-	National Contact - Person Under - Investigation	

Screen refreshes to display the **Create Investigation** screen for the new Client. The TE disease information has been auto-populated to the **Disease Summary** table.

- 9. Complete the **Investigation information** as referenced in the Create Investigation user guide (IOM 101).
- 10. Click Submit button.
- 11. Review the information to ensure accuracy and Submit again.



#### Maintain Transmission Event Details

						ACTIVE		
Client	Name(Last, First Middle)/G	ender:	Health Card	i No:	Date of Birth / Age:			
ID: 211	Test1, Lauren / Female		-		1977 Aug 01 / 41 ye	ars		
Phone Jurisdiction Info: Number: -(-) Department of Health and Wellness,No		/ellness,Nova	Additional I Additional I Provincial h	ID Type / ID: ealth service				
	Scotia Health Authority		provider idei	ntifier / -				
Investigation	Statuci	Diana	-Hon	Investiga	4	☆ Investigation		
ID:	Status:	Dispu	sition:	investiga	tor:			
<u>180</u>	OPEN	Invest	tigation in ess	-				
Disease: Measles	PHAC Date/Type: 2018 Aug 09 / Date Reported	Etiolo	ogic Agent:	Authority National / 09	/Classification: Case - Person Under Inves	stigation / 2018 Aug		
1 investigation(s) 1 acquisition ever	created. it(s) have been added to the f	ransmission event.						
						Save Reset Cancel		
*Required field								
Transmission	Event Details	~	Contains Data	1	\$8	Show Transmission Event Details		
Source		$\checkmark$	Contains Data	ns Data				
Source Detail	ls	~	Contains Data	1		Show Source Details		
Transmission	Event Investigator Info	ormation			Show Transmissio	on Event Investigator Information		
Known Conta	ict Search					Show Known Contact Search		
Acquisition E	vents					Hide Acquisition Events		
Row Actions:	Unlink							
Acquisi Event II	tion Investigation	Subject A Name S	cquisition	Acquisition End	Classification	▼ <u>Disposition</u> ▼ Invalid		
26	216	Test2, 20 Lauren	18 Aug 1	-	Measles   Contact - Perso Under Investigation	n Pending -		

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Page refreshes and the **Maintain Transmission Event** screen displays with confirmation messages confirming that an investigation was created and an acquisition event has been added. **Client** has also been added to the **Acquisition Event Table**.

### 5.2 Add Known Contacts- Search for Investigations

1. After setting a Client and Investigation in Context, navigate to the Left-Hand Navigation menu, select Exposure Summary.



	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN	
Recent Work Search	Exposure	Summary		,		,	0	Ē
Search Investigations								
Search Lab							ACT	IVE
Search Exposures	Client	Name(Last, First Midd)	e)/Gender:	Health Card No	: Dat	e of Birth / Age:		
Search Interventions	ID:	Tosti I auron / Fomalo	,		- 1977 Aug 01			
Search Clients	211 Dhana	lusisdiction Infe			197	Aug 01/41 years		
Search Non-Human	Number:	Dependence of Line https://		Additional ID:	ype /			
	-(-)	Scotia Health Authority	Wellness,Nova Provincial health service provider identifier / -					
Subject Summary							Investigation	
Investigation Summary	Investigation Summary		Disp	osition:	Investigator:			
Investigation Details	180	OPEN	Inve	stigation in				
▶ Lab	Diseases	PHAC Date/Tur	prog	ress	Authority/Classifie	ation		
Encounter Details	Measles	2018 Aug 09 / D	ate -	ogic Agent.	National / Case - Pe	rson Under Investigation	n / 2018 Aug	
Signs & Symptoms		Керогтеа			09			
Complications	Transmissior	event Summary				<b>☆</b> Hide Tra	nsmission Event Sum	mary
Outcomes	2 Transmission	Events Found. 0 Contacts	Found.					
Basic Assessment	Row Actions:	Сору				Quick Entry Creat	e Transmission Eve	nt
Medical History	TE	ID 🔽 Transmission S	tart 🔶 Transmiss	ion End 🛛 🔽 Loca	tion Name 🛛 💙 Settir	ng Type 🔍 Outb	reak ID 🔻 Invalid	
ADT Record								
Incubation & Communicability	○ ⊕ <u>15</u>	2018 Aug 1	2018 Aug 1	PSN	Hospital Health	n care setting -	-	
Treatment & Interventions	○ ⊕ <u>14</u>	2018 Aug 1	2018 Aug 1	Hosp	ital Health	n care setting -	-	
▶ Medications								
Exposure Summary								
View Client Imms profile						*121. *		

Exposure Summary screen displays.

2. Click on TE ID hyperlink.



#### Maintain Transmission Event Details

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						ACTIVE
Client	Name(Last, First Middle	e)/Gender:	Health Card No	: Date of I	3irth / Age:	
<u>211</u>	Test1, Lauren / Female		-	1977 Aug	3 01 / 41 years	
Phone Number: -(-)	Jurisdiction Info: Department of Health an Scotia Health Authority	d Wellness,Nova	Additional ID Ty Additional ID: Provincial health provider identifie	<b>/pe /</b> I service Ir / -		
					<u> ≳ Inves</u>	tigation
Investigation	Status:	Dispo	sition:	Investigator:		
<u>180</u>	OPEN	Invest	igation in	-		
Disease: Measles	PHAC Date/Typ 2018 Aug 09 / Da Reported	e: Etiolo ate -	gic Agent:	Authority/Classification National / Case - Person 09	: Under Investigation / 2018 Aug	g
*Required field					Save Reset	Cancel
Transmission	n Event Details	√	Contains Data	_	Show Transmission	Event Details
Source		√	Contains Data		×	Show Source
Source Detai	ls	√	Contains Data		Show S	Source Details
Transmission	n Event Investigator I	nformation		🕇 Show	Transmission Event Investigat	tor Information
Known Conta	act Search				≿ Hide Known C	ontact Search
Cohort Res	sult Set: -					
Client:	-					
Non-Humai	n Subject: - on: -					
					Sear	rch Add

#### Maintain Transmission Event Details page displays.

- 3. Scroll to the **Known Contact Search** section, and click **Show Known Contact Search** hyperlink to expand the section.
- 4. Select the radio button next to **Investigation**, and click **Search**.



#### Search Investigations - Basic

Search Investig	gations - Basic	? <b>E</b>								
Search Criteria		Alide Search Criteria								
Wildcard characters % (multiple letters) and _ (singleletters) can be used when searching by First or Last Name -except when matching phonetically. Wildcard-only searches not allowed.										
Disease / Basic Criteria Alide Disease / Basic Criteria										
	Include: 💿 Human	Non-Human Both								
Search by:										
Investigation ID:	216									
Investigation Group:										
Outbreak Group:	Search Outbreak									
Disease Event ID:										
Report Date (Received) Range:	From: / / To: / / / III III									
	yyyy mm aa yyyy mm aa									
Encounter Group:										
Disease:										

#### Search Investigations-Basic screen displays.

5. Enter known Investigation information.

				include:			
arch by:							
Investigation ID:	216						
Investigation Group:							
Outbreak Group:	Search Ou	ıtbreak					
Disease Event ID:							
Report Date (Received) Range:	From: / / / / / / / / / / / / / / / / / / /	m dd	To: / / / / /	/ dd			
Encounter Group:			0				
Disease:							
Authority:							
Classification:							
Microorganism:					٢		
Site(s): CTRL + click to select multiples							
Staging:							
• PHAC Notification S	tatus:	<b>OProvi</b>	ncial Notification Status:			0	
Co-managed Disease	÷						
Outstanding Recom	mendations						
Exclude Outbreak ID:							
			Search	Retrieve	Clear	Cancel Advance	ed Searc



#### 6. Click Search.

Investigation	Search Results		-		-		New Sea	arch
1 results found.		Inactive investigation	n(s) are not sh	lown	Click	Investigation ID to vie	w Investigation Sun	nmary.
Row Actions:	Select All Dese	elect All Preview	Update	Select and Return		Generate Map	Update Selec	ted
Investiga	tion ID 🔻	Last Name, First A Name	Date of Birth	Disease / Disease E Classification	vent ID / P	rimary Authority /	Reporting Date Received	-
✓ 216		Test2, Lauren	1978 Feb 1	Measles 220 / Natior Investigation	nal / Contac	t - Person Under	2018 Aug 15	
Total: 1	Page 1 o	f 1 🕨 🗎				Jum	p to page:	2

- 7. Search Results Set is displayed.
- 8. Click the **radio button** beside the appropriate Investigation then click **Select and Return**.

Known Contact Search	☆ Hide Known Contact Search
Cohort Result Set: -	
Client: -	
Non-Human Subject: -	
Investigation: 216	
	Search

Page refreshes and the Investigation is displayed on the **Maintain Transmission Event Details** screen within the **Known Contact Search** section.

9. Click Add button.



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#### Maintain Transmission Event Details

						ACTIVE
Client	Name(Last, First Mide	dle)/Gender:	Health Car	d No:	Date of Birth / Age:	
ID: 211	Test1, Lauren / Female	9	-		1977 Aug 01 / 41 yea	ars
Phone Number: -(-)	Jurisdiction Info: Department of Health a	and Wellness,Nova	Additional Additional Provincial h provider ide	ID Type / ID: ealth service		
	Coold Hould Field		provider lac			
Investigatio	n Status:	Di	sposition:	Investiga	ator:	Investigation
180	OPEN	ln <sup>.</sup> pr	vestigation in ogress	-		
Disease: Measles	PHAC Date/Ty 2018 Aug 09 / Reported	vpe: Et Date -	iologic Agent:	Authority National 09	y/Classification: / Case - Person Under Inves	tigation / 2018 Aug
1 acquisition eve	ent(s) have been added to	o the transmission ev	ent.			
						Save Reset Cancel
*Required field			( Orataina Dat			
Iransmissio	n Event Details			a	\$ S	now Transmission Event Details
Source			Contains Data	a		Show Source
Source Deta	ils		Contains Data	a		Show Source Details
Transmissio	n Event Investigato	r Information			Show Transmissio	on Event Investigator Information
Known Cont	act Search					Show Known Contact Search
Acquisition	Events					Alide Acquisition Events
Row Actions:	Unlink					
Acquis Event	sition Investigation	on Subject	Acquisition Start	Acquisition End	Classification	▼ <u>Disposition</u> ▼ Invalid
26	<u>216</u>	Test2, Lauren	2018 Aug 1	-	Measles   Contact - Perso Under Investigation	n Pending -

Page refreshes and confirmation message '1 acquisition event(s) have been added to the transmission event' displays. The **Investigation** is added to the **Acquisition Event Table**.

## 5.3 Add Known Contacts - Search for Previously Created Cohort

1. Select the radio button next to **Cohort Result Set** and click **Search**.

Known Contact Search	Alide Known Contact Search
Cohort Result Set: -	
○ Non-Human Subject: -	
Investigation: -	
	Search Add

2. Search Cohorts screen displays.



Search Cohort			Cancel Search	Retrieve	Reset   🔒 ?
Basic Search Criteria					× 👔
Cohort ID:	Cohort Name:	Status:	Created By User ID:		
Available Encounter Groups:	Selected Encounter Grou	ups:			
Communicable Disease Investigation, excluding TB and ST		~			
Family Health					
Foodborne Illness/Poisoning Investigation	÷I				
Immunization					
Screenings					
Sexually Transmitted Infections Investigation, to include HIV/AIDS					
Tuberculosis Disease Investigation					
Youth Services					
Jurisdictional Organization:		Cohort So	ource:		
Sample Jurisdictional Organization	, British Colun	xact Match	*		
Search Results					*

3. Search for the **Cohort** by entering relevant search criteria. The fastest way is to remember the **Cohort ID** number.

Search Cohort			Cancel	Search	Retrieve	Reset   🔒 ?
Basic Search Criteria						≪ (₹
Cohort ID:	Cohort Name: S	itatus:	Created By User I	ID:		
Available Encounter Groups:	Selected Encounter Groups:					
Communicable Disease Investigation, excluding TB and STI Family Health Immunization Screenings Sexually Transmitted Infections Investigation, to include HIV/AIDS	Foodborne Illness/Poisoning Investigation					
Tuberculosis Disease Investigation Youth Services						
Jurisdictional Organization: Sample Jurisdictional Organization,	British Colun	Cohort Source: Match	٣			

- 4. Click the button beside the relevant Cohort. The Row Action is activated.
- 5. Click Update.



Sear	ch Res	ults								*
										Create Cohort
Vie	w	Update Dele	ete							
	V	Cohort ID 🗘	Cohort Name	Created On	Created By	Cohort Type	Status 🗘	Effective From \$	Effective To	Client Lists
۲	0	32	Food Cohort	2017 May 03	Aamir, Elrasheed	Ad-hoc	Active	2017 May 03		1
Total	: 1					1				50 -

- 6. The **Update Cohort** screen displays. Click button beside relevant **Client List**. Row Action is activated.
- 7. Click Select and Return.

about ID:						Cancel	Save R	set   log	Ð
2	0	Cohort Name Food Cohort	Enc	ounter Group(s) dborne Illness/I	): Poisoning Investigation	1	Client L	ist Name/ ID:	
Cohort D	otalls								Ŕ
Cohort Na	mei				Cohort Type:				
tatua.	Greated	Bre			Pile Hora	Cohort Source:			
Active	- Aamir,	Elrasheed				Manual			
Effective F 2017/05/00	romi Toj 3 🛄 yyyy/mm/d	d 🔲							
Available P	Encounter Groups:	54	ected Encounter	Groups:					
		д.		p					
Sommunic nvestigation	able Disease	STI Inve	dborne Illness/Poi istigation	isoning					
amily Her	aith								
munizati	ion	-+1							
creenings									
vestigation	nansmitted Infections on, to include HIV/AID	s							
uberculos	is Disease Investigation	on							
GGUT BOTV	1005								
escription					• Jurisdictional	Organization:			
					Sample Jurisdi	ctional Organization, British	Colun 🚯	Q	
00 charact	lers remaining.)								
00 charact	Query Details							× .	8
Ad Hoc	Query Details	Query Name:		Created On:		Parameter Values		~	A
Ad Hoc Query ID: 7050	Query Details	Query Name:		Created Oni 2016 Aug 24		Parameter Values:		~	A
Ad Hoc Query ID: 7060 Query Der Test	ers remaining.) Query Details scription:	Query Name:		Created On 2016 Aug 24		Parameter Values:		~	A
Ad Hoc Ad Hoc Query ID: 7060 Query Der Test	ers remaining.) Query Details scription:	Query Name:		Created On: 2016 Aug 24		Parameter Values:		•	A
Ad Hoc Query ID: 7060 Query Der Test Client L	ers remaining.) Query Details scription: lists	Query Name:		Created On: 2016 Aug 24		Parameter Values:			A A
Ad Hoc Ad Hoc Query ID: 7080 Query Der Test Client L	ers remaining.) Query Details scription: Ists	Query Name:		Created On: 2016 Aug 24		Parameter Values:		- Add List From	R R Query
00 charact Ad Hoc Query ID: 7060 Query Der Test Client L	ers remaining.) Query Details scription: lists to Client List Vie	Query Name:	Select and Re	Created On: 2016 Aug 24		Parameter Values:		Add List From	R R Query
00 charact Ad Hoc Query ID: 7000 Query Der Test Client L Updat	ere remaining.) Query Details scription: ists to Client List   Vie Client List ID ~	Query Name:	Select and Rei	Created On: 2016 Aug 24	perofClients ≎	Parameter Values:	Gree	Add List From	R R Query
Ad Hoc Auery ID: 7000 Query ID: 7000 Client L Updat	ere remaining.) Query Details scription: lats to Client List    Vie Client List ID = 30	Query Name:	Select and Re List Name 0	Created On: 2016 Aug 24	per of Clients 0	Parameter Values: Created On © 2017.Jun 11	Crea PER	Add List From I sted By © MISSIONS, ALL	R R Query

- 8. The Cohort Name displays in the Known Contact Search section.
- 9. Click **Add** button.



Known Contact Search	n	Ride Known Contact Search
O Cohort Result Set:	30 - 319	
Client:	•	
O Non-Human Subject:		
O Investigation:		
		Search Add

10. **Create Investigation** screen displays with the **TE Disease information** autopopulated.

Create Inve A Client or Subjec Client Search Non Human Subjec Investigation Sear Cohort Search Outbreak Search	estigation t is currently not selected. Please con act <u>Search</u> ch	duct the appropriate search		0 🖪
			Submit	Clear Cancel
Additional details (e.g	g., disease, diagnosis, attached docun	nents) may be entered after	the investigation has been created.	
Disease Summa	iry			☆ Hide
Disease Event - M	leasles			
Disease	Etiologic Agent	Epi Markers	Authority / Classification   Classif. Date ( Primary Classification)</td <td></td>	
Measles		-	Dubai Health Authority (P) Contact -     Person Under Investigation	•
Investigation Inf	formation			\$ Show
Responsible Or	ganization / Investigator			\$ Show
Reporting Notifi	cation			\$ Show
			Submit	Clear Cancel

- 11. Complete the **Create Investigation** screen as referenced in the Create Investigation training course (IOM 101).
- 12. Once completed, click Submit at the bottom of the screen
- 13. Review for accuracy and click **Submit** again.
- 14. The Maintain Transmission Event Details displays.

**NOTE**: For every Client in the Cohort, an Investigation has been created, and an AE has been added to the TE. i.e. If the Cohort Result Set had 25 Clients, 25 Investigations would have been created and 25 Acquisition Events are added.

15. Scroll down to the **Acquisition Events** section and note that all Clients (only one in the Cohort for testing) are listed.



Ac	Acquisition Events Acquisition Events											
R	Row Actions: Unlink											
		Acquisition Event ID	Investigation T	Subject Name	Acquisition Start	Acquisition End	Classification *	Disposition <b>*</b>	Invalid			
	0	120	<u>579</u>	Amala, Hana	2017 Jun 8	-	Measles   Contact - Person Under Investigation	Notification - Issued	-			
(	0	102	<u>522</u>	Cane, Candy	2017 Jun 8	-	Measles   Case - Suspect, Varicella (Chicken Pox)   Case - Person Under Investigation	Notification - Issued	-			
(	С	121	<u>580</u>	Client, Test	2017 Jun 8	-	Measles   Contact - Person Under Investigation	Notification - Issued				
(	С	101	<u>543</u>	Kumar, Amala	2017 Jun 8	-	Measles   Contact - Person Under Investigation	Investigation In-Progress	-			
То	tal	All Contacts: 6				-		-				

16. Click **Save**. Screen refreshes, and 'Transmission Event successfully updated' message displays.



- Whether a Client or a cohort have been added, if the User clicks Cancel after Save, Exposure Summary screen displays with the TE added to the TE Summary table.
- Click the plus symbol (+) next to the TE to expand a sub-table displaying the known contact Client(s).
- Clicking the ID hyperlink of a contact Client will navigate the user to the Maintain Acquisition Event Details screen with the contact Client in Context.

### 5.4 Add Unknown/Anonymous Contacts

In the **Unknown/Anonymous Contacts** section, complete the fields to add those **Contacts** that are unknown or unlikely to be identified. i.e. may only have a first name and cell number.

1. After setting a Client and Investigation in Context in the Investigations Module, navigate to the **Left-Hand Navigation** menu, select **Exposure Summary**.



	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN
Recent Work	Exposure	e Summary		,	1		? 🗉
Search Investigations							
Search Lab							ACTIVE
Search Exposures	Client	Name(Last, First Middl	e)/Gender:	Health Card No	: Dat	e of Birth / Age:	
Search Interventions	ID: 211	Test1, Lauren / Female		_	197	7 Aug 01 / 41 years	
Search Clients	Phone	lurisdiction Info:				r rag or r ar youro	
Search Non-Human Subjects	Number: -(-)	Department of Health an	nd Wellness,Nova	Additional ID: Provincial health	n service		
<ul> <li>Investigation</li> </ul>		Scotia Health Authority		provider identifie	ər / -		
Subject Summary							Investigation
Investigation Summary	Investigation	Status:	Status: Disposi		Investigator:		
Investigation Details	180	OPEN	OPEN Investig				
▶ Lab	Disease:	PHAC Date/Typ	e: Etio	logic Agent:	Authority/Classific	ation:	
Encounter Details	Measles	2018 Aug 09 / D	ate -	logio rigonti	National / Case - Pe	rson Under Investiga	tion / 2018 Aug
Signs & Symptoms	1	Reported			09		
Complications	Transmission	n Event Summary				🗙 Hide T	ransmission Event Summary
Outcomes	2 Transmission	Events Found. 0 Contacts	Found.				
Basic Assessment	Row Actions:	Сору			[	Quick Entry Cre	eate Transmission Event
Medical History	TE	ID 🝸 Transmission S	tart 🔶 Transmiss	ion End 🔍 Loca	ition Name 🔍 Setti	ng Type 🛛 🔽 Ou	itbreak ID 🔻 Invalid
ADT Record							
Incubation & Communicability	○ ⊕ <u>15</u>	2018 Aug 1	2018 Aug 1	PSN	Hospital Healt	h care setting -	-
Treatment & Interventions		2018 Aug 1	2018 Aug	Hosp	ital Healt	h care setting -	-
Medications		-					
Exposure Summary							
View Client Imms profile							

Exposure Summary screen displays.

2. Click on the TE ID hyperlink.

#### Maintain Transmission Event Details

ID:       Test1, Lauren / Female       -       1977 Aug 01 / 41 years         Phone       Jurisdiction Info:       Additional ID Type / Additional ID:         -(-)       Department of Health and Wellness,Nova Scotia Health Authority       Provincial health service provider identifier / -         Investigation ID:       Status:       Disposition:       Investigator:         0PEN       Investigation in       -	
Phone Number: (-)     Jurisdiction Info: Department of Health and Wellness,Nova Scotia Health Authority     Additional ID Type / Additional ID: Provincial health service provider identifier / -       Investigation ID: 180     Status: OPEN     Disposition: Investigation in 10:     Investigator:	
(-) Department of Health and Wellness,Nova Scotia Health Authority Provincial health service provider identifier / -	
Investigation ID: 180 OPEN Investigation in -	
Investigation Status: Disposition: Investigator: ID: 180 OPEN Investigation in -	stigation
180 OPEN Investigation in -	
progress	
Disease:         PHAC Date/Type:         Etiologic Agent:         Authority/Classification:           Measles         2018 Aug 09 / Date         -         National / Case - Person Under Investigation / 2018 Aug           Reported         09	Ig

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Maintain Transmission Event Details page displays.

3. Scroll to the **Unknown/Anonymous Contacts** section, and click **Show Unknown/Anonymous Contacts** hyperlink to expand the section.



Unknown/Anonymous Contacts		A Hide Unknown/Anonymous Contacts
*Required field (for Add/Update only)		
* Name / Description:	Brussel	
Contact Info:		
Contact Details:		
* Disposition:	Investigation in progress	
Disposition Details:		
		1
		(2000 characters remaining )
		Add Clear

- 4. Enter the relevant Unknown Contact Details.
- 5. Click Add.

Row	Row Actions: Delete Update								
	Name / Description	Contact Info	Contact Details	Disposition	Disposition Details				
0	Brussel	-	-	Investigation in progress	-				

The Contact(s) display in the Name / Description table.

6. When the **Contact(s)** is anonymous, record the number of anonymous Contacts in the **Anonymous Contacts** field, and enter comments in the **Anonymous Contact Details** as applicable.

Unknown/Anonymous Contacts				🗙 Hide l	Jnknown/Anonymous Contacts
* Required field (for Add/Update only)					
* Name / Description:	Anonymous female				
Contact Info:					
Contact Details:					
* Disposition:	Investigation in p	orogress			
Disposition Details:					
					1
L				(2	2000 characters remaining )
					Add Clear
Row Actions: Delete Update					
Name / Description	contact Info	Contact Details	Disposition	T	Disposition Details
• Brussel -		-	Investigation in pro	gress	-
Anonymous Contacts: 1					
Anonymous Contact Details:					
This contact remains anonymous.					



7. Continue to document and add all Unknown/Anonymous Contacts.

Row Actions: Delete Update										
	Name / Description	Contact Info	Contact Details	Disposition	Disposition Details					
0	Brussel	-	-	Investigation in progress	-					
$\bigcirc$	Anonymous female	-	-	Investigation in progress	-					
Anor	nymous Contacts:									
Anor	nymous Contact Details:									
This	contact remains anonymous.				1,					
Total	All Contacts: 3			(	1969 characters remaining )					

**Note**: The **Total All Contacts** field displays a total of all Contacts, including those added from Known Contact Search section, Unknown Contacts and the number entered in the Anonymous Contacts field.

8. Enter Transmission Start date.

Transmission Event	Date/Tim	0							Hide Transmission Event Date/Time
Disease Earliest Pos Communication Measles -	<u>sible</u> bility Fro	<u>m</u>	Earlie Comi	est Prob municab	<u>able</u> ility Fı	<u>rom</u>	•	Latest Probable Communicability To -	Latest Possible     Communicability To
* Transmission Start: Transmission End: Exposure Duration: 0	2018 VVVV yvyy yyyy	/ 08 mm / mm	/ 01 dd / dd		hh hh	: mm : mm	:AD :AD	T Estimated	
Exposure Location				./	Conta	ins Data			Show Exposure Location
Exposure Location				Ŷ	Conta				
Transmission Event L	ocation	Liaisor	n Details					Show Tra	nsmission Event Location Liaison Details
Transmission Event (	Control I	leasure	s					💙 Sho	w Transmission Event Control Measures
									Save Reset Cancel

9. Click Save.



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#### Maintain Transmission Event Details

					ACTIVE
Client	Name(Last, First Middle)/Gende	er: H	lealth Card No:	Date of Birth / Age:	
<u>211</u>	Test1, Lauren / Female	-		1977 Aug 01 / 41 years	
Phone Number:	Jurisdiction Info:	Å	Additional ID Type /		
(-)	Department of Health and Wellne Scotia Health Authority	ess,Nova F p	Provincial health service provider identifier / -		
				×	Investigation
Investigatio	on Status:	Dispositio	on: Invest	igator:	
<u>180</u>	OPEN	Investigati progress	on in -		
Disease: Measles	PHAC Date/Type: 2018 Aug 09 / Date Reported	Etiologic -	Agent: Authon Nationa 09	rity/Classification: al / Case - Person Under Investigation / 201	8 Aug
ansmission ev	vent successfully updated.				

Screen refreshes and confirmation message 'Transmission event successfully updated' displays.

### 5.5 Search and Update Unknown/Anonymous Contact Information

Contact information can be updated from within the Maintain Transmission Event Details screen or by using Search Exposures to get to the relevant Maintain Transmission Event Details screen.

1. From the Left-Hand Navigation menu, select Search Exposures.



Recent Work	Oserah Eurosa	·				
✓ Search	Search Exposures					(?) 🖪
Search Investigations	Exposure Search					☆ Hide Exposure Search
Search Lab						
Search Exposures	Wildcard characters % (multiple letter matching phonetically, Wildcard-only	rs) and _ (single letters) can b searches will be treated as bla	e used on any to ank searches.	ext field - except on 0	Client Number and on Firs	t and Last Name when
Search Interventions	Exposure ID:			Exposure	e Name:	
Search Clients	Include Invalid Events:					
Search Non-Human	Mode of Transmission:					
			ţ			
Subject Summary	Transmission Start From:			:	: ADT	
Investigation Summany		yyyy mm aa				
Investigation Details	Transmission Start To:		<b></b>	:	: ADT	
		yyyy mm dd		nn mm		
Encounter Details	Transmission End From:	/ /		:	: ADT	
Signs & Symptoms		yyyy mm dd		hh mm		
Complications	Transmission End To:	/ /	===	:	: ADT	
Outcomes		yyyy mm dd		hh mm		
Basic Assessment	Source Category:		\$			
Medical History	Source Type:		<b>*</b> ]	Source Subtype:		
ADT Record						
Incubation &	Type:	Ŧ	Setting:			Ŧ
Communicability	Exposure					
Treatment & Interventions	Location Name:					
Medications	Workgroup: + User:	A V				
Exposure Summary	Source Investigation Information					
View Client Imms profile	Last Name:		First Name	:		
▶ Subject	Source Investigation ID:					
▶ Cohort	Unknown Contexts					
Notes	Name / Description: bruse	sel				
Document Management	Contact Info:					
Communication Templates						
Reporting & Analysis						
Notifications					Search Retr	eve Clear Advanced Search

The Search **Exposures** screen displays.

- 2. Scroll down to the Unknown Contact fields. Type in available information
- 3. Click Search.

E	Exposure Search Results Aride Exposure Search Results										
1	Row Actions:     Preview     Generate Map										
		Source	Exposure ID/Name	Transmission Start	Transmission End	Location Name	<u>Settin</u> g▼	Investigation ID	<u>Outbreak</u> ▼ ID	Invalid	
		Test1, Lauren	<u>15-Measles</u> <u>exposure</u>	2018 Aug 1	-	PSN Hospital	Hospital	180	-	-	
	Total:	: 1	Page 1 of 1					Jun	np to page:	2	

The Search Exposures screen redisplays. In the Exposure Search Results section, the Exposure ID/ Name and Source (Index Case) is displayed.

4. Click the Exposure ID/ Name hyperlink to view and update contact information.



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#### Maintain Transmission Event Details

			ACTIVE
Client	Name(Last, First Middle)/Gen	der: Health Card	rd No: Date of Birth / Age:
<u>211</u>	Test1, Lauren / Female	-	1977 Aug 01 / 41 years
Phone Number: -(-)	Jurisdiction Info: Department of Health and Wellr Scotia Health Authority	Additional I Additional I ness,Nova Provincial he provider ider	ID Type / ID: realth service entifier / -
Investigation ID: <u>180</u>	Status: OPEN	Disposition: Investigation in progress	Investigator:
Disease: Measles	PHAC Date/Type: 2018 Aug 09 / Date Reported	Etiologic Agent:	Authority/Classification: National / Case - Person Under Investigation / 2018 Aug 09
			Save Reset Cancel
*Required field			
Transmission	Event Details	🗸 Contains Data	a Show Transmission Event Details
Source		🗸 Contains Data	a Show Source
Source Detail	s	🗸 Contains Data	ta Show Source Details

The Maintain Transmission Event Details screen displays.

- 5. Scroll to **Unknown/Anonymous Contacts** section and click the radio button beside the **Contact Name**.
- 6. Click **Update**.

Unknown/Anonymous Contacts			A Hide	Unknown/Anonymous Contacts
*Required field (for Add/Update only)				
*Name / Description:				
Contact Info:				
Contact Details:				
* Disposition:		\$		
Disposition Details:			-	
				1,
				2000 characters remaining )
				Add Clear
Row Actions: Delete Update				
Name / Description	Contact Info	Contact Details	Disposition	Disposition Details
Anonymous Female -		-	Investigation in progress	-
• Brussel -		-	Investigation in progress	-

7. Update the information, click **Apply Update**.



Unknown/Anonymous Contacts		Alide Unknown/Anonymous Contacts
*Required field (for Add/Update only)		
* Name / Description:	Brussel Sprout	
Contact Info:		
Contact Details:		
* Disposition:	Investigation in progress	
Disposition Details:		
Surname found		1
		(1987 characters remaining )
		Apply Update Clear

8. Scroll to bottom of page and click **Save**.

laintain	Transmission Ev	ent Det	ails			? 🗏
						ACTIVE
Client	Name(Last, First Middle)/Gen	der:	Health Card	No:	Date of Birth / Age:	
<u>211</u>	Test1, Lauren / Female		-		1977 Aug 01 / 41 years	
Phone Number: (-)	Jurisdiction Info: Department of Health and Welli Scotia Health Authority	ness,Nova	Additional ID Additional ID Provincial hea provider ident	) Type / ): alth service ifier / -		
Investigation	Status:	Dispo	sition:	Investigat	or:	▲ Investigation
<b>ID:</b> <u>180</u>	OPEN Invi		igation in ess	-		
<b>Disease:</b> Measles	PHAC Date/Type: 2018 Aug 09 / Date Reported	Etiolo	gic Agent:	<b>Authority/</b> National / 0 09	Classification: Case - Person Under Investigation	on / 2018 Aug
ransmission eve	nt successfully updated.					

Screen refreshes and confirmation message 'Transmission event successfully updated' displays.

### 5.6 Converting Unknown Contact to Known Contact

Unknown Contacts can be converted to Known Contacts within the Maintain Transmission Event Details screen or by using Search Exposures to get to the relevant Maintain Transmission Event Details screen.

1. From the Left-Hand Navigation menu, select Search Exposures.



Recent Work  Search	Search Exposures ⑦ 🗏
Search Investigations	Exposure Search
Search Lab	
Search Exposures	Wildcard characters % (multiple letters) and _ (single letters) can be used on any text field - except on Client Number and on First and Last Name when matching phonetically. Wildcard only exercises will be treated as blank searches.
Search Interventions	Exposure ID: Exposure ID:
Search Clients	
Search Non-Human	
	Mode of Transmission:
Investigation	Transmission Start From: / / IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
	yyyy mm dd nn mm
Investigation Summary	Transmission Start To: / / 🔛 : : ADT
Investigation Details	yyyy mm dd hh mm
	Transmission End From: / / IIII : ADT
Encounter Details	yyyy mm dd hh mm
Signs & Symptoms	Transmission End To: / / End To: : : ADT
Complications	yyyy mm dd hh mm
Outcomes	Source Category:
Basic Assessment	
Medical History	Source Type:
ADT Record	Exposure Setting
Incubation & Communicability	rype, setting. Fronstire
<ul> <li>Treatment &amp; Interventions</li> </ul>	Location Name:
Medications	Source Investigator Information:
Exposure Summarv	Workgroup.
View Client Imms profile	Source Investigation Information:
▶ Subject	Last Name: First Name:
▶ Cohort	Source Investigation ID:
Notes	Jnknown Contact:
► Document Management	Name / Description: brussel
Communication Templates	
▶ Reporting & Analysis	
Notifications	Search Retrieve Clear Advanced Search

The Search **Exposures** screen displays.

- 2. Scroll down to the Unknown Contact fields. Type in available information
- 3. Click Search.

E	Exposure Search Results Aride Exposure Search Results										
1	Row Actions: Preview Generate Map New Search										
		Source	Exposure ID/Name	Transmission Start	Transmission	on <mark>Locatio</mark> <u>Name</u>	n 🔻 Setting	g Investigation ID	│ <u>Outbreak</u> ▼ │ <u>ID</u>	Invalid	
		Test1, Lauren	<u>15-Measles</u> exposure	2018 Aug 1	-	PSN Ho	spital Hospita	al 180	-	-	
	Total:	: 1	Page 1 of 1					Ju	mp to page:	2	

The **Search Exposures** screen redisplays. In the **Exposure Search Results** section, the **Exposure ID/ Name and Source** is displayed.

4. Click the **Exposure ID/ Name** hyperlink to view and update contact information.



#### Maintain Transmission Event Details

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					ACTIVE
Client ID: 211	Name(Last, First Middle)/Gen	der: Health Card	d No:	Date of Birth / Age:	
	Test1, Lauren / Female	-		1977 Aug 01 / 41 years	
Phone Number: -(-)	Jurisdiction Info:	Additional	ID Type /		
	Department of Health and Well Scotia Health Authority	ness,Nova Provincial he provider ide	ealth service ntifier / -		
	-				Investigation
Investigation ID:	n Status:	Disposition:	Investig	ator:	
<u>180</u>	OPEN	Investigation in progress	-		
Disease: Measles	PHAC Date/Type: 2018 Aug 09 / Date Reported	Etiologic Agent: -	Authorit National 09	y/Classification: / Case - Person Under Investigatior	ı / 2018 Aug
				Save	Reset Cancel
*Required field					
Transmissio	n Event Details	Contains Data	1	😽 Show Tr	ansmission Event Details
Source		Contains Data	1		Show Source
Source Deta	ils	🗸 Contains Data	1		Show Source Details

The Maintain Transmission Event Details screen displays.

- 5. Scroll to **Unknown/Anonymous Contacts** section and click the radio button beside the **Contact Name**.
- 6. Click Update.

Row Actions: Delete Update						
	Name / Description	Contact Info	Contact Details	Disposition 🔻	Disposition Details	
$\bigcirc$	Anonymous Female	-	-	Investigation in progress	-	
0	Brussel Sprout	-	-	Investigation in progress	Surname found	

7. In the Disposition Field select, "Converted to Client".



Unknown/Anonymous Contacts			ا ≈	Hide Unknown/Anonymous Contacts		
*Required field (for Add/Update only)						
* Name / Description:	Brussel Sprout					
Contact Info:						
Contact Details:						
* Disposition:	Converted to Clie	ent 🗘				
Disposition Details:						
Surname found				1		
				(1987 characters remaining )		
				Apply Update Clear		
Row Actions: Delete Update						
Name / Description	contact Info	Contact Details	<b>Disposition</b>	Disposition Details		
Anonymous Female -		-	Investigation in progress	-		
Brussel Sprout     -		-	Investigation in progress	Surname found		
Anonymous Contact Details:						
(2000 characters remaining ) Total All Contacts: 3						

#### 8. Click **Apply Update**.

Row Actions: Delete Update						
	Name / Description	Contact Info	Contact Details	<u>Disposition</u> ▼	Disposition Details	
0	Anonymous Female	-	-	Investigation in progress	-	
0	Brussel Sprout	-	-	Converted to Client	Sumame found	
Anonymous Contacts:						
Anonymous Contact Details:						
This contact remains anonymous.						
Total	(1969 characters remaining ) Total All Contacts: 2					

Page refreshes and updated client disposition displays as 'Converted to Client.' The Total All Contacts is decremented by one as the contact will then be re-added as a known contact to the known contacts table of the TE. After re-adding the contact as a known contact, the Total All Contacts will then increase by one, back to the initial number of Total All Contacts.

9. Click Save.


## Maintain Transmission Event Details

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						ACTIVE
Client	Name(Last, First Middle)/Gend	der:	Health Card	No:	Date of Birth / Age:	
<u>211</u>	Test1, Lauren / Female		- Additional ID Type / Additional ID: Provincial health service provider identifier / -		1977 Aug 01 / 41 years	
Phone Number: -(-)	Jurisdiction Info: Department of Health and Welln Scotia Health Authority	ess,Nova				
					A Inves	tigation
Investigation ID:	n Status:	Dispos	ition:	Investigat	tor:	
180	OPEN	Investig progres	gation in ss	-		
Disease: Measles	PHAC Date/Type: 2018 Aug 09 / Date Reported	Etiolog -	jic Agent:	Authority National / 09	/Classification: Case - Person Under Investigation / 2018 Au	g
ransmission eve	ent successfully updated.					

Screen refreshes and confirmation message 'Transmission event successfully updated' display.

10. After converting an unknown contact to a known contact, the contact must be added to the known contacts table of the TE. Reference <u>Section 5.1</u> for instructions.



# Maintain Transmission Event Details

										ACTIVE
Client	Name(La	st, First Middle)/G	ender:	Health Car	rd No:		Date of Birth / Ag	je:		
211	Test1, La	uren / Female		-			1977 Aug 01 / 41	years		
Phone Number:	Jurisdict	ion Info:		Additional Additional	ID Type / ID:					
-(-)	Departme Scotia He	ent of Health and W ealth Authority	ellness,Nova	provincial i provider ide	nealth service entifier / -	ce				
									<u> ∧ Investig</u>	ation
Investigation 180	n ID: S	Status: DPEN	E I	Disposition: nvestigation in prog	ress -	vestigat	or:			
Disease: Measles	F 2	PHAC Date/Type: 2018 Aug 09 / Date	Reported -	tiologic Agent:	A Na	u <b>thority</b> ational /	Classification: Case - Person Under Inv	estigat	ion / 2018 Aug 09	
1 investigation(s) 1 acquisition even	) created. ent(s) have b	een added to the tra	ansmission eve	nt.						
									Save Reset	Cancel
*Required field										
Transmissio	on Event I	Details		Contains Dat	ta			<b>∜</b> Sho	ow Transmission E	event Details
Source				🗸 Contains Dat	ta				<b>\$</b> S	how Source
Source Deta	ails			Contains Dat	a				😂 Show Sc	ource Details
Transmissio	on Event I	nvestigator Infe	ormation	_			Show Transn	nission	Event Investigator	<sup>-</sup> Information
Known Cont	tact Searc	ch						×	Show Known Co	ntact Search
Acquisition	Events								🗙 Hide Acquis	sition Events
Row Actions:	Unlink	_	_	_	_	_		_	_	_
Acquis Event	sition ID	Investigation ID	Subject Name	Acquisition Start	Acquisiti End	<u>on</u> 🔻	<u>Classification</u>	-	Disposition	Invalid
29		219	Sprout, Brussel	2018 Aug 1	-	ľ	Measles   Contact - Perso Under Investigation	on	Investigation in progress	-
○ 28		<u>216</u>	Test2, Lauren	2018 Aug 1	-	ľ	Measles   Contact - Perso Jnder Investigation	on	Pending	-
Total All Cont	acts: 3									

New known contact is added to the **Acquisition Events** table and confirmation messages display. The Total All Contacts increases by one.



# 6 INVALIDATING TRANSMISSION EVENT ENTERED IN ERROR

A Transmission Event (TE) cannot be deleted but can be invalidated. In the event a transmission event is entered in error, the acquisition events must be unlinked and the TE is marked as invalid. When viewing an invalid TE on the Maintain Transmission Event Details screen, the system will display a warning message at the top of the screen. An invalid TE cannot be linked to an Outbreak.

Assuming that the transmission event was associated to the incorrect client, the process to correct the error includes 2 steps:

- 1. Unlink all AEs attached to the incorrect Investigation.
- 2. Create new Investigation and TE with the correct client in context.

# 6.1 Unlink All AE(s) Attached to Incorrect Investigation

1. After setting a Client and Investigation in Context in the Investigations Module, navigate to the **Left-Hand Navigation** menu, select **Exposure Summary**.

	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATIO	N FAMILY HEA	ALTH INVENT	ORY AD	MIN	
Recent Work	-	_		,	1	,		-	_
	Exposure	e Summary						?	
Search Investigations									
Search Lab								ACTIV	VE
Search Exposures	Client	Name(I ast First Middl	e)/Gender:	Health Card N	No:	Date of Birth / Age	e.		
Search Interventions	ID:	Tanto (Luot, Frite Initial	dy donadn.	noulli ouru i		1077 Aug 04 / 14			
Search Clients	211	Test1, Lauren / Female		-		1977 Aug 01 / 41 y	ears		
Search Non-Human	Phone Number:	Jurisdiction Info:		Additional ID Additional ID	Type / ::				
Subjects	-(-)	Department of Health an	d Wellness,Nova	Provincial hea	alth service				
- Investigation		Scota Health Addionty		provider identi					
Subject Summary							☆ Inves	stigation	
Investigation Summary	Investigation	Status:	Disp	osition:	Investigator:				
Investigation Details	180	OPEN	Inve	stigation in	-				
▶ Lab	Disease	PHAC Date/Typ	e: Etio	logic Agent:	Authority/Cla	esification:			
Encounter Details	Measles	2018 Aug 09 / D	ate -	logic Agent.	National / Cas	e - Person Under Inve	estigation / 2018 Au	g	
Signs & Symptoms		Reported			09				
Complications	Transmission	n Event Summary				\$⊦	lide Transmission E	vent Summ	nary
Outcomes	2 Transmission	Events Found, 0 Contacts	Found.						_
Basic Assessment	Row Actions:	Сору				Quick Entry	Create Transmis	sion Even	ıt
Medical History	TE	ID Transmission St	tart 🔺 Transmiss	ion End 🔽 Lo	cation Name	Setting Type	Outbreak ID	Invalid	
ADT Record									
Incubation & Communicability	○ ⊕ <u>15</u>	2018 Aug 1	2018 Aug 1	PS	N Hospital	Health care setting	-	-	
Treatment & Interventions	→ ● 14	2018 Aug 1	2018 Aug 1	Ho	spital	Health care setting	-	-	
▶ Medications					•				
Exposure Summary									
View Client Imms profile									

Exposure Summary screen displays.

2. Click on the relevant TE ID hyperlink.



# Maintain Transmission Event Details

Client	Name	(Last, First Mic	ldle)/Gender:	I	Health Card No:		Date of	Birth / Age:	
ID: 211	Test1,	Lauren / Femal	e		-		1977 Au	g 01 / 41 years	
hone	Juris	liction Info:			Additional ID Typ	e /			
(-)	Depar Scotia	tment of Health Health Authorit	and Wellness,Nova y		Provincial health s provider identifier	service / -			
									Investigation
Investigatio	on ID:	Status: OPEN		Dispositi Investigat	on: tion in progress	Investigat	or:		
lisease: leasles		PHAC Date/1 2018 Aug 09	<b>ype:</b> / Date Reported	Etiologic -	Agent:	Authority/ National / (	Classification Case - Person	: Under Investigation	/ 2018 Aug 09

The Maintain Transmission Event screen displays.

- 3. Scroll to Acquisition Event section.
- 4. Click on the radio button beside the AE and click **Unlink**.

A	Acquisition Events Acquisition Events									
h	Row	Actions: Unlink								
		Acquisition Event ID	Investigation ID	Subject Name	Acquisition ▼ Start	Acquisition ▼ End	Classification	Disposition 🔻	Invalid	
ļ	0	27	217	Sprout, Brussel	2018 Aug 1	-	Measles   Contact - Person Under Investigation	Pending	-	

5. Repeat step 4 for each **AE** that needs to be unlinked.

Acquisition Events						🗙 Hide Acquisi	ition Events
Row Actions: Unlink							
Acquisition Event ID	Investigation  T	Subject Name	Acquisition Start	Acquisition End	Classification	Disposition	Invalid

Screen refreshes after every instance that an AE is unlinked and the AE is removed from the Acquisition Event section.

- 6. After unlinking all AEs, click **Save**.
- 7. Review AEs for validity. If any were produced in error, invalidate the AE and close the associated investigation as "entered in error".



# Maintain Transmission Event Details

#### ACTIVE Client ID: 211 Name(Last, First Middle)/Gender: Date of Birth / Age: Health Card No: Test1. Lauren / Female 1977 Aug 01 / 41 years Phone Number: Additional ID Type / Additional ID: Jurisdiction Info Department of Health and Wellness,Nova Scotia Health Authority Provincial health service provider identifier / --(-) Investigation Investigation ID: 180 Disposition: Investigation in progress Investigator: Status: OPEN PHAC Date/Type: 2018 Aug 09 / Date Reported Disease: Measles Etiologic Agent: Authority/Classification: National / Case - Person Under Investigation / 2018 Aug 09 Transmission event successfully updated.

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Screen refreshes and confirmation message 'Transmission event successfully updated' displays.

# 6.2 Create a New Investigation and Transmission Event

- 1. Search for the correct Client.
- 2. Confirm whether the Investigation exists by checking the Subject Summary screen.
- 3. If Investigation does not exist, create **Investigation**.
- 4. Create Transmission Event.
- 5. Link **AE(s)** that were previously linked to the incorrect Investigation.

**Important**: Only search for Known Contacts by INV ID. **DO NOT** search for Known Contacts by Client ID when reconciling an incorrect investigation/TE. This will create a duplicate INV and duplicate AE.



# 7 QUICK ENTRY – ACQUISITION EVENT

The Quick Entry – Acquisition Event screen **will not be used** in Nova Scotia as it does not capture business mandatory information.



# 8 CREATE ACQUISITION EVENT

# 8.1 Create Acquisition Event

An acquisition event (AE) describes the details of a Subject's exposure to a potential source of a Communicable Disease. The Subject in this situation may be a human Contact, or a non-human Contact such as a food, water sample or fomite that becomes contaminated with an infectious agent. An AE must have an associated Investigation, which is defined as the Contact Investigation. Multiple AEs may be created for an Investigation, but only one can be marked as the "Most Likely Source".

Example of an AE: It is determined that the likely source of infection for a Client with active TB was exposure while travelling to a TB endemic country. This is the AE for this TB Investigation.

1. After setting a Client and Investigation in Context, navigate to the Left-Hand Navigation menu, select Exposure Summary.

	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN
Recent Work	Exposure	Summarv		,	,		(?) 旦
Search Investigations		,					0
Search Lab							ACTIVE
Search Exposures	Client	ame(Last First Middle	)/Gender:	Health Card No:	Date	of Birth / Age:	
Search Interventions	ID:	arte Lauron / Fomalo	syldender.	ficaliti Gara No.	1078	Ech 01 / 40 years	
Search Clients	Phone	urisdiction Info:		- Additional ID Type	1970	reb 017 40 years	
Search Non-Human Subjects	Number: -(-)	Department of Health and	d Wellness,Nova	Additional ID: Provincial health se	ervice		
✓ Investigation		Scolla Health Authority		provider identifier /	-		
Subject Summary	1						Investigation
Investigation Summary	Investigation ID	OPEN	Disp	osition: stigation in progress	Investigator: -		
Investigation Details	Disease:	PHAC Date/Typ	e: Etiol	ogic Agent:	Authority/Classificati	on:	0010 1 17
Disease Summary	Influenza	2018 Aug 17 / D	ate Reported -		National / Case - Perso	on Under Investigation /	2018 Aug 17
Recommendations	Transmission E	Event Summary				<b>☆</b> Hide Trar	nsmission Event Summary
Rosp. Org / Investigator	0 Transmission Eve	ents Found. 0 Contacts F	Found.				
Resp. Org / Investigator	Row Actions:	ору				Quick Entry Creat	e Transmission Event
External Sources		<u>Transmission S</u>	tart	sion End   Loca	tion Name 🛛 💙 Setti	ng Type 💙 Outbre	ak ID 🔻 Invalid
Links & Attachments							
Transfer Requests							
Close Investigation	Acquisition Eve	ent Summary				<b>☆</b> Hide A	cquisition Event Summary
▶ Lab	0 Acquisition Event	s Found.					
Encounter Details	Row Actions:	earch and Link TE	Сору			Quick Entry Cre	eate Acquisition Event
Signs & Symptoms		E Source Name	Acquisition Start	Acquisition Loc End Nar	ation Setting	Exposed Li	kely <u>Invalid</u> ource
Complications							
Outcomes							
Basic Assessment							
Medical History							
ADT Record		Copyrigh	nt © IBM Corporation 20	007, 2016. All Rights Re	eserved   Contact Us	Terms of Use	
Communicability		Privacy Disclaimer: /	Access to the System is	governed and restricte	d by organizational priva	cy and protection polici	es.
▶ Treatment & Interventions			Privacy Legislation app	nies to all use and/or di	sciosure of health inform	ation.	
Medications			Bui.	La 3.0.4.0P9.2018	1000-0258		
Exposure Summary				_			

#### Exposure Summary screen displays.

2. From the Acquisition Event Summary section, click Create Acquisition Event.



# Maintain Acquisition Event Details

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Name(Last, First Middle)/Gen	der:	Health Card	No:	Date of Birth / Age:	
Test2, Lauren / Female		-		1978 Feb 01 / 40 years	
Jurisdiction Info:	ana Nava	Additional II Additional II	) Type / ):		
Scotia Health Authority	1855,19074	provider iden	tifier / -		
				<u>∧ Inve</u>	estigation
Status:	Dispo	sition:	Investigator:		
OPEN	Investi progre	igation in ss	-		
PHAC Date/Type: 2018 Aug 17 / Date Reported	Etiolo -	gic Agent:	Authority/Cla National / Cas Aug 17	<b>ssification:</b> se - Person Under Investigation / 20	)18
	Name(Last, First Middle)/Gen Test2, Lauren / Female Jurisdiction Info: Department of Health and Wellr Scotia Health Authority Status: OPEN PHAC Date/Type: 2018 Aug 17 / Date Reported	Name(Last, First Middle)/Gender: Test2, Lauren / Female Jurisdiction Info: Department of Health and Wellness,Nova Scotia Health Authority Status: Dispo OPEN Investi progree PHAC Date/Type: Etiolo 2018 Aug 17 / Date - Reported	Name(Last, First Middle)/Gender:       Health Card         Test2, Lauren / Female       -         Jurisdiction Info:       Additional IC         Department of Health and Wellness,Nova       Provincial health and Scotia Health Authority         Status:       Disposition:         OPEN       Investigation in progress         PHAC Date/Type:       Etiologic Agent:         2018 Aug 17 / Date       -	Name(Last, First Middle)/Gender:       Health Card No:         Test2, Lauren / Female       -         Jurisdiction Info:       Additional ID Type / Additional ID:         Department of Health and Wellness,Nova       Provincial health service provider identifier / -         Status:       Disposition:       Investigator:         OPEN       Investigation in progress       -         PHAC Date/Type:       Etiologic Agent:       Authority/Cla National / Cas Reported	Name(Last, First Middle)/Gender:       Health Card No:       Date of Birth / Age:         Test2, Lauren / Female       -       1978 Feb 01 / 40 years         Jurisdiction Info:       Additional ID Type / Additional ID:       For years         Department of Health and Wellness, Nova       Provincial health service provider identifier / -       Years         Status:       Disposition:       Investigator:       Progress         OPEN       Investigation in progress       -       -         PHAC Date/Type:       Etiologic Agent:       Authority/Classification:       National / Case - Person Under Investigation / 20 Aug 17

Save Clear Cancel

*Required field					
Acquisition Even	t			🛠 Hio	de Acquisition Event
Acquisition Event * Exposure Name:	ID: - Group Outing	Transmission Eve	ent ID: -		
Invalid:		Invalid Reason:			
Acquirer Role:	\$				
Exposed:	Possible \$				
Responsible Organizational	To specify an Organiz select it and click on	ation first click on the 'Find' butto Select' button. Then click 'Close' to	n. Then search, or typ o close.	pe the name of the Organization you	wish to specify,
Unit:	Organization: Top Organization]	b Level > Level 2 (specific one)	> Level 3 (specific o	one) > [Selected Level 4	Find Q
Potential Mode of	Acquisition: Water	borne	\$		
Nature of Exposur	re:		Selected:		
Consumption of co	ontaminated water	Add >			
	minated water	Add All >>			
		< Remove			
		<< Remove All			

The Maintain Acquisition Event screen displays.

- 3. In the **Acquisition Event** section, enter an **Exposure Name** and complete other acquisition details, if known.
- 4. There is no required information or the **Source** section.



Source						<b>☆</b> Hide Source
Source Id: Source Name: Source Description:			- In -	vestigation Id:		-
Most Likely Source:						17
Acquisition Event	l Investigator I	nformation			<b>☆</b> Hide Acq	uisition Event Investigator Information
* Required field (for Ad	dd/Update only)		1			
* Assigned Date: End Date:	yyyy mm yyyy mm	dd dd dd	Assigned Time:	hh mm		
Row Actions: Dele	Primary \$	]				Add Clear
<u>Investigator</u>	Work	<u>group</u>	Investigator Ty	<u>pe</u>	Assigned Date/Time	End Date

- 5. If known, enter Investigator information in the **Acquisition Event Investigator Information** section and then click **Add**.
- 6. Select and add one or more **Nature of Exposure** values (filtered by **Potential Mode of Acquisition**), if known, by highlighting a Nature of Exposure and clicking **Add**.
- 7. In the Acquisition Event Date/Time section, select an **Acquisition Start** date.
- 8. Enter Acquisition End date, if known.



Acquisition Event	Date/Time				Alide Acquisition Event Date/Time
Disease Source Ea	arliest Possible cability From	Source E Commur	Earliest Probable nicability From	Source Latest Probabl	e Source Latest Possible Communicability To
Acquisition start/end denote	e the first and last p	oossible times acquisit	ion could have occurred.		
* Acquisition Start:	2018 / 8 yyyy mm	/ 1 🔛 dd	:ADT nh mm	Estimated	
Acquisition End:	/ yyyy mm	dd i	::ADT nh mm	Estimated	
Exposure Duration:					
Exposure Location					A Hide Exposure Location
Exposure Location Na	me:				
Exposure Setting Type			\$		
Exposure Setting:	¢				
Country:	Canada		\$		
Address:				\$	\$
	Unit No.	Street No.	Street Name	Street Type Str	eet Direction
	P.O. Box	STN	RPO R	ural Route	
Province/Territory:		\$	City		
Postal Code:					

- 9. Complete **Exposure Location** section, if information is available.
- 10. Enter information for acquisition event location in the **Acquisition Event Location Liaison Details** section providing details about an individual or organization relevant to the AE.

Note: only one Liaison can be added to a Acquisition Event.

11. Enter information for acquisition event intensities in the **Acquisition Event Intensities** section, if information is available. This section is not mandatory at this time.



Acquisition Eve	ent Location	Liaison Details		★ Hide Acquisition E	vent Location Liaison Details
First Name:		Last	Name:		
Phone Number: (	)	- ext	International		
Fax Number: (	)	- ext	International		
Email:					
					· · · · · · · · · · · · · · · · · · ·
Acquisition Eve	ent Intensities	S		Alde 🗙	Acquisition Event Intensities
Level of Contact:				\$	
*Required field (for	Add/Update onl	у)		 	
* Intensity Type:	\$	)			
* Intensity Value:		* Intensit	ty Unit: 🛟		
					Add Clear
Row Actions:	pdate Delete				
Intensity Ty	<u>(pe</u>	<b>^</b>	Intensity Value	▼ Intensity Unit	•
					Save Clear Cancel

#### 12. Click Save.

laintair	n Acquisition Eve	ent Detail	S			0
						ACTIVE
Client	Name(Last, First Middle)/	Gender:	Health Card	No:	Date of Birth / Age:	
<u>212</u>	Test2, Lauren / Female		-		1978 Feb 01 / 40 years	
Phone Number: -(-)	Jurisdiction Info: Department of Health and V Scotia Health Authority	Vellness,Nova	Additional II Additional II Provincial he provider iden	<b>D Type /</b> D: alth service tifier / -		
						A Investigation
Investigati	on Status:	Dispo	sition:	Investigat	tor:	
222	OPEN	Investi progre	gation in ss	-		
Disease: Influenza	PHAC Date/Type: 2018 Aug 17 / Date Reported	Etiolog -	gic Agent:	Authority National / Aug 17	/Classification: Case - Person Under Investigation	on / 2018
equisition eve	ent successfully saved.					

Page refreshes and confirmation message 'Acquisition event successfully saved' displays.

# 8.2 Add AE Source and Source Investigation ID

Optionally, after completing section 9.1, the following fields are available where a user can add a Source for the AE and create an Investigation for the Source.

- 1. From the Maintain Acquisition Event Details page, expand the Source section, and enter a **Source Name**.
- 2. Select Source Category, a Source Type, and Source Subtype.



Source		A Hide Source
*Required for create source		
*Source Name:	tap water	
* Source Category:	Environment or geographical location \$	
*Source Type:	Water - drinking	
Client:		
⊖Non Human Subject:		
Investigation		
	Search	te As Source
Source Id:	- Investigation Id:	-
Source Name		

#### 3. Click Create as Source.

\* Responsible Organization Workgroup :

\* Responsible Organization Date :

Create Inve	estigation					? 🗏
Subject ID: 267	Subject Name / Type: tap water / Water - drinking	Date of Death: -	Liaison Name (First, L - / -	ast) / Role:		ACTIVE
				Submit	Clear	Cancel
Additional details (e., * Required field	g., disease, diagnosis, attached docur	nents) may be entered aft	er the investigation has been	created.		
Disease Summa	ry					<b>\$</b> Show
Investigation Inf	ormation					<b>☆</b> Hide
Priority: D	o Not Use 🛟	•				
Responsible Org	janization / Investigator					<b>☆</b> Hide
* Responsible Or To specify an Org 'Select' button. The Organization	ganization : Antigonish Public Heal ganization first click on the 'Find' button. hen click 'Close' to close. : Top Level > Level 2 (specific one) >	Ith Office    Then search, or type the name Level 3 (specific one) > IS	e of the Organization you wish	to specify, sel	ect it and	click on

Create Investigation Screen displays. This will create a new Investigation for the identified Source.

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4. Complete all Panorama mandatory fields indicated by a red asterisk (\*) and other fields as required.

**Note**: Use reporting source "Other" for providers or organizations located outside of Nova Scotia.

2018

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Responsible Organization / Investigator
* Responsible Organization : Antigonish Public Health Office
To specify an Organization first click on the 'Find' button. Then search, or type the name of the Organization you wish to specify, select it and click on 'Select' button. Then click 'Close' to close.
Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) > [Selected Level 4 Organization]
* Responsible Organization Workgroup : 🗘
* Responsible Organization Date : 2018 / 08 / 17
* Investigator Organization : Nova Scotia Health Authority
* Investigator Workgroup : Test workgroup 2 \$
Investigator Name :
* Assigned Date : 2018 / 08 / 17 III
yyyy mm dd
Reporting Notification
* Reporting Source:
Provider:
Click Find to select a provider:
Provider:
• Location: Antigonish Public Health Office To specify a Service Delivery Location first click on the 'Find' button. Then search, or type the name of the Service Delivery Location you wish to specify, select it and click on 'Select' button. Then click 'Close' to close.
Service Delivery Location: Panorama Cloud > Province of Nova Scotia > Department of Health and Wellness > Nova Scotia Health Authority > Eastern Zone > Antigonish Public Health Office > [Antigonish PHO]
Other:
Method of Notification:
*At least one of the following dates is required.
Report Date (Sent):       /       /       /       Report Date (Received):       2018       /       08       /       17         yyyy       mm       dd       yyyy       mm       dd
Submit Clear Cancel

5. Click Submit.



# Maintain Acquisition Event Details

ACTIVE Client Name(Last, First Middle)/Gender: Health Card No: Date of Birth / Age: ID: 212 1978 Feb 01 / 40 years Test2, Lauren / Female Phone Jurisdiction Info: Additional ID Type / Additional ID: Provincial health service provider identifier / -Number: Department of Health and Wellness,Nova Scotia Health Authority -(-) Investigation Disposition: Investigation Status: Investigator: ID: 222 OPEN Investigation in progress PHAC Date/Type: Authority/Classification: Disease: **Etiologic Agent:** Influenza 2018 Aug 17 / Date National / Case - Person Under Investigation / 2018 Reported Aug 17 Source investigation created successfully. The source transmission event has been created and linked to the acquisition event. Save Reset Cancel

**Maintain Acquisition Event Details** screen displays. Successful message displays. Source has been added to the AE. An Investigation has been created for the source.

6. Click Save.



# 9 INVALIDATING ACQUISITION EVENT ENTERED IN ERROR

An Acquisition Event (AE) cannot be deleted but can be invalidated. The process for Invalidating an Acquisition Event Entered in Error include 3 steps:

- 1. Update Acquisition Event (AE) and Mark as Invalid
- 2. Update Transmission Event
- 3. Update Investigations

# 9.1 Update Acquisition Event (AE) and Mark as Invalid

1. After setting a Client and Investigation in Context, navigate to the Left-Hand Navigation menu, select Exposure Summary

	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN
Recent Work	Exposure	Summary			,		? E
Search Lab							ACTIVE
Search Interventions Search Clients	Client ID: 212	Name(Last, First Midd Test2, Lauren / Female	lle)/Gender:	Health Card No	5: Date 1978	of Birth / Age: Feb 01 / 40 years	
Search Non-Human Subjects	Phone Number: -(-)	Jurisdiction Info: Department of Health a	and Wellness,Nova	Additional ID T Additional ID: Provincial healt	<b>'ype /</b> h service		
Subject Summarv		Scotia Health Authority		provider identifie	er / -		
Investigation Summary							Investigation
Investigation Details	Investigation	Status:	Disp	osition:	Investigator:		
▶ Lab	<u>222</u>	OPEN	Inves	tigation in	-		
Encounter Details			progr	ess			
Signs & Symptoms Complications	Disease: Influenza	2018 Aug 17 / D Reported	Date -	ogic Agent:	Authority/Classifica National / Case - Pe Aug 17	ation: rson Under Investig	gation / 2018
Outcomes	Transmission	Event Summery	_	_		∧ Hide Trans	mission Event Summary
Basic Assessment	Transmission	Event Summary					
Medical History	0 Transmission I	Events Found. 0 Conta	cts Found.		0.1		
ADT Record	Now Actions.	Сору			Qui	CK Entry Create	Transmission Event
Incubation & Communicability		ID Transmission	Start Transmis	ision End	ation Name	ing Type  Outb	oreak ID  Invalid
Treatment & Interventions							
Medications		cont Cummon.				A Hido Ao	nuisition Event Summany
Exposure Summary	Acquisition Ev	vent Summary					quisition Event Summary
View Client Imms profile	2 Acquisition Ev	ents Found.					
Subject	Row Actions:	Search and Link TE	Сору		Q	uick Entry Crea	te Acquisition Event
Notes		<u>E Source</u> <u>Name</u>	Acquisition Ac Start En	d Loca	ation Setting Ie Type	Exposed	Likely Invalid Source
Document Management     Communication	o <u>31</u> <u>1</u>	6 tap water 2	018 Aug 15 -	-	-	Possible	

Exposure Summary screen displays.

2. Click **AE ID** hyperlink.



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## Maintain Acquisition Event Details

							ACTIVE
Client	Name	e(Last, First Middle)/Gende	er:	Health Card No:		Date of Birth / Age:	
1D: 212	Test2	, Lauren / Female		-		1978 Feb 01 / 40 years	
Phone Number: -(-)	Juriso Depar Scotia	diction Info: rtment of Health and Wellne a Health Authority	ss,Nova	Additional ID Ty Additional ID: Provincial health provider identifier	pe / service r / -		
							Investigation
Investigation	on ID:	Status: OPEN		Disposition: Investigation in progress	Investigator -	r:	
<b>)isease:</b> nfluenza		PHAC Date/Type: 2018 Aug 17 / Date Repo	orted	Etiologic Agent: -	Authority/C National / Ca	lassification: ase - Person Under Investigatio	n / 2018 Aug 17
							Save Reset Cancel
equired field							
cquisition	Event						☆ Hide Acquisition Event
cquisition E	Event ID:	31 Group Outing	Ti	ransmission Event ID: 16			
valid:			*	Invalid Reason: Er	tered in Error		
cquirer Role	e:	Do not use 💲					

The Acquisition Event Details screen displays.

- 3. Click the **Invalid** checkbox and document reason in the **Invalid Reason** box.
- 4. Click Save.

Maintain	Aco	uisition	Event	Details

								ACTIVE
Client ID:	Name	(Last, First Middle)/Gende	r:	Health Card	No:	Date of Birth /	Age:	
212	Test2,	Lauren / Female		-		1978 Feb 01 / 4	10 years	
Phone Number: -(-)	Juriso Depar Scotia	<b>diction Info:</b> tment of Health and Wellne: Health Authority	ss,Nova	Additional IE Additional IE Provincial hea provider ident	<b>) Type /</b> ): alth service tifier / -			
								Investigation
Investigation 222	n ID:	Status: OPEN		Disposition: Investigation in progres	Investig ss -	gator:		
Disease: Influenza		PHAC Date/Type: 2018 Aug 17 / Date Repo	rted	Etiologic Agent:	Authori National	ity/Classification: I / Case - Person Under	Investigation / 2	018 Aug 17
Acquisition event	success	sfully updated.						
							Save	Reset Cancel
*Required field								
Acquisition I	Event						:	Hide Acquisition Event
Acquisition Ev	vent ID:	31	Tr	ransmission Event ID:	16			
* Exposure Na	ame:	Group Outing						
Invalid:			*	Invalid Reason:	Entered in Err	or		

Screen refreshes and confirmation message 'Acquisition event successfully updated' displays.



5. Navigate to the **Left-Hand Navigation** menu and select **Exposure Summary.** Make sure the AE is now marked as invalid in the **Acquisition Event Summary**.

Exposure	e Summary							? 🗉
								ACTIVE
Client ID:	Name(Last, First Middle	)/Gender:	Health Card	No:	Date of Birt	h / Age:		
212	Test2, Lauren / Female		-		1978 Feb 0	1 / 40 years		
Phone Number: -(-)	Jurisdiction Info: Department of Health and Scotia Health Authority	d Wellness,Nova	Additional IE Additional IE Provincial hea provider iden	<b>) Type /</b> <b>):</b> alth service tifier / -				
Investigation	ID: Status		Dianaaikian	laura eti a	- <b>1</b>		▲ Investiga	ation
Investigation	OPEN		Investigation in progres	ss -	ator:			
Disease: Influenza	PHAC Date/Type 2018 Aug 17 / Da	e: ate Reported	Etiologic Agent: -	Authorit National	<b>y/Classification:</b> / Case - Person Und	ler Investigatio	on / 2018 Aug 17	
Transmission	n Event Summary					🗙 Hide T	ransmission Ever	nt Summary
Transmission 0 Transmission E	n Event Summary Events Found. 0 Contacts F	Found.				☆ Hide T	ransmission Ever	nt Summary
0 Transmission Row Actions:	n Event Summary Events Found. 0 Contacts F Copy	Found.	_	_	Quic	k Entry Cre	ransmission Ever	nt Summary
0 Transmission 0 Transmission E Row Actions:	Event Summary Events Found. 0 Contacts F Copy	found.	smission End	Location Name	Quic	k Entry Cro be ✓ Out	ransmission Ever eate Transmissio break ID	nt Summary on Event
0 Transmission E Row Actions:	Event Summary Events Found. 0 Contacts F Copy ID Transmission St	found.	smission End	Location Name	Quic	k Entry Cr be Qutt	Transmission Ever eate Transmission break ID	nt Summary on Event
Acquisition E	n Event Summary Events Found. 0 Contacts F Copy ED Transmission St Event Summary	Found.	smission End	Location Name	Quic Setting Ty	k Entry Cr be Outlet A Hide T A Hide T	ransmission Ever eate Transmission break ID	nt Summary
Transmission         0 Transmission         Row Actions:         TE         Acquisition         2 Acquisition	Event Summary Events Found. 0 Contacts F Copy Transmission St Transmission St Event Summary ents Found.	Found.	smission End	Location Name	Quic Setting Ty	k Entry Cr k Entry Cr oe Out! Automatic State Automatic Sta	ransmission Ever eate Transmissio break ID	nt Summary
Transmission         0 Transmission B         Row Actions:         TE         Acquisition E         2 Acquisition Ever Row Actions:	Event Summary Events Found. 0 Contacts F Copy ID Transmission St Event Summary ents Found. Search and Link TE C	Found. Bart Trans	smission End	Location Name	Quic Setting Ty	k Entry Cro k Entry Cro one Out!	ransmission Ever eate Transmission break ID Ir e Acquisition Ever Create Acquisitio	nt Summary
Transmission E         0 Transmission E         Row Actions:         TE         Acquisition Eve         Row Actions:         Acquisition Eve         Row Actions:         Acquisition Eve         Row Actions:	Event Summary Events Found. 0 Contacts F Copy      D     Transmission St  Event Summary ents Found. Search and Link TE     Source     D     Same	Copy	smission End	Location Name	Quic Setting Typ Quic Setting Type	k Entry Cr be Outlet A Hide T be Outlet A Hide ick Entry (	ransmission Ever eate Transmission break ID Ir e Acquisition Ever Create Acquisition Likely Source	nt Summary on Event avalid nt Summary on Event

**Note**: If the AE was linked to a TE, set the TE of the invalidated AE in context and unlink the AE, or invalidate the TE if the TE is also in error.

# 9.2 Update Transmission Event – Invalidate/Unlink

1. After setting the Transmission Subject and Investigation in Context, navigate to the Left-Hand Navigation menu, select Exposure Summary.



Recent Work	Exposure Summary	<u></u> ⑦ 旦
Secret Investigations		0
		ACTIVE
		CONVE
Search Exposures	Subject ID: Subject Name / Type: Date of Death: Liaison Name (First, Last) / Role:	
Search Interventions	2b7 tap water / Water - drinking / -	
Search Clients		on
Search Non-Human Subjects	Investigation ID: Status: Disposition: Investigator: 223 OPEN Pending -	211
<ul> <li>Investigation</li> </ul>	Disease: PHAC Date/Type: Etiologic Agent: Authority/Classification:	
Subject Summary	Influenza 2018 Aug 17 / Date Reported - National / Case - Person Under Investigation / 2018 Aug 17	
Investigation Summary	Transmission Event Summary	Summary
Investigation Details	1 Teremining Surger Frund 1 Centrals Found	
▶ Lab	Transmission Events Found. Foundats Found. Row Actions: Conv. Outlet Entry Create Transmission	Event
Encounter Details	TEID X Transmission Start A Transmission End X Location Name X Setting True X Outbrack ID X	alid
Signs & Symptoms		
Complications	· · · · · · · · · · · · · · ·	
Outcomes		
Basic Assessment		
Medical History	Acquisition Event Summary	Summarv
ADT Record		
Incubation & Communicability	0 Acquisition Events Found.       Row Actions:       Search and Link TE       Copy       Quick Entry       Create Acquisition	Event
Treatment & Interventions	AE TE Source Acquisition Acquisition End Name Start Setting Likely Interview Source	<u>ivalid</u>
Exposure Summary		
View Client Imms profile		

Exposure Summary screen displays.

2. Click on the relevant **TE ID** hyperlink.

### Maintain Transmission Event Details

Subject ID: 267	Subject Name / Type: tap water / Water - drinking	Date of Death: -	Liaison Name (Firs - / -	t, Last) / Role:	ACTIVE
Investigation ID: 223	Status: OPEN	Disposition: Pending	Investigator:	<u> </u>	ation
Disease: Influenza	PHAC Date/Type: 2018 Aug 17 / Date Reported	Etiologic Agent: -	Authority/Classification: National / Case - Person Under	Investigation / 2018 Aug 17	
				Save Reset	Cancel
*Required field					
Transmission Eve	nt Details			A Hide Transmission E	vent Details
* Exposure Name:	Group Outing		Transmission Event ID:	16	

Exposure Mame	Group Outing	Transmission Event ID:	16
Invalid:	<	* Invalid Reason:	Entered in error
Responsible Organizational	To specify an Organization first click on the 'Find' b specify, select it and click on 'Select' button. Then cl	nutton. Then search, or type the name of the Organization you wish to lick 'Close' to close.	
Unit:	Organization: Panorama Cloud > Province o Wellness > Nova Scotia Health Authority > Ea	f Nova Scotia > Department of Health and astern Zone > [Antigonish Public Health Office] Find Q	

The Maintain Transmission Event Details screen displays.

- 3. Click the **Invalid** checkbox and document reason in the **Invalid Reason** field.
- 4. Scroll down to the **Exposure Location** section and expand the section.
- 5. Update the Exposure Location Name by appending 'Invalid'.

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Exposure Location					☆ Hide Exposure Location
Exposure Location Name	e: Invalid locat	ion			
Exposure Setting Type:			\$		
Exposure Setting:	\$				
Country:	Canada			\$	
Address:					
	Unit No.	Street No.	Street Name	Street Type	Street Direction
	P.O. Box	SIN	RPU	Rural Route	
Province/Territory:		\$	City		
Postal Code:					
Geo-coding Info	rmation				
Geo-code Status:					
Latitude:		Long	itude:		
Transmission Event I	Location Lia	ison Details			Show Transmission Event Location Liaison Details
Transmission Event	Control Mea	sures			Show Transmission Event Control Measures
					Save Reset Cancel

**Note**: Updates to the Location Name will be seen on the Exposure Summary table and will also update the Location field on the AE(s).

6. Click Save button.



# Maintain Transmission Event Details

Duble of ID.	0.1.1.1.1.1.1.1.7			-41-			ACTIVE
267	tap water / Water - d	ie: rinking	Date of De	ath: L	laison Name (First, Last) /   / -	Role:	
						Investig	ation
Investigation ID: 223	Status: OPEN		Disposition: Pending	Investigato	r:		
Disease: Influenza	PHAC Date/Type: 2018 Aug 17 / Date	Reported	Etiologic Agent:	Authority/C National / Ca	lassification: ase - Person Under Investiga	tion / 2018 Aug 17	
Transmission event succe	ssfully updated.						
						Save Reset	Cancel
*Required field							
Transmission Even	t Details		🗸 Contains Data		×	Show Transmission E	vent Details
Source			Contains Data			<b>\$</b> S	how Source
Source Details			Contains Data			😸 Show So	urce Details
Transmission Even	t Investigator Info	rmation			Show Transmiss	sion Event Investigator	Information
Known Contact Sea	arch					Show Known Cor	tact Search
Acquisition Events						Alide Acquis	ition Events
Row Actions: Unlink							
Acquisition Event ID	▼ <u>Investigation</u> ▼ ID	Subject Name	Acquisition Start	Acquisition End	Classification	Disposition	Invalid
<b>o</b> 31	222	Test2, Lauren	2018 Aug 15	-	Influenza   Case - Person Under Investigation	Investigation in progress	$\checkmark$
Total All Contacts: 1							

Screen refreshes and confirmation message 'Transmission event successfully updated' displays.

- 7. Scroll to the **Acquisition Events** section. Click on the radio button beside the **AE** and click **Unlink**.
- 8. Repeat this step for **AE's** that need to be unlinked.
- 9. Click **Save** button.

## Maintain Transmission Event Details

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					ACTIVE
Subject ID: 267	Subject Name / Type: tap water / Water - drinking	Date of Death: -	Liaison Name (First, - / -	Last) / Role:	
				*	Investigation
Investigation ID: 223	Status: OPEN	Disposition: Pending	Investigator: -		
Disease: Influenza	PHAC Date/Type: 2018 Aug 17 / Date Reported	Etiologic Agent:	Authority/Classification: National / Case - Person Under In	nvestigation / 2018 Au	ıg 17
Insmission event succ	essfully updated.				



Screen refreshes and confirmation message 'Transmission event successfully updated' displays.

10. Navigate to the Left-Hand Navigation menu and select Exposure Summary to view the Exposure Summary screen.

Exposure S	ummary				? 🗏
					ACTIVE
Subject ID: 267	Subject Name / Type: tap water / Water - drinking	Date of Dea	ath: Lia -/·	aison Name (First, Last) / R -	tole:
					<b>☆</b> Investigation
Investigation ID: 223	Status: OPEN	Disposition: Pending	Investigator: -		
Disease: Influenza	PHAC Date/Type: 2018 Aug 17 / Date Reported	Etiologic Agent: -	Authority/Cla National / Cas	<b>ssification:</b> e - Person Under Investigati	on / 2018 Aug 17
Transmission Eve	nt Summary			<b>☆</b> Hi	de Transmission Event Summary
1 Transmission Events	Found. 1 Contacts Found.				
Row Actions: Copy				Quick Entry	Create Transmission Event
	Transmission Start	ansmission End 🛛 🔻	Location Name	Setting Type	Outbreak ID
○ ⊕ <u>16</u>	2018 Aug 15 -		Invalid location	· ·	√

The **Exposure Summary** screen displays showing the invalid TE.

# 9.3 Update Investigations – Update Case/Contacts to "Not a Case/Not a Contact"

1. With the **TE** In Context, go to the **Left-Hand Navigation** menu, select **Investigation Summary.** 



# **Investigation Summary**

					ACTIVE
Subject ID: 267	Subject Name / Typ tap water / Water - c	<b>be:</b> Irinking	Date of Deat	h: Liaison Name (First, - / -	Last) / Role:
					Investigation
Investigation ID: 223	Status: OPEN	Di Pe	sposition: ending	Investigator: -	
Disease: Influenza	PHAC Date/Type: 2018 Aug 17 / Date	Et Reported -	iologic Agent:	Authority/Classification: National / Case - Person Under In	vestigation / 2018 Aug 17
Report:				Reason for deletion of investi	nation
	¢ La	aunch			Delete Investigation
Investigation Detail	S			✓ Contains Data	A Hide Investigation Details
Investigation Details					Create Encounter
Investigation ID: 223		State	us: OPEN	Investigator: 🗲	1
Disease Event 227 - Inf	luenza				
Disease	Etiologic Agent	Epi Markers	Authority / Clas (√ Primary Cla	ssification   Classif. Date assification, $\Delta$ Set by Case Def)	Site(s) Staging
Influenza	-	-	National /	Case - Person Under 2018 Aug	

The Investigation Summary screen displays.

2. Scroll down to the **Investigation Details** section and click on the **Investigation Details** hyperlink.

					ACT
Subject Name / Typ tap water / Water - de	e: rinking	Date of Deat -	h: Liaison Name (F - / -	irst, Last) / Role:	
					tigation
OPEN	Pe	nding	Investigator: -		
PHAC Date/Type: 2018 Aug 17 / Date	Eti Reported -	ologic Agent:	Authority/Classification: National / Case - Person Uno	ler Investigation / 2018 Aug 17	
				Merged Investig	ation No
				Add N	ew Dise
007 Influence	-				
<z -="" influenza<="" td=""><td></td><td></td><td></td><td></td><td> ∧ ⊢</td></z>					∧ ⊢
227 - Influenza	a				\$⊢
Disease Orig	ain: Living on	Reserve Most of	the Time:		\$⊦
Disease Orig rted Etiologic Agent	gin: Living on	Reserve Most of _ab Authority Result (√ Prima	the Time: γ / Classification   Classif. Date ary Classification, Δ Set by Ca	se Def)	Stagi
	tap water / Water - di Status: OPEN PHAC Date/Type: 2018 Aug 17 / Date I	tap water / Water - drinking Status: Dit OPEN Pe PHAC Date/Type: Eti 2018 Aug 17 / Date Reported -	tap water / Water - drinking - Status: Disposition: OPEN Pending PHAC Date/Type: Etiologic Agent: 2018 Aug 17 / Date Reported -	tap water / Water - drinking/- Status: Disposition: Investigator: OPEN Pending - PHAC Date/Type: Etiologic Agent: Authority/Classification: 2018 Aug 17 / Date Reported - National / Case - Person Unc	tap water / Water - drinking/-  Status: Disposition: Investigator:  OPEN Pending  PHAC Date/Type: Etiologic Agent: Authority/Classification:  2018 Aug 17 / Date Reported - National / Case - Person Under Investigation / 2018 Aug 17  Merged Investige  Add N



#### Disease Summary displays.

3. In the **Disease Summary** section, click **Update**.

Disease Ev	ent Details			0 🗏
				ACTIVE
Subject ID: 267	Subject Name / Type: tap water / Water - drinking	Date of Death: -	Liaison Name (First, Last) / Role: - / -	
			<b>☆</b> Invest	igation
Investigation ID: 223	Status: OPEN	Disposition: Pending	Investigator: -	
Disease: Influenza	PHAC Date/Type: 2018 Aug 17 / Date Reported	Etiologic Agent: -	Authority/Classification: National / Case - Person Under Investigation / 2018 Aug 17	
			Save	Cancel
Disease Event De	tails			
Disease Event De	tails			

Disease Event Details page displays.

4. Scroll to the **Disease Event History** section. Click the button beside the Classification to be updated and click **Update**.

Disease Event History		
* Disease: Influenza 💠		
Microorganism:		
Information Source:	)	
Site(s): Hold Ctrl and then click to select multiple item	IS.	
Available Sites:	Selected Sites(s):	
	Add >    < Remove	
Staging: 🗘		
*Investigation Classification		
* Authority: * Classification Date: 2018 / 08 / 17 yyyy mm dd	* Classification:	
	Add Classificatio	n Clear
Row Actions: Update Delete Set as Primar	Y	
Primary Authority	Classification Classification Date	
<ul> <li>✓ National</li> </ul>	Case - Person Under Investigation 2018 Aug 17	



5. In the pre-populated **Investigation Classification** section, click the **Classification** field drop-down to select "**Case - Not a Case**".

Auth	ority:	National 🛟	* Classification: Case - Not a C	Case 🛟
Clas	sification Date:	2018 / 08 / 11 yyyy mm dd	7 🔠	
				Apply Update Cle
low /	Actions: Upda	te Delete Set as Prin	nary	Apply Update Cle
ow /	Actions: Upda Primary	te Delete Set as Prin Authority	mary Classification	Classification Date

Save Reset Cancel

6. Click Apply Update.

Row	Actions: Update Dele	te Set as Primary		
	Primary	Authority	Classification	Classification Date
0	$\checkmark$	National	Case - Not a Case	2018 Aug 17
	1			

Save Reset Cancel

Investigation classification table updates.

7. Click Save.

				0 E
				ACTIVE
Subject ID: 267	Subject Name / Type: tap water / Water - drinking	Date of Death: -	Liaison Name (First, Last) / Role: - / -	
			*	Investigation
Investigation ID: 223	Status: OPEN	<b>Disposition:</b> Pending	Investigator: -	
Disease: Influenza	PHAC Date/Type: 2018 Aug 17 / Date Reported	Etiologic Agent:	Authority/Classification: National / Case - Not a Case / 2018 Aug 17	
estigation details succ	essfully saved.			

Page refreshes and confirmation message "Investigation details successfully saved' displays.

Search for the Contacts and update their Classification fields on their investigations to "Contact, Not a Contact".



8. With the **TE In Context**, go to the **Left-Hand Navigation** menu, select **Exposure Summary.** 

Recent Work			,,	,		, , , , , , , , , , , , , , , , , , , ,
✓ Search	Exposure S	ummary				() <u> </u>
Search Investigations						
Search Lab						ACTIVE
Search Exposures	Subject ID:	Subject Name / Type:	Date of Dea	ath Liaison Nam	ne (First Last) / Role	
Search Interventions	<u>267</u>	tap water / Water - drinking	-	- / -		
Search Clients						A
Search Non-Human Subjects	Investigation ID: 223	Status: OPEN	Disposition: Pending	Investigator:		➤ Investigation
<ul> <li>Investigation</li> </ul>	Disease:	PHAC Date/Type:	Etiologic Agent:	Authority/Classificatio	n:	
Subject Summary	Influenza	2018 Aug 17 / Date Reported	-	National / Case - Persor	Under Investigation	/ 2018 Aug 17
Investigation Summary	Transmission Eve	nt Summary			<b>☆</b> Hide	Transmission Event Summarv
Investigation Details	1 Transmission Events	Found 1 Contrasts Found				
▶ Lab	Row Actions: Copy				Quick Entry C	reate Transmission Event
Encounter Details	TEID	Transmission Start 🔶 Tra	nsmission End 🔍	Location Name 🔍 Set	ting Type 🔻 Out	break ID 🔻 Invalid
Signs & Symptoms						
Complications	. ⊕ 16	2018 Aug 15 -			-	-
Outcomes						
Basic Assessment						
Medical History	Acquisition Event	Summary			A Hic	le Acquisition Event Summarv
ADT Record		our and a second s				,
Incubation & Communicability	Row Actions: Search	ch and Link TE Copy			Quick Entry	Create Acquisition Event
Treatment & Interventions		Source         Acquisition           Name         Start	Acquisition End	T Location ▼ Setting Name Type	Exposed	Likely Tinvalid Source
▶ Medications						
Exposure Summary						
View Client Imms profile						

Exposure Summary screen displays.

9. Click on the relevant **TE ID** hyperlink.



# Maintain Transmission Event Details

							ACTIVE
Subject ID: 267	Subject Name / Ty tap water / Water -	<b>pe:</b> drinking	Date of De -	eath:	Liaison Name (First, Last) / Ro - / -	ole:	
						A Investig	ation
Investigation ID: 223	Status: OPEN		Disposition Pending	on: Ir -	nvestigator:		
Disease: Influenza	PHAC Date/Typ 2018 Aug 17 / D	e: ate Reported	Etiologic -	Agent: A N	uthority/Classification: lational / Case - Not a Case / 20	18 Aug 17	
The transmission event b	eing viewed is invalid.						
						Save Reset	Cancel
*Required field							
Transmission Even	nt Details		Contains Dat	a	¥s	how Transmission E	vent Details
Source			Contains Dat	а		¥s	how Source
Source Details			✓ Contains Dat	а		😸 Show So	urce Details
Transmission Even	nt Investigator Infe	ormation			Show Transmissio	on Event Investigator	Information
Acquisition Events	6					A Hide Acquis	ition Events
Row Actions: Unlin	k						
Acquisition Event ID	Investigation	Subject	Acquisition Start	Acquisition End	<u>Classification</u>	Disposition	Invalid
<b>o</b> 31	222	Test2, Lauren	2018 Aug 15	-	Influenza   Case - Person Under Investigation	Investigation in progress	$\checkmark$

The Maintain Transmission Event Details screen displays.

- 10. Scroll to Acquisition Event section.
- 11. Click on the relevant **Investigation ID** hyperlink of a Contact.



# **Investigation Summary**

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							ACTIVE
Client	Name(Last, First Middle	)/Gender:	Health Card No:		Date of Birth / Age:		
<u>212</u>	Test2, Lauren / Female		-		1978 Feb 01 / 40 year	s	
Phone Number: -(-)	Jurisdiction Info: Department of Health and Scotia Health Authority	d Wellness,Nova	Additional ID Typ Additional ID: Provincial health s provider identifier	e / service / -			
Investigation 222	ID: Status: OPEN	C	Disposition: Investigation in progress	Investigator: -		<u> ≳ Inve</u>	estigation
Disease: Influenza	PHAC Date/Typ 2018 Aug 17 / Da	e: E ate Reported -	tiologic Agent:	Authority/Class National / Case	sification: - Person Under Investig	gation / 2018 Aug	g 17
Report:	\$	Launch	Reason	for deletion of inv	restigation	Delete Investigat	ion Cancel
Investigation	Details			🗸 Conta	ins Data	≿ Hide Inve	estigation Details
Investigation De	tails					Crea	ate Encounter
Investigation ID	): 222	\$	Status: OPEN	In	vestigator: 🔁		
Disease Event	226 - Influenza						
Disease	Etiologic Agen	t Epi Markers	Authority / Classif (√ Primary Classi	ication   Classif. Ι ification, Δ Set by	Date / Case Def)	Site(s)	Staging
Influenza	-	-	✓ National / Ca Investigation	ase - Person Und	er 2018 Aug 17	-	-
L	1	1				1	

The Investigation Summary screen of the Contact displays.

12. Scroll down to the **Investigation Details** section and click on the **Investigation Details** hyperlink.



# **Disease Summary**

									ACTIVE
Client	Name	(Last, First Middle)	/Gender:		Health Card No:		Date of Birth	/ Age:	
<u>212</u>	Test2,	Lauren / Female			-		1978 Feb 01	/ 40 years	
Phone Number: -(-)	Juriso Depar Scotia	<b>liction Info:</b> tment of Health and Health Authority	Wellness,Nova		Additional ID Typ Additional ID: Provincial health s provider identifier	e / ervice / -			
Investigation 222	ID:	Status: OPEN		Disposi Investiga	tion: ation in progress	Investigator: -			Ainvestigation
Disease: Influenza		PHAC Date/Type 2018 Aug 17 / Da	: te Reported	Etiologi -	c Agent:	Authority/Cla National / Cas	ssification: e - Person Unde	er Investigatio	on / 2018 Aug 17

				Mer	ged Investig	ation No(s):
Disease Summ	hary					
					Add N	ew Disease
Disease Ev	vent 226 - Influer	ıza				🗙 Hide
			_			
2018 Aug 17 / Date	• Type: Disease C te Reported	Origin: Living	on Reserv	ve Most of the Time:		
Disease	Etiologic Agent	Epi Markers	Lab	Authority / Classification   Classif. Date	Site(s)	Staging
			Result	( $\checkmark$ Primary Classification, $\Delta$ Set by Case Def)	0110(0)	Staging
Influenza	-	-	Result	(✓ Primary Classification, Δ Set by Case Def) ✓ National / Case - Person Under 2018 Aug 17 Investigation	-	-

The Disease Summary page displays.

13. In the **Disease Summary** section, click **Update**.

# **Disease Event Details**

					ACTIVE
Client	Name(Last, First Middle)/Gender:	Health Card No	:	Date of Birth / Age:	
212	Test2, Lauren / Female	-		1978 Feb 01 / 40 years	
Phone Number: -(-)	Jurisdiction Info: Department of Health and Wellness,N Scotia Health Authority	Additional ID Ty Additional ID: ova Provincial health provider identifie	<b>ype /</b> n service er / -		
Investigatio	n ID: Status:	Disposition:	Investigato	or:	▲Investigation
222	OPEN	Investigation in progress	-		
Disease: Influenza	PHAC Date/Type: 2018 Aug 17 / Date Reported	Etiologic Agent:	Authority/C National / C	Classification: Case - Person Under Investigation / 201	18 Aug 17

Disease Event Details page displays.

14. Scroll to the **Disease Event History** section. Click the button beside the Classification to be updated and click **Update**.

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Disease Event History				
* Disease:	Influenza 🛟			
Microorganism:	\$			
Information Source:	\$			
Site(s): Hold Ctrl and then c	lick to select multiple item	s.		
Available Sites:			Selected Sites(s):	
		Add >    < Remove		
Staging: 🛟				
*Investigation Classific	ation			
* Authority:	\$	* Classification:		
* Classification Date: 201	8 / 08 / 17	<b>#</b>		
				Add Classification Clear
Row Actions: Update	Delete Set as Primar	у		
Primary	Authority	Classification		Classification Date
•	National	Case - Person Under Investigation		2018 Aug 17
I				

15. In the pre-populated **Investigation Classification** section, click the **Classification** field drop-down to select "**Contact - Not a Contact**".

*Investigation Clas	sification		
* Authority: * Classification Date:	National \$	* Classification: Contact - Not a Contact	<b>\$</b>
	yyyy mm dd		
			Apply Update Clear
Row Actions: Upda	ate Delete Set as Primar	y_	
Primary	Authority	Classification	Classification Date
•	National	Case - Person Under Investigation	2018 Aug 17

16. Click Apply Update.



Save Reset Cancel

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ctions: Update Del	lete Set as Primary		
Primary	Authority	Classification	Classification Date
$\checkmark$	National	Contact - Not a Contact	2018 Aug 17
	Primary	Primary Authority √ National	Primary     Authority     Classification       ✓     National     Contact - Not a Contact

Investigation classification table updates.

#### 17. Click Save.

## **Disease Event Details**

				ACTIVE
Client	Name(Last, First Middle)/Gender:	Health Card No:	Date of Birth / Age:	
1D: 212	Test2, Lauren / Female	-	1978 Feb 01 / 40 years	
Phone Number: -(-)	Jurisdiction Info: Department of Health and Wellness,Nova Scotia Health Authority	Additional ID Type / Additional ID: Provincial health service provider identifier / -		
Investigatio	n ID: Status:	Disposition:	Investigator:	▲Investigation
222	OPEN	Investigation in progress	•	
Disease: Influenza	PHAC Date/Type: 2018 Aug 15 / Most Recent Exposure	Etiologic Agent: -	Authority/Classification: National / Contact - Not a Contact / 201	18 Aug 17
vestigation de	ails successfully saved.			

Page refreshes and confirmation message "Investigation details successfully saved' displays.

**Repeat** Steps 8 to 17 for each AE that needs to have their Classification updated.

**Note**: After saving the classification update, the User has the option of updating the Investigation Disposition and Closing the Investigation



# **10 COPY TRANSMISSION AND ACQUISITION EVENTS**

Copying a Transmission Event provides the User a quick way to document multiple Transmission Events for the same Subject and investigation. Each TE copy can have a unique Exposure Name, Location and list of Contacts.

Copying Acquisition Events provides the User a quick way to document multiple Acquisition Events for the same Subject and investigation. Each AE copy can have a unique Exposure Name and Location. An AE cannot be copied if it is linked to a TE.

# 10.1 Copy a Transmission Event

1. After setting a Client and Investigation in Context, navigate to the **Left-Hand Navigation** menu, select **Exposure Summary**.

	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEAL	TH INVENTO	RY	ADMIN	
Recent Work	<b>F</b>	0				,		~ =	_
✓ Search	Exposure	Summary						(?) 🖪	
Search Investigations									
Search Lab								ACTIVE	
Search Exposures	Client	Name(Last, First Middle	e)/Gender:	Health Card No		Date of Birth / Age:			
Search Interventions	ID: 211	Test1, Lauren / Female		-		1977 Aug 01 / 41 yea	irs		
Search Clients	Phone	Jurisdiction Info:		Additional ID Ty	rpe /				
Search Non-Human Subjects	Number: -(-)	Department of Health an	d Wellness,Nova	Additional ID: Provincial health	service				
<ul> <li>Investigation</li> </ul>		Scotia Health Authonity		provider identifie	r/-				
Subject Summary							<u>A In</u>	vestigation	
Investigation Summary	Investigation II 180	D: Status: OPEN	Disp	osition: stigation in progress	Investigator: -				
Investigation Details	Disease:	PHAC Date/Typ	e: Etiol	ogic Agent:	Authority/Classi	ification:			
Disease Summary	Measles	2018 Aug 09 / D	ate Reported -		National / Case -	Person Under Invest	igation / 2018 Au	ıg 09	
Recommendations	Transmission	Event Summary				<b>х</b> н	lide Transmissio	n Event Summary	
Investigation Information	2 Transmission Ev	ents Found, 3 Contacts	Found.						
Resp. Org / Investigator	Row Actions:	Сору				Quick Entry	Create Transi	mission Event	
Reporting Notifications	TEI	D 💙 Transmission S	tart 🔶 Transmiss	ion End 🛛 🔽 Loca	ition Name 🛛 💙 Se	etting Type 🛛 🔻	Outbreak ID	▼ Invalid	
External Sources									
Links & Attachments		2018 Aug 1	-	PSN	Hospital He	ealth care setting	-	-	
Transfer Requests	<ul> <li>⊕ 14</li> </ul>	2018 Aug 1	2018 Aug 1	Hosp	ital He	ealth care setting	-	-	
		-							
F Lau Encounter Details									
Signs & Symptoms	Acquisition Ev	ent Summary				\$	Hide Acquisition	n Event Summary	
Complications	0 Acquisition Even	ts Found.							
Outcomes	Row Actions:	Search and Link TE	Сору			Quick Entry	Create Acq	uisition Event	
Basic Assessment	AE TI	E Source T	Acquisition	Acquisition 🔽 L	ocation 🔻 Set	tting 🔻 Expose	d <b>Likely</b>	▼ Invalid	
Medical History		D <u>Name</u>	Start		ame <u>Typ</u>		Source		
ADT Record									
Incubation & Communicability		Copyrigl	nt © IBM Corporation 20	007, 2016. All Rights	Reserved   Contact	Us   Terms of Use			
Treatment & Interventions		Privacy Disclaimer:	Access to the System is Privacy Legislation apr	governed and restric	ted by organizational	l privacy and protection	on policies.		
▶ Medications			Bui	1d 3.0.4.0P9.201	80606-0258				
Exposure Summary			Bui	10 01011101 01 01201					
View Client Imme profile									

Exposure Summary screen displays.

- 2. Select the radio button for the Transmission Event to copy.
- 3. Click Copy.



## Maintain Transmission Event Details

Client	Name	e(Last, First Middle)/Gender:		Health Card No:		Date of Birth / Age:	
<u>211</u>	Test1	, Lauren / Female		-		1977 Aug 01 / 41 years	
Phone Number: (-)	Juris Depa Scotia	<b>diction Info:</b> rtment of Health and Wellness,No a Health Authority	ova	Additional ID Typ Additional ID: Provincial health s provider identifier	be / service / -		
Investigatio	on ID:	Status: OPEN	Dispo Inves	osition: tigation in progress	Investigat -	or:	▲Investigation
Disease: Measles		PHAC Date/Type: 2018 Aug 09 / Date Reported	Etiolo	ogic Agent:	Authority/ National / (	Classification: Case - Person Under Investigation	n / 2018 Aug 09

\*Required field

The system creates a copy of the selected event, and displays it on the **Transmission Event Details** screen.

- 4. Expand the Transmission Event Details section and Enter Exposure Name.
- 5. Scroll through the sections and make changes to the copied information as required.

noqui ou noiu			
Transmission E	vent Details		Hide Transmission Event Details
* Exposure Name	Copied Transmission	Transmission Eve	nt ID: -
Invalid:		Invalid Reason:	
Responsible Organizational	To specify an Organization first click on the 'Find specify, select it and click on 'Select' button. Then	button. Then search, or type the name of the Orga click 'Close' to close.	nization you wish to
ont.	Organization: Panorama Cloud > Province Wellness > [Nova Scotia Health Authority	of Nova Scotia > Department of Health and	Find Q
Transmitter Role:	\$		
Source	•	Contains Data	Show Source
Source Details	, v	Contains Data	Show Source Details
Transmission E	vent Investigator Information	≈	Show Transmission Event Investigator Information
Acquisition Eve	nts		Show Acquisition Events
Unknown/Anon	ymous Contacts		Show Unknown/Anonymous Contacts
Transmission E	vent Date/Time 🗸	Contains Data	Show Transmission Event Date/Time
Exposure Locat	ion 🗸	Contains Data	Show Exposure Location
Transmission E	vent Location Liaison Details	×	Show Transmission Event Location Liaison Details
Transmission E	vent Control Measures		Show Transmission Event Control Measures
			Save Clear Cancel

6. Click **Save** to save the copy.



# Maintain Transmission Event Details

								AC	TIVE
Client	Name(Last, First	st Middle)/Gender:		Health Card No:		Date of Birth / Age:			
<u>211</u>	Test1, Lauren / I	Female				1977 Aug 01 / 41 ye	ars		
Phone Number: -(-)	Jurisdiction Inf Department of H Scotia Health Au	<b>o:</b> lealth and Wellness,Nova uthority		Additional ID Typ Additional ID: Provincial health s provider identifier /	e / ervice				
Investigatio	n ID: Status: OPEN		<b>Disposi</b> Investiga	tion: ation in progress	Investigator: -			Investigation	
Disease: Measles	<b>PHAC I</b> 2018 Au	Date/Type: ug 09 / Date Reported	Etiologi -	ic Agent:	Authority/Cla National / Cas	ssification: e - Person Under Inves	tigation / 201	8 Aug 09	
Transmission ev	ent successfully sa	ved.							
							Save	Reset Ca	ancel
* Required field									
Transmissio	on Event Detail	S					☆ Hide Trans	mission Event	Details
* Exposure N Invalid:	lame:	Copied Transmission			Transmissio Invalid Reas	on Event ID: son:	17		

? 旦

Screen refreshes and confirmation message 'Transmission Event successfully saved' displays. A **Transmission Event ID** is assigned.

7. Click **Cancel** to return to the **Exposure Summary** screen.

Exp	osi	ire Si	ummary							? 🗉
										ACTIVE
Clie	ent	Name	(Last, First Middle)/Gende	r:	Health Care	d No:	Dat	e of Birth / Age	9:	
211		Test1,	Lauren / Female		-		197	7 Aug 01 / 41 y	ears	
Pho	ne	Juriso	liction Info:		Additional	ID Type /				
Num -(-)	iber:	Depar Scotia	tment of Health and Wellne Health Authority	ss,Nova	Provincial h	ID: ealth service ntifier / -				
									<u>∧ Inv</u>	estigation
<b>Inv</b> 180	estigat	tion ID:	Status: OPEN	Dispos Investig	ition: ation in progr	Investig ess -	ator:			
Dise Mea	ase: sles		PHAC Date/Type: 2018 Aug 09 / Date Repo	Etiolog orted -	ic Agent:	Authorit National	<b>y/Classific</b> / Case - Pe	ation: rson Under Inve	estigation / 2018 Au	<b>j</b> 09
Trans	smiss	ion Even	t Summary					\$	Hide Transmission	Event Summary
3 Trar	nsmissi	on Events F	Found. 3 Contacts Found.							
Row	Action	is: Copy	]					Quick Entry	Create Transm	ission Event
		TE ID 🔻	Transmission Start	Transmission	End 🔻	Location Name	Setti	ng Type	Outbreak ID	Invalid
0	Đ	<u>15</u>	2018 Aug 1	-	1	PSN Hospital	Healt	h care setting	-	-
0	Ð	<u>14</u>	2018 Aug 1	2018 Aug 1	1	Hospital	Healt	h care setting	-	-
0	æ	17	2018 Aug 1	-			Lingt	h care setting		-

The copied event displays in the table.



# **10.2 Copy an Acquisition Event**

1. After setting a Client and Investigation in Context, navigate to the **Left-Hand Navigation** menu, select **Exposure Summary**.

	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATI	ION FAMILY	HEALTH	INVENTORY	ADMIN	-
Recent Work ▼ Search	Exposure	Summary	,	,	,			0	
Search Investigations Search Lab								ACT	VE
Search Exposures Search Interventions	Client ID: 265	Name(Last, First Mic Sprout, Brussel / Male	idle)/Gender:	Health Card No:		Date o 1994 J	of Birth / Age: Jun 15 / 24 years		
Search Clients Search Non-Human Subjects	Number: -(-)	Eastern Zone,Antigon Health Office	ish Public	Provincial health se identifier / -	ervice provider				
<ul> <li>Investigation</li> </ul>								Investigation	
Subject Summary	Investigation	Status:		Disposition:	Investigate	or:			
Investigation Summary	ID: 217	OPEN		Pending	-				
<ul> <li>Investigation Details</li> </ul>	Disease:	PHAC Date/Typ	e:	Etiologic	Authority/	Classification	n:		
Disease Summary	Measles	2018 Aug 01 / M	lost Recent	Agent: Measles virus	National / C	Contact - Pers	on Under Investigation	on / 2018 Aug	
Recommendations	-	Exposure			15				
Investigation Information	I ransmission events	can't be created for the	e investigation in conte	ext since it has no a	ictive case disease	9.			
Resp. Org / Investigator	Transmission E	event Summary					Show Tr	ansmission Event Sum	mary
External Sources	Acquisition Eve	ent Summary					🗙 Hide	Acquisition Event Sum	mary
Links & Attachments	1 Acquisition Event	s Found.							
Transfer Requests	Row Actions: S	earch and Link TE	Сору				Quick Entry C	reate Acquisition Eve	nt
Close Investigation	AE TH	Source	Acquisition	Acquisition	Location •	Setting Typ	e 🔽 Exposed 🔽	Likely TInvali	<u>d</u>
▶ Lab		Name	Start	End	Mame			Source	
Encounter Details	o <u>27</u> -	-	2018 Aug 1	-	Hospital	Health care setting	-		
Signs & Symptoms									
Complications									
Outcomes									
Basic Assessment									
Medical History									
ADT Record		Copyria	ht © IBM Corporation	2007. 2016. All Rig	hts Reserved   C	ontact Us	Terms of Use		
Incubation & Communicability		Privacy Disclaimer:	Access to the System	is governed and re	estricted by organiz	zational priva	cy and protection poli	cies.	
Treatment & Interventions					20100606_0250	ioaiui momit	auon.		
Medications	l .		В	J.U.4.0P9.	20100000-0258				
Exposure Summary									

Exposure Summary screen displays.

- 2. Select the radio button for the Acquisition Event to copy.
- 3. Click **Copy**.



# Maintain Acquisition Event Details

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			ACTIVE
Client ID: 265	Name(Last, First Middle)/Gender: Sprout, Brussel / Male	Health Card No:	Date of Birth / Age: 1994 Jun 15 / 24 years
Phone	Jurisdiction Info:	Additional ID Type /	Additional ID:
Number: -(-)	Eastern Zone,Antigonish Public Health Office	Provincial health servidentifier / -	vice provider
			♠ Investigation
Investigation	Status:	Disposition:	Investigator:
217	OPEN	Pending	-
Disease:	PHAC Date/Type:	Etiologic Agent:	Authority/Classification:
Measles	2018 Aug 01 / Most Recent	Measles virus	National / Contact - Person Under Investigation / 2018 Aug

*Required field				
Acquisition Event				☆ Hide Acquisition Event
Acquisition Event ID	: -	Transmission Event ID: -		
* Exposure Name:	Acquisition Copy			
Invalid:		Invalid Reason:		
Acquirer Role:	\$			
Exposed:	\$			
Responsible Organizational Unit:	To specify an Organization on 'Select' button. Then cli	first click on the 'Find' button. Then search, or ck 'Close' to close.	type the name of the	Organization you wish to specify, select it and click

The system creates a copy of the selected event, and displays it on the **Acquisition Event Details** screen.

- 4. Enter Exposure Name.
- 5. Scroll through the sections and make changes to the copied information as required.
- 6. Click **Save** to save the copy.



# Maintain Acquisition Event Details

			ACTIVE
Client ID: 265	Name(Last, First Middle)/Gender: Sprout, Brussel / Male	Health Card No:	Date of Birth / Age: 1994 Jun 15 / 24 years
Phone Number:	Jurisdiction Info:	Additional ID Type /	Additional ID:
-(-)	Eastern Zone,Antigonish Public Health Office	Provincial health serv identifier / -	ice provider
			♠ Investigation
Investigation	Status:	Disposition:	Investigator:
217	OPEN	Pending	
Disease:	PHAC Date/Type:	Etiologic	Authority/Classification:
Measles	2018 Aug 01 / Most Recent Exposure	Measles virus	National / Contact - Person Under Investigation / 2018 Aug 15
equisition event su	uccessfully saved.		
			Save Reset Cancel
Required field			
Acquisition Ev	vent		☆ Hide Acquisition Even
Acquisition Ever	nt ID: 33 T	ransmission Event ID: -	
* Exposure Nam	e: Acquisition Copy		
las callals		avalid Peacon:	

Screen refreshes and confirmation message 'Transmission Event successfully saved' displays. An **Acquisition Event ID** assigned.

7. Click Cancel to return to the Exposure Summary screen.

-								
								ACTIV
Client ID: 265	Name(Last, First M Sprout, Brussel / Ma	iddle)/Gender: ale	Health Card No:		Date of Bir 1994 Jun 15	h / Age: 6 / 24 years		
Phone	Jurisdiction Info:		Additional ID Typ	e / Additional ID:				
Number: ·(-)	Eastern Zone,Antigo Health Office	onish Public	Provincial health s identifier / -	ervice provider				
Investigation	Statuo		Dispesition	Investigate			<u>∧ Inv</u>	<u>estigation</u>
ID:	Status:		Disposition:	Investigato	or:			
217	OPEN		Pending	-				
Disease:	PHAC Date/Ty	pe:	Etiologic Agent:	Authority/0	Classification:			
<b>Disease:</b> Measles	PHAC Date/Ty 2018 Aug 01 / I Exposure	r <b>pe:</b> Most Recent	Etiologic Agent: Measles virus	<b>Authority/0</b> National / 0 15	Classification:	nder Investi	gation / 2018 A	ug
Disease: Measles nsmission event	PHAC Date/Ty 2018 Aug 01 / 1 Exposure ts can't be created for th Event Summap/	r <b>pe:</b> Most Recent <mark>he investigation in</mark>	Etiologic Agent: Measles virus context since it has no a	Authority/C National / C 15 active case disease	Classification: contact - Person U	nder Investi	gation / 2018 A	ug
Disease: Measles Insmission event ansmission	PHAC Date/Ty 2018 Aug 01 / I Exposure ts can't be created for th Event Summary	pe: Most Recent he investigation in	Etiologic Agent: Measles virus	Authority/C National / C 15 active case disease	Classification: contact - Person U	nder Investi ¥Shov	gation / 2018 A	ug Event Summ
Disease: Measles nsmission event ansmission cquisition Ev	PHAC Date/Ty 2018 Aug 01 / 1 Exposure ts can't be created for th Event Summary vent Summary	r <b>pe:</b> Most Recent <mark>he investigation in</mark>	Etiologic Agent: Measles virus	Authority/( National / C 15 Inctive case disease	Classification: contact - Person U	nder Investi ¥Shov &⊦	gation / 2018 A w Transmission lide Acquisition	ug Event Summ Event Summ
Disease: Measles nsmission event ransmission cquisition Event Acquisition Event	PHAC Date/Ty 2018 Aug 01 / 1 Exposure ts can't be created for th Event Summary vent Summary nts Found.	r <b>pe:</b> Most Recent he investigation in	Etiologic Agent: Measles virus	Authority/( National / C 15 Inctive case disease	Classification: contact - Person U	nder Investi Shov ≳ H	gation / 2018 A w Transmission tide Acquisition	ug Event Summ Event Summ
Disease: Measles Insmission event ansmission equisition Event Acquisition Event ow Actions:	PHAC Date/Ty 2018 Aug 01 / 1 Exposure ts can't be created for th Event Summary vent Summary nts Found. Search and Link TE	rpe: Most Recent he investigation in	Etiologic Agent: Measles virus	Authority/( National / C 15	Classification: contact - Person U	nder Investig V Shov & F nick Entry	gation / 2018 A w Transmission lide Acquisition	ug Event Summ Event Summ ilsition Even
Disease: Measles Insmission event ansmission cquisition Event Acquisition Event insmission CQUISITION EVENT CQUISITION EVENT CQUI	PHAC Date/Ty 2018 Aug 01 / 1 Exposure ts can't be created for th Event Summary vent Summary nts Found. Search and Link TE TE D Source Name	rpe: Most Recent he investigation in Copy Acquisition Start	Etiologic Agent: Measles virus	Authority/C National / C 15 Active case disease Location Name	Classification: contact - Person U <u>Setting Type</u>	nder Investi	gation / 2018 A w Transmission lide Acquisition Create Acqu Likely Source	ug Event Summ Event Summ Iisition Even
Disease: Veasles Insmission event ansmission cquisition Event Acquisition Event (D) T 1 27 -	PHAC Date/Ty 2018 Aug 01 / 1 Exposure ts can't be created for th Event Summary vent Summary nts Found. Search and Link TE D Source D -	rpe: Most Recent he investigation in Copy Acquisition Start 2018 Aug 1	Etiologic Agent: Measles virus	Authority/( National / C 15 Inclive case disease Location Name Hospital	Classification: contact - Person U <u>Setting Type</u> Health care setting	ider Investi Shov	gation / 2018 A w Transmission tide Acquisition Create Acqu Likely Source -	ug Event Summ Event Summ iisition Even Invalid -


The copied event displays in the table.



## **11 VIEW OR UPDATE TE/AE DETAILS**

The following steps can be applied to both a Transmission and Acquisition Event. The Corresponding screenshots will display the steps using a Transmission Event.

1. After setting a Client and Investigation in Context, navigate to the **Left-Hand Navigation** menu, select **Exposure Summary**.

	WORK MG	MNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZA	TION FAMI	LY HEALTH	INVENTORY	A	OMIN	
Recent Work	Evnor		Summony		,						_
✓ Search	Expos	sure	Summary							(?)	=
Search Investigations											
Search Lab										ACTIVE	
Search Exposures	Client	Na	ame(Last, First Middle)	/Gender:	Health Car	d No:	Date of	Birth / Age:			
Search Interventions	ID:	То	sti Lauron / Fomalo				1077 Au	a 01 / 41 years			
Search Clients	Z11 Dhana	10			- A ddiffonal	ID Tune /	1977 Au	g 017 41 years			
Search Non-Human Subjects	Number: -(-)	De	epartment of Health and	Wellness,Nova	Additional Provincial h	ID: nealth service					
<ul> <li>Investigation</li> </ul>		30	oua riealur Autionty		provider ide	entiner / -					
Subject Summary									<u>∧</u> Inves	stigation	
Investigation Summary	Investig 180	ation ID:	Status: OPEN	Dis	oosition: stigation in prog	Investig ress -	gator:				
Investigation Details	Disease:		PHAC Date/Type	: Etio	logic Agent:	Author	ity/Classification	:			
▶ Lab	Measles		2018 Aug 09 / Da	te Reported -		Nationa	I / Case - Person	Under Investigat	ion / 2018 Aug	09	
Encounter Details	Transmis	sion E	vent Summary					Alide 👷	Transmission E	vent Summary	y
Signs & Symptoms	3 Transmis	sion Ever	nts Found, 3 Contacts Fo	ound							
Complications	Row Acti	ons: Co	ppy				G	uick Entry C	reate Transmi	ssion Event	1
Outcomes		TE ID	Transmission Sta	art 🔶 Transmiss	ion End 🔹	Location Name	Setting Ty	/pe 🔻 Ou	ıtbreak ID 🔻	Invalid	i.
Basic Assessment											
Medical History	0 🕀	<u>15</u>	2018 Aug 1	-		PSN Hospital	Health car	e setting -		-	11
ADT Record			<b>.</b>								
Incubation & Communicability	○ ⊕	<u>14</u>	2018 Aug 1	2018 Aug 1		Hospital	Health car	e setting -		-	
Treatment & Interventions		17	2018 Aug 1	-		PSN Hospital	Health car	e setting -		-	
Medications			·								1
Exposure Summary											

#### Exposure Summary screen displays.

2. Click the TE ID hyperlink or AE ID hyperlink.



### Maintain Transmission Event Details

Required field Transmission I * Exposure Nam Invalid: Responsible Organizational Unit: Transmitter Role Source	Event Details B: Measles exposure To specify an Organization first click on specify, select it and click on 'Select' but Organization: Panorama Cloud > F Wellness > [Nova Scotia Health A :	the 'Find' button. Then search, or on. Then click 'Close' to close. Province of Nova Scotia > Dep uthority]	Transmission Event ID: Invalid Reason: • type the name of the Organization you partment of Health and	Keset Cancer ∧ Hide Transmission Event Details 15 wish to wish to Show Source
Required field Transmission I * Exposure Nam Invalid: Responsible Organizational Unit: Transmitter Role	Event Details  E: Measles exposure  To specify an Organization first click on specify, select it and click on 'Select' butt  Organization: Panorama Cloud > F Wellness > [Nova Scotia Health A  :	the 'Find' button. Then search, o on. Then click 'Close' to close. Province of Nova Scotia > Dep uthority]	Transmission Event ID: Invalid Reason: - type the name of the Organization you wartment of Health and	A Hide Transmission Event Details
Required field <b>Transmission I</b> * Exposure Nam Invalid: Responsible Organizational Unit:	Event Details  B: Measles exposure  To specify an Organization first click on specify, select it and click on 'Select' butt  Organization: Panorama Cloud > F Weilness > [Nova Scotia Health A	the 'Find' button. Then search, or on. Then click 'Close' to close. Province of Nova Scotia > Dep uthority]	Transmission Event ID: Invalid Reason: • type the name of the Organization you partment of Health and	A Hide Transmission Event Details
Required field <b>Transmission I</b> * Exposure Nam Invalid: Responsible Organizational Unit:	Event Details  Measles exposure  To specify an Organization first click on specify, select it and click on 'Select' butt	the 'Find' button. Then search, or on. Then click 'Close' to close.	Transmission Event ID: Invalid Reason: • type the name of the Organization you	Aride Transmission Event Details 15 wish to
Required field Transmission I * Exposure Nam Invalid:	Event Details e: Measles exposure		Transmission Event ID: Invalid Reason:	Aride Transmission Event Details
Required field Transmission I * Exposure Nam	Event Details e: Measles exposure		Transmission Event ID:	A Hide Transmission Event Details
Required field Transmission I	Event Details			Alide Transmission Event Details
Required field				Save Reset Calicel
Disease: Measles	2018 Aug 09 / Date Reported	Etiologic Agent: -	National / Case - Person Under I	nvestigation / 2018 Aug 09
<u>180</u>	OPEN	Investigation in progress	-	
Investigation I	): Status:	Disposition:	Investigator:	<u> </u>
Phone Number: -(-)	Jurisdiction Info: Department of Health and Wellness,Nov Scotia Health Authority	Additional ID Typ Additional ID: a Provincial health provider identifier	pe / service /-	
211	Fest1, Lauren / Female	-	1977 Aug 01 / 4	1 years
ID: 211 Test	Name(Last, First Middle)/Gender:	Health Card No:	Date of Birth /	Age:
Client				
Client I				ACTIVE

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**Transmission Event Details** screen or **Acquisition Event Details** screen displays respectively.

- 3. **View** or **Update** each of the sections by clicking the **Show** hyperlink in each section to expand it and/or the **Hide** hyperlink to minimize it.
- 4. Click Save.



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## Maintain Transmission Event Details

				ACTIVE
Client ID: 211	Name(Last, First Middle)/Gender: Test1, Lauren / Female	Health Card No: -	Date of Birth / Age: 1977 Aug 01 / 41 years	
Phone Number: -(-)	Jurisdiction Info: Department of Health and Wellness,N Scotia Health Authority	Additional ID Type / Additional ID: provincial health service provider identifier / -		
			*	Investigation
Investigatio	n ID: Status: OPEN	Disposition: Inve Investigation in progress -	stigator:	
Disease: Measles	PHAC Date/Type: 2018 Aug 09 / Date Reported	Etiologic Agent: Auth	nority/Classification: onal / Case - Person Under Investigation / 2018	3 Aug 09
Transmission ev	ent successfully saved.			
			Save	Reset Cancel
*Required field				
Transmissio	on Event Details		<b>☆</b> Hide Transr	nission Event Details
* Exposure N Invalid:	ame: Copied Transmissio	I Tra	ansmission Event ID: 17 valid Reason:	

Screen refreshes and confirmation message 'Transmission Event successfully saved' displays.



## **12 LINK TRANSMISSION TO AN ACQUISITION EVENT**

Once a TE is created for an Investigation, Contacts are linked to the TE by searching for or creating the Contact Investigations in the system, and linking the investigation to the TE. A TE can have multiple linked Contact or Case Investigations

**Note**: if multiple clients are linked to a transmission event, consideration should be given to creating an Outbreak.

Once a Contact is linked to the TE, an AE is automatically created for the Contact Investigation. A TE can be linked to zero, one or more AEs, which allows a Source Investigation to be linked to zero or more Contact Investigations. An AE may or may not be linked to a TE since the source of the disease may not be known. An AE may not be directly linked to another AE, but they could be indirectly linked via a common TE, which allows Contact Investigations to be linked indirectly with other Contact Investigations.

1. After setting a Client and Investigation with an AE in Context in the Investigations Module, navigate to the **Left-Hand Navigation** menu, select **Exposure Summary**.

	WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATIO	ON FAMILY	HEALTH	INVENTORY	ADMIN	
Recent Work	_	0		,	,				
✓ Search	Exposure	Summary						(?)	B
Search Investigations									
Search Lab								ACTIV	E
Search Exposures	Client ID:	Name(Last, First Mid	dle)/Gender:	Health Card No:		Date of	Birth / Age:		
Search Interventions	265	Sprout, Brussel / Male		-		1994 Ju	un 15 / 24 years		
Search Clients	Phone Number:	Jurisdiction Info:	4	Additional ID Type	/ Additional ID:				
Search Non-Human Subjects	-(-)	Eastern Zone,Antigoni Health Office	sh Public i	Provincial health sei identifier / -	rvice provider				
<ul> <li>Investigation</li> </ul>									
Subject Summary	Investigation	Status:		Disposition:	Investigato	or:		<u>A involugation</u>	
Investigation Summary	ID: 217	OPEN		Pending					
Investigation Details	Disease:	PHAC Date/Type	ə:	Etiologic	Authority/0	Classification	:		
Disease Summary	Measles	2018 Aug 01 / M	ost Recent	Agent: Measles virus	National / C	Contact - Perso	on Under Investigation	n / 2018 Aug	
Recommendations		Exposure			15			•	
Investigation Information	Transmission events	can't be created for the	investigation in conte	xt since it has no ac	tive case disease	9.			
Resp. Org / Investigator	Transmission E	Event Summary					😽 Show Trai	nsmission Event Summ	ary
Reporting Notifications	A						A 184- A		
External Sources	Acquisition Eve	ent Summary					S Hide A	cquisition Event Summ	ary
Links & Attachments	1 Acquisition Event	s Found.							
Transfer Requests	Now Actions.	earch and Link IE			a an Allan 🛛 🔍	O-Hinn Tur		ate Acquisition Even	
Close Investigation		Name	Start	End	Name	Setting Type		iource	
▶ Lab	27 -	-	2018 Aug 1 -		Hospital	Health care		-	
Encounter Details			20107.03		ioopila.	setting			
Signs & Symptoms									
Complications									
Duicomes									
Basic Assessment									
ADT Record		Copyrigh	nt © IBM Corporation 2	2007, 2016. All Righ	nts Reserved   C	ontact Us   1	ferms of Use		
Communicability		Privacy Disclaimer:	Access to the System	is governed and res	stricted by organiz	ational privac	y and protection polici	ies.	
Treatment & Interventions			rivacy Legislation ap	ild 2 0 4 000		ieaim mormat	uon.		
Medications			Bu	11a 3.U.4.OP9.2	20180808-0258				
Exposure Summary									

Exposure Summary screen displays.



2. From the **Acquisition Event Summary** section, select the **radio button** for an acquisition that does not have a TE associated to it.



3. Click **Search** and **Link TE**.

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	Aposules			(?)
Client ID:	Name(I ast First Middle)/Gender	Health Card No:	Date of Birth / Age	ACTIVE
265	Sprout, Brussel / Male	-	1994 Jun 15 / 24 years	
Phone	Jurisdiction Info:	Additional ID Type /	Additional ID:	
-(-)	Eastern Zone,Antigonish Public Health Office	Provincial health servidentifier / -	ice provider	
Investigation	Status	Disposition	Investigator:	vestigation
ID:	OREN.	Banding	investigator.	
217	OFEN DIA C	Fending		
Disease:	PHAC Date/Type:	Agent:	Authority/Classification:	
Measles	2018 Aug 01 / Most Recent Exposure	Measles virus	National / Contact - Person Under Investigation / 2018 15	Aug
xposure Sea	rch		🗙 Hide	Exposure Search
Nildcard characte natching phonetic	ers % (multiple letters) and _ (single letters cally. Wildcard-only searches will be treate	s) can be used on any text ed as blank searches.	field - except on Client Number and on First and Last Name	e when
Exposure ID:			Exposure Name:	
nclude Invalid E	events:			
Mode of Transmi	ission:	\$		
Fransmission St	art From: /		: ADT	

#### Search Exposures screen displays.

4. Enter filter criteria and click **Search**.



Exposure Setting (Health care setting \$) Exposure Setting:	\$								
Exposure Hospital Location Name:									
Source Investigator Information: Workgroup: 🔁 User: 🜲									
Source Investigation Information: Last Name: First Name:									
Source Investigation ID:									
Unknown Contact: Name / Description: Contact Info:									
	Search Retrieve Clear Cancel Advanced Search								
Search Retrieve Clear Cancel Advanced Search									
Exposure Preview	Show Exposure Preview								
Exposure Preview Exposure Search Results	Show Exposure Preview ☆ Hide Exposure Search Results								
Exposure Preview Exposure Search Results Row Actions: Preview Link to Acquisition Event Generate Map	¥ Show Exposure Preview ★ Hide Exposure Search Results New Search								
Exposure Preview Exposure Search Results Row Actions: Preview Link to Acquisition Event Generate Map Source Exposure Transmission Location Name	Show Exposure Preview  Hide Exposure Search Results								
Exposure Preview Exposure Search Results Row Actions: Preview Link to Acquisition Event Generate Map Source Exposure Transmission Location Name Test1, Lauren 14-Measles exposure 2018 Aug 1 2018 Aug 1 Hospital	Show Exposure Preview         Hide Exposure Search Results         New Search         Setting       Investigation       Outbreak       Invalid         -       180       -       -								

Exposure Search Results section displays results.

5. Select an exposure from the **Exposure Search Results** section.

Ex	posure Se	arch R	esult	s						🛠 Hic	le Exposure Se	arch Results
Ro	Row Actions: Preview Link to Acquisition Event						Generate Map				New Search	
	Source		posur Name	<u>e</u> 🔻	Transmission Start	-	Transmission End	Location Name	<u>Setting</u> ▼	Investigation ▼	Outbreak	Invalid
	Test1, Lauren	<u>14</u> ex	Measl	es	2018 Aug 1		2018 Aug 1	Hospital	-	180	-	-
То	otal: 1	ŀ	€ <b>€</b> F	Page 1 of 1						Ju	ump to page:	2

6. Click Link to Acquisition Event.



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### **Exposure Summary**

				ACTIV
Client ID: 265	Name(Last, First Middle)/Gender: Sprout, Brussel / Male	Health Card No: -	Date of Birth / Age: 1994 Jun 15 / 24 years	
Phone	Jurisdiction Info:	Additional ID Type	Additional ID:	
Number: -(-)	Eastern Zone,Antigonish Public Health Office	Provincial health ser identifier / -	vice provider	
				Investigation
Investigation	Status:	Disposition:	Investigator:	
217	OPEN	Pending	-	
Disease:	PHAC Date/Type:	Etiologic	Authority/Classification:	
Measles	2018 Aug 01 / Most Recent Exposure	Agent: Measles virus	National / Contact - Person Under Investigatior 15	n / 2018 Aug
uisition event su	uccessfully linked to transmission event.			

Screen refreshes and confirmation message 'Acquisition Event successfully linked to the Transmission Event' displays.

ŀ	٨cqui	isition I	Event S	ummary					🗙 Hide	Acquisition Eve	nt Summary
2	2 Acquisition Events Found.										
	Row Actions: Search and Link TE Copy Quick Entry Create Acquisition Event										
		AE ID	≣ ₽	Source Name	Acquisition Start	Acquisition  End	Location Name	Setting Type 🔻	<u>Exposed</u> ▼	Likely Source	<u>Invalid</u>
	0	27	<u>14</u>	Test1, Lauren	2018 Aug 1	-	Hospital	Health care setting	-	-	-
		~~									

A TE ID is now displayed for the Acquisition Event in the table.



# 13 BASIC CONTACT TRACING FLOW #2 - USING CLIENT FROM CLIENT/CONTACT LIST TO CREATE INVESTIGATION



This process is designed to illustrate the exposure process in Panorama when Public Health have received a longer list of Workers/Employees/Students/Travelers. Above is a high level overview of the process (see below for the detailed steps).

A cohort set has been created or uploaded.

- 1. Using the Client from the Client List, LHN > select Search Clients for the Client.
- 2. Then, with the Client set In Context navigate to LHN > Investigation > select Subject Summary.
- 3. Click Create an Investigation.

reate Inves	tigation					0
						ACTIVE
Client ID:	Name(First, Middle .ast)/Gender:	Emirate ID Number:	Date of Birth / Ag	je:		
319	Allad, Bendar / Male		1995 Jan 03 / 22 y	rears		
Phone . Number:	Jurisdiction Info:	Additional ID Type / Additiona ID:	I			
-(-) 5	Sample Jurisdictional Organization	Mother's Emirates ID / -				
fitional details (e.g., di equired field	sease, diagnosis, attached documen	ts) may be entered after the investi	gation has been created.	Submit	Clear	Cancel
litional details (e.g., di equired field isease Summary	sease, diagnosis, attached documen	ts) may be entered after the investi	gation has been created.	Submit	Clear	Cancel ≳ Hi
fitional details (e.g., di equired field Isease Summary Disease:	sease, diagnosis, attached documen Scarlet Fever	ts) may be entered after the invest	gation has been created.	Submit	Clear	Cancel ≳ Hi
ditional details (e.g., di tequired field Isease Summary Disease: Authority:	sease, diagnosis, attached documen Scarlet Fever Dubai Health Authority (M)	ts) may be entered after the investi	gation has been created.	Submit	Clear	Cancel ≎ Hi
ditional details (e.g., di tequired field <b>isease Summary</b> Disease: Authority: Classification Date:	Scarlet Fever Dubai Health Authority (M) 2017 / 06 / 11 yyyy mm dd	ts) may be entered after the investi	gation has been created.	Submit	Clear	Cancel
ditional details (e.g., di lequired field <b>Isease Summary</b> Disease: Authority: Classification Date: Microorganism:	Scarlet Fever Dubai Health Authority (M) 2017 / 06 / 11 yyyy mm dd	ts) may be entered after the investi Case -	gation has been created.	Submit	Clear	Cancel

4. After Submitting Investigation, the Investigation Summary screen displays.



- 5. With the **Client and Investigation In Context**, go to **LHN** > select **Exposure Summary.**
- 6. Click Create Transmission Event button to create a Transmission Event.
- 7. The Maintain Transmission Event screen displays.
- 8. Enter Exposure Name.
- 9. Enter Exposure Start date.
- 10. Click Save. Message displays, 'Transmission event successfully saved'.
- 11. Once saved, expand the Known Contact Search section.
- 12. Select Cohort Result Set button and click Search.
- 13. Search for the Cohort Result Set that was created using the Client Upload feature.

**Tip**: Users can search by Cohort Result name using % (wildcard character) after entering one or more first letters of the name or enter in the Cohort ID.

- 14. Select Cohort Result set. Click Update. Select Cohort. Click Select and Return.
- 15. The Cohort Result Set Name is displayed within Search Known Contacts section.
- 16. Click **Add**.



Known Contact Searc	h	☆ Hide Known Contact Search
Cohort Result Set:	14 - DTaP #2	
O Client:	-	
O Non-Human Subject:	-	
Investigation:	-	
		Search Add
Acquisition Events		☆ Hide Acquisition Events
Row Actions: Unlink		
Acquisition Event ID	Investigation Subject Acquisiti D Start	on <u>Acquisition</u> <u>Classification</u> <u>Disposition</u> Invalid <u>End</u>
Total All Contacts: 0		
Unknown/Anonymous	s Contacts	Show Unknown/Anonymous Contacts
Transmission Event D	Pate/Time	☆ Hide Transmission Event Date/Time
<u>Disease</u> ▲	Earliest Possible  Communicability From  Earliest Probab	e Latest Probable Communicability To Latest Possible Communicability To
Hepatitis B > Acute type B viral hepatit		
* Transmission Start:	2017 / 06 / 10 🔛 : yyyy mm dd hh mm	AST Estimated
Transmission End:	yyyy mm dd hh mm	:AST Estimated
Exposure Duration: -		
Exposure Location	✓ Contains D	ata Show Exposure Location
Transmission Event L	ocation Liaison Details	Show Transmission Event Location Liaison Details
Transmission Event C	control Measures	Show Transmission Event Control Measures
		Save Reset Cancel

- 17. The Create Investigation screen displays.
- 18. The **Disease Summary** section displays pre-populated with the Disease; Causative Agent; Classification; Classification Date selected for the Investigation that was created for the first client. The information entered for the investigation will be created for all the Clients within the Cohort Result Set. This information only needs to be entered once.



WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN	
Create Inv	vestigation					0	
							-11/17
						ACT	
Client ID:	Name(First, Midd Last)/Gender:	le	Emirate ID Number:	Date	e of Birth / Age:		
319	Allad, Bendar / Ma	le	-	199	5 Jan 03 / 22 years		
Phone Number:	Jurisdiction Info:		Additional ID Type / A ID:	Additional			
-(-)	Sample Jurisdiction	nal Organization	Mother's Emirates ID /	-			
					Su	bmit Clear Can	cel
Additional details (e	a disease diagnosis	attached document	s) may be entered after t	he investigation has be	en created.		
*Required field	s.g., disease, diagnosis,		s) may be entered after t	ne mesugator nas be	en createu.		
i toquiroù nolu							
Disease Summ	n <b>ary</b>					*	Hide
* Disease:	Scarlet Fev	er		٢			
* Authority:	Dubai Heal	h Authority (M)	Classification:	Case - Not a Case	0		
* Classification I	Date: 2017 /	06 / 11					
	yyyy n	ım dd					
Microorganism:							
Information Sou	rce: Clinical lu						
	Cirrical Ju						
Investigation I	nformation					\$	Hide
Priority:	B - Medium						
* Disposition:	Investigation In-Progres	is 🗘					
Responsible C	Organization / Inves	tigator				×	Hide
* Responsible C	Drganization : Sampl	e Jurisdictional Oroa					
To specify an C	Preanization first click on	he 'Find' hutton Then	search or type the name of	f the Organization you w	ish to specify select it o	nd click on 'Select' butto	n
Then click 'Clo	se' to close.	ne i ma batton. I hen	search, or type the hume of	, the Organization you w	ish to specify, select it a	ma chek on Beleer Dullo	
(						Find	0

- 19. Select a **Disposition**. (Disposition of the Investigation Notification Issued)
- 20. In the **Responsible Organization/Investigator** section, select a **Responsible Organization** or use the Find component.
- 21. Select a Responsible Organization Workgroup.
- 22. Modify Responsible Organization Date, as required.
- 23. Select an **Investigator Organization** (for the majority of cases, enter the same value as the Responsible Organization.
- 24. Select an **Investigator Workgroup** (for the majority of cases, enter the same value as the Responsible Organization Workgroup).
- 25. Modify Assigned Date as required.
- 26. In the **Reporting Notification** section, select a **Reporting Source** (This is how and when public health found out about this case.): Provider, Location (i.e. notification is received via a lab), or Other (i.e. notification is received via a GP) by selecting the corresponding radio button. If Other is selected, enter details in the text field.



- 27. Select Type of Reporting Source.
- 28. Enter **Report Date (Received).** This is the date when public health received the notification.
- 29. Click Submit.
- 30. The Create Investigations from Cohort Step 1 of 2 screen redisplays.

WORK MGMNT INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HE	ALTH INVEN	FORY ADMI	N		
Create Investigations		? E						
Cohort ID: Cohort Na 29 DTaP #2	me:	e: Encounter Group(s): Immunization		Client List Nam DTaP #2 / 14	ne/ ID:			
*Required field					Create Investigation	Cancel		
Create Investigations from Cohort - Step 1 of 2								
* Conort Results Set: * Investigation Encounter Group:	D IaP #2 (14)	Disease Investigation,	excluding TB a	and STI ᅌ				
* New Investigations to Outbreak Grou	Investigation C	3						
New Investigation Group Description:	Investigaton C							
					Create Investigation	s Cancel		

31. Click **Create Investigations**. The screen redisplays with a message confirming that investigations have been created for the clients in the result set "i.e. 5 investigation(s) created. 5 acquisition event(s) have been added to the transmission event."

WORK MGMNT	INVESTIGATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN		
Create Inv		0						
Cohort ID: 29	Cohort Na DTaP #2	me: E	Encounter Group(s): mmunization	Clie DTa	ent List Name/ ID: aP #2 / 14			
9 investigation IDs s	successfully created fro	m 9 Client IDs.						
*Required field Create Investigations from Cohort - Step 1 of 2								
* Cohort Results	Set:	DTaP #2 (14)						
* Investigation Er	* Investigation Encounter Group: Communicable Disease Investigation, excluding TB and STI							
* Add investigations to Outbreak Group? <ul> <li>No</li> <li>Yes</li> </ul>								
* New Investigati	on Group Name:	Investigation C						
New Investigation	Group Description:	Investigaton C						



A Hide Known Contact Search

Known Contact Search

O Cohort Result Set: -

-

-

O Client:

O Non-Human Subject: -

Investigation:

Acquisition Events

Search Add

A Hide Acquisition Events

Row Actions: Unlink									
	Acquisition Event ID	Investigation ID	Subject	Acquisition Start	Acquisition End	Classification	Disposition 🔻	Invalid	
0	113	<u>571</u>	Bendtner, Lars	2017 Jun 10	-	Hepatitis B > Acute type B viral hepatitis   Contact - Person Under Investigation	Investigation In-Progress	-	
0	111	<u>569</u>	Firth, Alexa	2017 Jun 10	-	Hepatitis B > Acute type B viral hepatitis   Contact - Person Under Investigation	Investigation In-Progress	-	
0	115	<u>573</u>	gigulaa, reddyt	2017 Jun 10	-	Hepatitis B > Acute type B viral hepatitis   Contact - Person Under Investigation	Investigation In-Progress	-	
0	116	<u>574</u>	Jenkins, Kenny	2017 Jun 10	-	Hepatitis B > Acute type B viral hepatitis   Contact - Person Under Investigation	Investigation In-Progress	-	
0	114	<u>572</u>	Red, White	2017 Jun 10	-	Hepatitis B > Acute type B viral hepatitis   Contact - Person Under Investigation	Investigation In-Progress	-	
0	112	<u>570</u>	Smith, Dale	2017 Jun 10	-	Hepatitis B > Acute type B viral hepatitis   Contact - Person Under Investigation	Investigation In-Progress	-	
0	117	<u>575</u>	Smith, John	2017 Jun 10	-	Hepatitis B > Acute type B viral hepatitis   Contact - Person Under Investigation	Investigation In-Progress	-	
0	119	<u>577</u>	Smithers, Dale	2017 Jun 10	-	Hepatitis B > Acute type B viral hepatitis   Contact - Person Under Investigation	Investigation In-Progress	-	
0	118	<u>576</u>	trt, guy	2017 Jun 10	-	Hepatitis B > Acute type B viral hepatitis   Contact - Person Under Investigation	Investigation In-Progress	-	