ANNOUNCEMENT

- Register for the Monthly Disease Surveillance Trainings:
  1. Log-on or Request log-on ID/password: https://tiny.army.mil/r/zB8A/CME

- Confirm attendance:
  - Please enter your name/service into the chat box to the left or email the Navy DRSi helpdesk at ndrs@nmcphec.med.navy.mil
  - You will receive a confirmation email within the next 48 hours with your attendance record
  - If you do not receive this email, please contact us at above email address
Case Finding – Identifying Cases For Reportable Medical Events
Asha Riegodedios, Staff Epidemiologist
Navy and Marine Corps Public Health Center
26 March 2013
Outline

- Background
- Definition and Importance of Case Finding
- Case Finding Activities
  - Know your MTF: clinics, providers, lab and resources available
  - CHCS
  - ESSENCE
  - Case Finding Records
- Resources
- Questions/Contacts
Background

- Service, DOD, civilian state and federal regulations for Reporting
- Expectation that Medical Providers report to local Preventive Medicine (PM)
- Local PM reports the case in DRSi or AFRESS
- Reality => local PM must seek out potentially reportable cases
Case Finding – Definition and Importance

- CF = the activities involved in actively seeking out potentially reportable events
- Limitations of provider reporting
  - Many providers, high turnover, constant need for education
  - May not be aware of the case if labs came back positive and no follow-up visit was scheduled by the patient
  - May not be aware that the condition is reportable
- Studies show you may miss up to 80% of your cases if you don’t employ additional activities
  - No awareness = no follow-up, no contact tracing, no control measures put into place
Case Finding Activities

- Each MTF is different
  - Available resources
  - Available software/systems to help query CHCS
  - KNOW YOUR MTF capabilities: PM and Population Health and Infection Control
- Educate providers, regularly on reporting requirements
  - Teach during lunch and learn
  - Post the list of reportable events in each clinic in a visible location
  - Call your providers when you find a case they didn’t report
Case Finding Activities

- MTF clinics/laboratory
  - Educate and post list of reportable events
  - Set up a PM notification process
- CHCS
  - CHCS is a tool to track clinical services
  - Coded in a legacy programming language
  - Data can be retrieved
Case Finding Activities

- CHCS
  - Some Air Force MTFs have ICDB (Integrated Clinical Database)
  - Other tools: Camp Lejeune, NMC San Diego, Tripler
  - AHLTA queries
- CHCS Ad Hocs
  - Predefined canned reports produced by CHCS
  - Use “quick keys” to access
  - Some are only available at your MTF, some are available at all MTFs
NAME: GS PREVENTIVE MEDICINE  
MENU TEXT: Preventive Medicine Menu  
TYPE: menu  

<table>
<thead>
<tr>
<th>ITEM</th>
<th>SYNONYM</th>
</tr>
</thead>
<tbody>
<tr>
<td>DG ADMISSION BY DIAGNOSIS RPT</td>
<td>ADR</td>
</tr>
<tr>
<td>GS STD CHLAMYDIA STUDY</td>
<td>STDC</td>
</tr>
<tr>
<td>GS EHRlichiosis Study</td>
<td>EHR</td>
</tr>
<tr>
<td>PS PRINT SPOOLED</td>
<td>PSR</td>
</tr>
<tr>
<td>LRSPMILOG</td>
<td>MLOG</td>
</tr>
<tr>
<td>LR INFCONTROL</td>
<td>INFC</td>
</tr>
<tr>
<td>GS CORPSMAN ORDER ENTRY</td>
<td>COR</td>
</tr>
<tr>
<td>GS ICD-9 INQUIRY</td>
<td>ICD9</td>
</tr>
<tr>
<td>GS INFECTIOUS DISEASE BY ICD</td>
<td>INIC</td>
</tr>
<tr>
<td>DG DRG OUTPUT MENU</td>
<td>DRG</td>
</tr>
<tr>
<td>GS JCAHO REGISTER ALPHA</td>
<td>JER</td>
</tr>
</tbody>
</table>

Available only at this MTF

Available to all MTFs
CHCS Ad Hocs

- Some available at all MTFs
  - The MHS maintains a library of available coded reports
  - Infection Control Report (prints out list of microbiology cultures that grew specific organisms)
- Some available at only specific MTFs
  - Local CHCS mumps programmers have developed reports for their MTFs (i.e. for a special ehrlichiosis study)
- Get to know your local Systems/IT support helpdesk
  - They are helpful in creating and updating ad hocs
  - Provide them with the list of Reportable Events
  - Smaller clinics may need to refer to parent MTF support
Latest LOG-IN DATE/TIME: 31 Dec 1999// (31 Dec 1999)
  Within LOG-IN DATE/TIME, Sort by: CLINICAL CHEMISTRY// CLINICAL CHEMISTRY (multiple)
  CLINICAL CHEMISTRY SUB-FIELD: RESULT// RESULT (multiple)
  RESULT SUB-FIELD: TEST'@ ;2// TEST
Select TEST: RAPID PLASMA REAGIN// RAPID PLASMA REAGIN RAPID PLASMA REAGIN
Select another TEST: STOOL CULTURE// STOOL CULTURE STOOL CULTURE
Select another TEST: FTA// FTA FTA
Select another TEST: CHLAMYDIA DNA PROBE// CHLAMYDIA DNA PROBE
CHLAMYDIA DNA PROBE
Select another TEST:
  Within TEST, Sort by: CLINICAL CHEMISTRY// CLINICAL CHEMISTRY (multiple)
  CLINICAL CHEMISTRY SUB-FIELD: RESULT// RESULT (multiple)
  RESULT SUB-FIELD: RESULT['P'//
  Within RESULT['P', Sort by: CLINICAL CHEMISTRY// CLINICAL CHEMISTRY (multiple)
  CLINICAL CHEMISTRY SUB-FIELD: REQUESTING LOCATION// REQUESTING LOCATION
<table>
<thead>
<tr>
<th>Encounter Date</th>
<th>PIN</th>
<th>Age</th>
<th>ICD</th>
<th>ICD Description</th>
<th>Clinic Type</th>
<th>MEPRS</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/Feb/2010</td>
<td>013D4D3D10</td>
<td>24</td>
<td>070.54</td>
<td>CHRNC HPT C WO HPAT COMA</td>
<td>Other</td>
<td>BBAA</td>
</tr>
<tr>
<td>09/Feb/2010</td>
<td>020D68E1C2</td>
<td>64</td>
<td>097.1</td>
<td>LATENT SYPHILIS NOS</td>
<td>Primary Care</td>
<td>BGAL</td>
</tr>
<tr>
<td>09/Feb/2010</td>
<td>0060F871B9</td>
<td>35</td>
<td>099.53</td>
<td>OTH VD CHLM TRCH LOWR GU</td>
<td>Other</td>
<td>BCBA</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>213CEB2EE5</td>
<td>21</td>
<td>037</td>
<td>TETANUS</td>
<td>Primary Care</td>
<td>BHAJ</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>09B0FC4EE8</td>
<td>33</td>
<td>070.30</td>
<td>HPT B ACTE WO CM WO DLTA</td>
<td>Primary Care</td>
<td>BHAJ</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>083CAC8974</td>
<td>31</td>
<td>070.30</td>
<td>HPT B ACTE WO CM WO DLTA</td>
<td>Primary Care</td>
<td>BGAA</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>1B58A9A960</td>
<td>52</td>
<td>070.30</td>
<td>HPT B ACTE WO CM WO DLTA</td>
<td>Other</td>
<td>BAGA</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>0E0C398A82</td>
<td>56</td>
<td>070.32</td>
<td>HPT B CHRN WO CM WO DLTA</td>
<td>Primary Care</td>
<td>BHAA</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>0351070CC5</td>
<td>38</td>
<td>070.32</td>
<td>HPT B CHRN WO CM WO DLTA</td>
<td>Other</td>
<td>BAGA</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>19A9ED1E43</td>
<td>37</td>
<td>070.54</td>
<td>CHRNC HPT C WO HPAT COMA</td>
<td>Primary Care</td>
<td>BJAI</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>100FB568C7</td>
<td>26</td>
<td>070.54</td>
<td>CHRNC HPT C WO HPAT COMA</td>
<td>Other</td>
<td>BAGA</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>05EC05C899</td>
<td>37</td>
<td>084.0</td>
<td>FALCIPARUM MALARIA</td>
<td>Other</td>
<td>BAQA</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>2091D41C31</td>
<td>18</td>
<td>097.1</td>
<td>LATENT SYPHILIS NOS</td>
<td>Primary Care</td>
<td>BHAI</td>
</tr>
<tr>
<td>08/Feb/2010</td>
<td>10F5CF29B0</td>
<td>20</td>
<td>098.15</td>
<td>GC CERVICITIS (ACUTE)</td>
<td>Primary Care</td>
<td>BGAV</td>
</tr>
</tbody>
</table>
Case Finding Activities - ESSENCE

- Help ensure providers are reporting to you
- Focus on events that are likely truly reportable events rather than miscodes
- Often Miscoded:
  - Pulmonary Tuberculosis
  - Vaccine Preventable Diseases: anthrax, smallpox, measles
  - Rabies
Case Finding Activities - ESSENCE

- May be useful for the following events, particularly if you see multiple visits for the same patient over a week/month period
- Know the trends in your population, are these often miscoded? Pay attention to age, clinic type, PatCat, clustering trends, lab test, etc

- Malaria
- Varicella
- Measles
- Mumps
- Leishmaniasis
- Leprosy
- Leptospirosis
- Dengue Fever
- Q Fever
- Meningococcal Meningitis
Case Finding Activities – Case Finding Module

- NMCPHC receives lab results data from your MTF CHCS every day
- Methods have been established to flag lab results for 53 events that may be reportable
  - Case Finding or CF records
- Army/Navy DRSi users: these are fed into DRSi for you to be able to access via the Case Finding module
- Air Force users: fed to USAFSAM who monitors them and notifies local PM if appropriate
Case Finding Module

Welcome: Tracey Thomas

Instructions: To perform a MER Recorder task, click on the appropriate task link presented below.

- Enter/Edit Medical Event Report(s) by SSN
- Enter/Edit Medical Event Report(s) by Reporting Unit
- Review Deleted Medical Event Report(s)
- Review Case-Findings by Reporting Unit
- Manage STI Cases(s)
- Manage Sponsor/FMP Profile(s)
- Enter/Edit Outbreak Report(s)
- Enter/Edit VAERS Case(s)

- Click on “Review Case-Findings by Reporting Unit”
Case Finding Module

Instructions: Below is a list of potential Medical Events that may be reportable in your AOR over the past 14 days. This list can be used as a guide to assist in local case finding and response efforts, but is not meant to replace these activities.

Please only show me records from the past 14 days (30 days maximum).

Show me: * View All

Show me records for the following UIC(s):

00232

Get Case-Finding(s)

List of Potentially Reportable Medical Event(s):

<table>
<thead>
<tr>
<th>Sponsor SSN</th>
<th>FMP</th>
<th>Potential Diagnosis</th>
<th>Date of Event</th>
<th>MTF</th>
<th>Classification</th>
<th>Classification Criteria</th>
<th>Create MER?</th>
<th>Delete Case?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>01 -</td>
<td>Dependent child of</td>
<td>1/31/2010</td>
<td></td>
<td>Positive</td>
<td>positive stool culture</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sponsor</td>
<td>Shigellllosis</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>01 -</td>
<td>Dependent child of</td>
<td>1/26/2010</td>
<td></td>
<td>Positive</td>
<td>Positive lab test in a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sponsor</td>
<td>Chlamydia</td>
<td></td>
<td></td>
<td></td>
<td>genital specimen</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>30 -</td>
<td>Spouse of Sponsor</td>
<td>1/26/2010</td>
<td></td>
<td>Positive</td>
<td>Positive lab test in a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>genital specimen</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Case Finding Activities – Case Finding Module

- CF records are classified as
  - Suspect = a Medical Event Report may be required
  - Positive = a Medical Event Report likely is required
  - THIS IS NOT AN RME CLASSIFICATION, a Suspect CF record doesn’t mean it is a suspect RME case
  - Depends on the lab test result
- Records are 2-3 days old by the time you see them in the CF Module in DRSi
- Doesn’t include events that do not rely on laboratory testing (i.e. heat injury)
Case Finding Activities

- There are many different methods for finding cases.
- Each has its own value and limitations.
- Have a process in place that maximizes your time in finding true reportable events.
  - Minimize the time you spend tracking down events that turn out to not be reportable.
Resources

- Armed Forces Reportable Events Guide
  - (Note: AF will continue to use 2009 Guidelines til AFRESS updated Summer 2013)

- Printable One-Page List of Reportable Events
  - Army: Email the Disease Epidemiology Program at Disease.epidemiology@amedd.army.mil
  - Air Force: Not Available
Questions

- **Army**: USAPHC – Disease Epidemiology Program
  Aberdeen Proving Ground – MD
  Comm: (410) 436-7605  DSN: 584-7605
  Disease.epidemiology@amedd.army.mil

- **Navy**: **Contact your cognizant NEPMU**
  **NEPMU2**: COMM: (757) 950-6600; DSN: (312) 377-6600
  Email: NEPMU2NorfolkThreatAssessment@med.navy.mil
  **NEPMU5**: COMM: (619) 556-7070; DSN (312) 526-7070
  Email: ThreatAssessment@med.navy.mil
  **NEPMU6**: COMM: (808) 471-0237; DSN: (315) 471-0237
  Email: NEPMU6ThreatAssessment@med.navy.mil

- **Air Force**: **Contact your MAJCOM PH or USAFSAM/PHR**
  USAFSAM / PHR / Epidemiology Consult Service
  Wright-Patterson AFB, Ohio
  Comm: (937) 938-3207  DSN: 798-3207
  episervices@wpafb.af.mil