• Register for the Epi-tech Trainings:
  • Log-on or Request log-on ID/password: https://tiny.army.mil/r/zB8A/CME
  • Register for Epi-Tech Surveillance Training: https://tiny.army.mil/r/7laAB/EpiTechFY16

• Please enter your name/service and e-mail into the chat box to the left or email the disease epidemiology program at: usarmy.apg.medcom-aphc.mbx.disease-epidemiologyprogram13@mail.mil

• You will receive a confirmation email within 1 week with your attendance record.

• Please mute your phones and DO NOT place us on hold. Press *6 to mute/unmute your phone.
Case Finding for Reportable Medical Events

Kelly Gibson, MPH
ORISE Epidemiologist
Army Public Health Center
Objectives

- Identify ways, methods and resources to find potential reportable events
- Understand how to implement case finding processes and methods
- Describe strengths and limitations to case finding methods
What is Case Finding?

• Case finding – The strategy of surveying a population to find the sick persons that are the foci of infection; an essential early step in the eradication of any disease

• Case finding is the active surveillance; however, it can also be used in the context of improving passive surveillance systems

• When performing case finding, it is important to cast a wide net because there are more cases that have yet to identified

• Goal is to determine the true size and geographic extent of the problem
• Usually more cases than are being reported; the limitation to passive surveillance systems (i.e., DRSi) are that diseases are often underreported
• Identifies exposure risk—assists investigator in acquiring information from an appropriate representative sample
• Refines the case definition as more information is gathered
• Fully defines the exposed population for purposes of developing control measures
• Reported cases may not be representative of all cases (Example)
Number of cases you **think** you have

Number of cases you **ACTUALLY** have
Limitations of reporting

- Many providers, high turnover, constant need for education
- Providers may not be aware that condition is reportable

Army MTFs can request a copy of RME posters by contacting APHC
Navy MTFs can request posters/brochures from their NEPMUs
AF MTFs can download a list of RMEs from USAFSAM/PHR webpage at https://gumbo2.area52.afnoapps.usaf.mil/epi-consult/reportableevents/ under General Information

A significant amount of cases can be missed if additional activities are NOT employed
- No awareness= no follow-up, no contact tracing, no control measures put into place
Surveillance types

• Active surveillance (ex. Case Finding for RMEs)
  – Regularly contacting health care providers to seek information about health conditions

• Passive surveillance (ex. DRSi)
  – A system by which a health jurisdiction receives reports submitted from hospitals, clinics, public health units or other sources
  – Relatively inexpensive strategy to cover large areas and provides critical information for monitoring a community’s health
Case Definition

What is a case definition and what do they do?

- A case definition is the method by which public health professionals define who is included as a case in the surveillance of public health conditions (i.e. reportable medical events) or in an outbreak investigation.
- Case definitions help decide whether an individual should be classified as ill or non-ill in respect to the RME or outbreak by setting objective criteria.
- In addition, case definitions help determine outbreak associated cases vs. normal background cases.
• How is a case definition developed?
  – A case definition has the following characteristics: **person**, **place**, and **time**.

  • **Person** criteria may include age, gender, ethnicity, clinical characteristics, and laboratory tests

  • **Place** criteria will usually include a geographical entity such as a town, state, or country but may be as small as an institution, a school class, a military unit, or a barrack

  • **Time** criteria may include all cases of a disease identified from, January 1, 2016 to March 1, 2016 (note: case definitions for passive surveillance may lack time criteria)
• When identifying cases, you should use as many sources as you can:
  – Health care facilities
    • Physicians’ offices, clinics, hospitals, and laboratories
    • Reports of disease to Public Health Services or PM Departments (passive surveillance)
    • Call or visit locations (active surveillance)
  – Local public health resources such as the health department
  – Tech tools (AHLTA/CHCS/ESSENCE/DRSi/DigitalReports)
  – Public Health officials may decided to alert the public directly, usually through the local media during outbreaks
Case Finding in DRSi for Reportable Medical Events

• Laboratory reports are entered in the system and appear in this module
  – They are currently not entered as MERS in the DRSi system
• On the first tab, select ‘Review Case-Findings by Reporting Unit’
How to Find Cases

- Select the Time Period, Case Status and Reporting Unit
- Click ‘Get Case-Findings’
How to Find Cases

- Click ‘Create MER’ if the case needs to be entered in the system.
- If the case is not an actual case, click ‘Delete Case’
How to Find Cases

- If you click ‘Create MER,’ the MER entry screen will appear.
- Enter the case in the same way you would any other MER.
How to Find Cases

• If prompted, you may need to register the sponsor prior to entering the case.

• Complete the Sponsor Profile Page, and click ‘Submit’
How to Find Cases

- Once all information is entered, click ‘Submit’
- The message “Medical Event successfully saved” will appear.
• Additionally you can see the status of all Case Finding records from your facility.

• To do this, click on ‘Summary Reports’ of the Summary Reports tab.
• Select the Case Finding Status report, and select the Reporting Unit you wish to view data for.
  
  – Next, select the year and month you wish to view, and click ‘Submit.’
Case Finding Status

- The number of records, how many have been turned in to a MER, number deleted, number already in DRSi, number expired and total number ready for review will generate.
  - For an excel output of this screen, click the green x.
• Case finding should be conducted with all communicable diseases in that we need to determine if cases have spread beyond what is being reported.

• Case finding can be done as part of active surveillance or it can be done to improve completeness of passive surveillance systems.

• Using the case finding module within DRSi can help MTFs improve both completeness of reportable medical event reporting and timeliness of reporting.

• Improved case finding allows preventive medicine/public health personnel to determine the true size and geographic extent of the problem.
• Army: APHC – Disease Epidemiology Program
  Aberdeen Proving Ground – MD
  Comm: (410) 436-7605   DSN: 584-7605
  usarmy.apg.medcom-aphc.mbx.disease-epidemiologyprogram13@mail.mil

• Navy: Contact your cognizant NEPMU
  NEPMU2: Comm: (757) 950-6600; DSN: (312) 377-6600
  usn.hampton-roads.navhospporsva.list.nepmu2norfolk-threatassess@mail.mil

  NEPMU5: Comm: (619) 556-7070; DSN (312) 526-7070
  usn.san-diego.navenpvntmedufive.list.nepmu5-health-surveillance@mail.mil

  NEPMU6: Comm: (808) 471-0237; DSN: (315) 471-0237
  usn.jbphh.navenpvntmedusixhi.list.nepmu6@mail.mil

  NEPMU7: Comm (int): 011-34-956-82-2230 (local): 727-2230;
  DSN: 94-314-727-2230   NEPMU7@eu.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
  usafsam.phrepiservic@us.af.mil