



Zika Virus Disease Update for EHR Vendors, other Health Information Technology Developers, Public Health, and Clinical Healthcare Partners

Public Health - EHR Vendors Collaboration Initiative

February 17, 2016

CDC EHR Meaningful Use webpage-Public Health – EHR Vendors Collaboration Initiative

URL: <http://www.cdc.gov/ehrmeaningfuluse/public-health-ehr-vendors-collaboration-initiative.html>

The screenshot shows a web browser window displaying the CDC website. The address bar shows the URL: <http://www.cdc.gov/ehrmeaningfuluse/public-health-ehr-vendors-collat>. The page features the CDC logo and tagline "Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People™". A search bar and a "CDC A-Z INDEX" dropdown are visible. The main content area is titled "Meaningful Use" and includes a sidebar with a navigation menu. The menu items are: "Meaningful Use", "Introduction", "Calendar", "Joint PH Forum & CDC Nationwide", "Connect with Others", "CDC Meaningful Use ListServ", "Meaningful Use Community", "Public Health – EHR Vendors Collaboration Initiative", "Joint Public Health Forum & CDC Nationwide", "Meaningful Use (MU) Public Health (PH) Reporting Requirements Task Force", "ELR Task Force", and "Jurisdiction Meaningful Use Websites". The main content area features a banner image with a word cloud containing terms like "EHR", "incentive", "payment", "hospitals", "Medicaid", "eligibility", "measures", "clinical", "period", "rule", "section", "year", "EP's", "cost", "video", "MS", "late", "measure", "aningful", "mation", "reporting", "quality", "intent", "States", "hospital", "objective", "final", "use", "proposed", "percent", "electronic", "commenters", "data", "CAH", "MA", "program", "rule", "section", "year", "EP's", "cost", "video", "MS", "late", "measure", "aningful", "mation", "reporting", "quality", "intent", "States", "hospital", "objective", "final", "use", "proposed", "percent", "electronic", "commenters", "data", "CAH", "MA", "program". Below the banner is the title "Public Health – EHR Vendors Collaboration Initiative" and social media icons for Facebook, Twitter, and a plus sign. The "Community Profile" section describes the initiative's focus on meeting Stage 1 and 2 Meaningful Use public health objectives. The "Meeting Materials and Schedule" section includes a "Meeting Schedule" link.

Meaningful Use

Meaningful Use

Introduction

Calendar

Joint PH Forum & CDC Nationwide

Connect with Others

CDC Meaningful Use ListServ

Meaningful Use Community

Public Health – EHR Vendors Collaboration Initiative

Joint Public Health Forum & CDC Nationwide

Meaningful Use (MU) Public Health (PH) Reporting Requirements Task Force

ELR Task Force

Jurisdiction Meaningful Use Websites

Public Health – EHR Vendors Collaboration Initiative

Community Profile

The Centers for Disease Control & Prevention in collaboration with the Office of the National Coordinator for Health IT (ONC) lead the Public Health (PH) - Electronic Health Records (EHR) Vendors Collaboration Initiative. The initial focus of this initiative is on meeting Stage 1 and 2 Meaningful Use public health objectives. Public Health Practitioners and EHR Vendors from across the nation are participating in this initiative.

If you are interested in joining this initiative, please follow the instructions provided below to register for these monthly webinars. If you want to submit an issue/question, please send an email to meaningfuluse@cdc.gov and include "Public Health - EHR Vendor Collaboration Initiative" in the subject line

Meeting Materials and Schedule

Meeting Schedule



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™



CDC A-Z INDEX ▾

Diseases & Conditions ▾

Healthy Living ▾

Travelers' Health ▾

Emergency Preparedness ▾

More CDC Topics ▾

The banner features a stylized globe on the left with the Americas highlighted in a darker shade of blue. Below the globe is a detailed illustration of a mosquito. To the right of the globe, the words "ZIKA RESPONSE" are written in large, bold, teal capital letters. Below this, the text "Information about the Virus & Current Updates" is written in a smaller, dark grey font.

ZIKA RESPONSE

Information about the Virus & Current Updates

ZIKA Alert – GoLive Wednesday, February 17th

Pregnant woman with history of travel to an area with ongoing Zika virus transmission
<http://wwwnc.cdc.gov/travel/notices/>

Test for Zika virus infection

Positive or inconclusive for Zika virus infection

Consider serial fetal ultrasounds
Consider amniocentesis for Zika virus testing

Negative for Zika virus infection

Fetal ultrasound to detect microcephaly or intracranial calcifications

Microcephaly or intracranial calcifications present

Retest pregnant woman for Zika virus infection
Consider amniocentesis for Zika virus testing

Microcephaly or intracranial calcifications *not* present

Routine prenatal care

February 5th, 2016

Update Interim Guidance:
Testing Algorithm,
modification of existing
Ebola workflow?

Pregnant woman with
history of travel to an area
with ongoing Zika virus
transmission

Currently, all six travel
locations are Level 2:
Practice Enhanced
Precautions (yellow)

Investigation of primary
points of entry:

Inpatient: EC and FBC
Outpatient: PCP, FM, IM,
UMCPS, OB (8 locations),
Combest (FQHC), SH

New build assessment and modifications needed to existing Infectious Disease powerforms

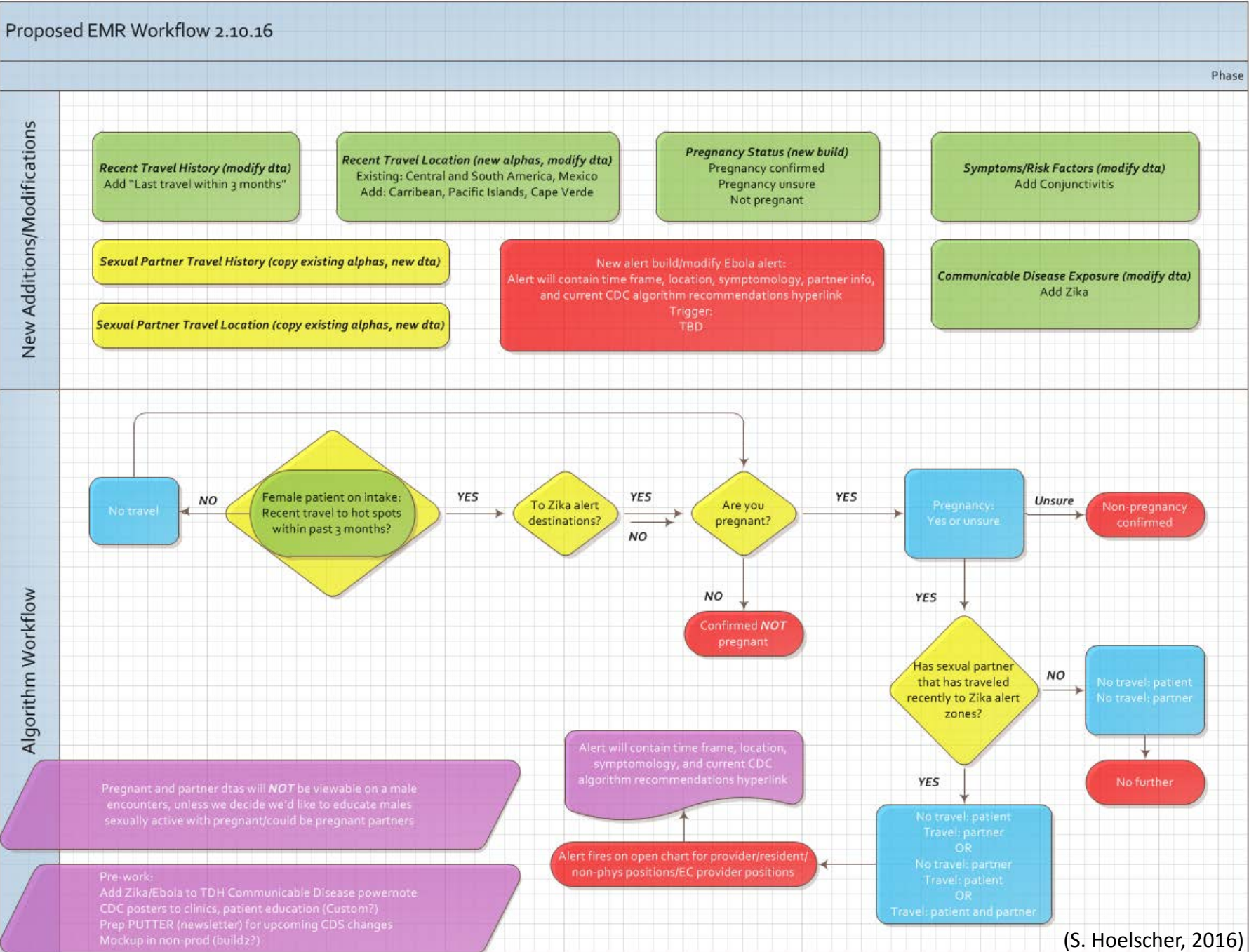
- *Inpatient
- *Ambulatory

Trigger for alert: Demo
Future considerations:
Lab results
C/R OB order set

Incorporated sexual partner information into alert

- Alert contents:
- *on open chart
 - *provider positions only
 - *female patient only (7-70yrs)
 - *current encounter
 - *24hours with options

Included CDC hyperlink



PowerForm mockup –

Build:

- *Pregnant dta dithered on males patients and patients outside age reference range
- *Will not fire alert on male/reference range pts
- *Zika exposure selection will “kill” alert

Approval needs:

FYI to CDS	2.11.16
FYI to U&S	2.16.16
TTP Nurse Mgmt	2.12.16

Education needs:

- *Inpatient and ambulatory nursing staff
- *Providers: concierge and PUTTER
- *Lab education
- *Final demo (Lab, OB High Risk, UMCPS, ID, TTP IC, UMC IC, UMC Nurse Education, TTP Nurse Mgmt...) scheduled 2.16.16

Symptoms/Risk Factors/Infectious Disease Screen																																																																																																											
Recent Travel History <input checked="" type="radio"/> No recent travel <input type="radio"/> Last travel within 7 days <input type="radio"/> Last travel within 14 days <input type="radio"/> Last travel within 21 days <input type="radio"/> Last travel within 30 days <input type="radio"/> Last travel within 3 months	Recent Travel Location <input type="checkbox"/> Africa <input type="checkbox"/> Canada <input checked="" type="checkbox"/> Cape Verde <input checked="" type="checkbox"/> Caribbean <input checked="" type="checkbox"/> Central America <input type="checkbox"/> China <input type="checkbox"/> Indonesia <input checked="" type="checkbox"/> Mexico <input type="checkbox"/> Middle East <input checked="" type="checkbox"/> Pacific Islands <input type="checkbox"/> Russia <input checked="" type="checkbox"/> South America <input type="checkbox"/> United States <input type="checkbox"/> Western Europe <input type="checkbox"/> West Africa <input type="checkbox"/> Other:	Exposure to Tuberculosis <input type="radio"/> Yes <input type="radio"/> No <i>For new or worsening cough, provide the patient with a mask. Please consider the need to consult with the Infectious Disease Practitioner for risk factors and symptoms of concern in the context of other history and assessment findings.</i>																																																																																																									
Communicable Disease Exposure <table border="1"><thead><tr><th></th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>Chickenpox</td><td></td><td></td></tr><tr><td>Chlamydia</td><td></td><td></td></tr><tr><td>CMV</td><td></td><td></td></tr><tr><td>Ebola</td><td></td><td></td></tr><tr><td>Gonorrhea</td><td></td><td></td></tr><tr><td>Group B Strep</td><td></td><td></td></tr><tr><td>HIV</td><td></td><td></td></tr><tr><td>Hepatitis A</td><td></td><td></td></tr><tr><td>Hepatitis B</td><td></td><td></td></tr><tr><td>Hepatitis C</td><td></td><td></td></tr><tr><td>Herpes Simplex</td><td></td><td></td></tr><tr><td>Measles</td><td></td><td></td></tr><tr><td>Mumps</td><td></td><td></td></tr><tr><td>Syphilis</td><td></td><td></td></tr><tr><td>Zika</td><td></td><td></td></tr><tr><td>Other</td><td></td><td></td></tr></tbody></table>		Yes	No	Chickenpox			Chlamydia			CMV			Ebola			Gonorrhea			Group B Strep			HIV			Hepatitis A			Hepatitis B			Hepatitis C			Herpes Simplex			Measles			Mumps			Syphilis			Zika			Other			Symptoms/Risk Factors <table border="1"><thead><tr><th></th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>Abdominal Pain</td><td></td><td></td></tr><tr><td>Chills</td><td></td><td></td></tr><tr><td>Conjunctivitis</td><td></td><td></td></tr><tr><td>Diarrhea</td><td></td><td></td></tr><tr><td>Fever</td><td></td><td></td></tr><tr><td>Headache</td><td></td><td></td></tr><tr><td>History of Seizures</td><td></td><td></td></tr><tr><td>Illness With Generalized Rash</td><td></td><td></td></tr><tr><td>Muscle Pain</td><td></td><td></td></tr><tr><td>New or Worsening Cough</td><td></td><td></td></tr><tr><td>Rash/Viral Illness Since Last Menstrual Period</td><td></td><td></td></tr><tr><td>Recent Exposure to Communicable Disease</td><td></td><td></td></tr><tr><td>Runny or Stuffy Nose</td><td></td><td></td></tr><tr><td>Shortness of Breath</td><td></td><td></td></tr><tr><td>Sore Throat</td><td></td><td></td></tr><tr><td>Unexplained Hemorrhage</td><td></td><td></td></tr><tr><td>Vomiting</td><td></td><td></td></tr></tbody></table>		Yes	No	Abdominal Pain			Chills			Conjunctivitis			Diarrhea			Fever			Headache			History of Seizures			Illness With Generalized Rash			Muscle Pain			New or Worsening Cough			Rash/Viral Illness Since Last Menstrual Period			Recent Exposure to Communicable Disease			Runny or Stuffy Nose			Shortness of Breath			Sore Throat			Unexplained Hemorrhage			Vomiting			Patients suspected of Zika exposure do NOT require extra isolation Zika symptoms are assessed as being with 2 WEEKS after return from affected travel location Select YES for "ZIKA" in the Communicable Disease Exposure field ONLY if the patient is pregnant and already receiving testing and treatment for Zika
	Yes	No																																																																																																									
Chickenpox																																																																																																											
Chlamydia																																																																																																											
CMV																																																																																																											
Ebola																																																																																																											
Gonorrhea																																																																																																											
Group B Strep																																																																																																											
HIV																																																																																																											
Hepatitis A																																																																																																											
Hepatitis B																																																																																																											
Hepatitis C																																																																																																											
Herpes Simplex																																																																																																											
Measles																																																																																																											
Mumps																																																																																																											
Syphilis																																																																																																											
Zika																																																																																																											
Other																																																																																																											
	Yes	No																																																																																																									
Abdominal Pain																																																																																																											
Chills																																																																																																											
Conjunctivitis																																																																																																											
Diarrhea																																																																																																											
Fever																																																																																																											
Headache																																																																																																											
History of Seizures																																																																																																											
Illness With Generalized Rash																																																																																																											
Muscle Pain																																																																																																											
New or Worsening Cough																																																																																																											
Rash/Viral Illness Since Last Menstrual Period																																																																																																											
Recent Exposure to Communicable Disease																																																																																																											
Runny or Stuffy Nose																																																																																																											
Shortness of Breath																																																																																																											
Sore Throat																																																																																																											
Unexplained Hemorrhage																																																																																																											
Vomiting																																																																																																											
Pregnancy Status <input type="radio"/> Pregnant <input type="radio"/> Patient denies <input type="radio"/> Unsure <input type="radio"/> N/A	Sexual Partner Travel History <input type="radio"/> No recent travel <input type="radio"/> Last travel within 7 days <input type="radio"/> Last travel within 14 days <input type="radio"/> Last travel within 21 days <input type="radio"/> Last travel within 30 days <input checked="" type="radio"/> Last travel within 3 months	Sexual Partner Travel Location <input type="checkbox"/> Africa <input type="checkbox"/> Canada <input type="checkbox"/> Cape Verde <input type="checkbox"/> Caribbean <input type="checkbox"/> Central America <input type="checkbox"/> China <input type="checkbox"/> Indonesia <input type="checkbox"/> Mexico <input type="checkbox"/> Middle East <input type="checkbox"/> Pacific Islands <input type="checkbox"/> Russia <input type="checkbox"/> South America <input type="checkbox"/> United States <input type="checkbox"/> Western Europe <input type="checkbox"/> West Africa																																																																																																									



Zika Alert

This alert has fired because your patient may be pregnant, and either the patient or their sexual partner has recently traveled to a location at risk for exposure to the Zika virus.

Your patient reports her pregnancy status as **Pregnant**.

Patient reports Last travel within **7 days**.

Patient reports travel to **Cape Verde**.

The patient reported having the following symptoms: **Conjunctivitis**

CDC recommendations suggest starting with Zika serum testing and follow up with OB for possible ultrasound studies when potential exposure of a pregnant patient has been identified.

Please click "Guidelines" button below to access the CDC Zika Pregnancy website for current recommendations.

Guidelines

OK

Alert Design

Notification to provider positions that their patient has somehow qualified for the alert to fire.

Alert informs provider HOW the patient qualified.

Alert fires on "open chart", same encounter as intake for 24 hours

Nursing will not see alert, but will use modified intake form

Gentle assistance with CDC current recommendations

Hyperlink to current CDC Zika Pregnancy Guidelines



Zika Virus Disease Case Investigation Form

Arboviral Diseases Branch

Lab – Microbiology

Proposed workflow
as of 2.5.16

Manual order form
Tiger top delivered
to lab (Virology)

Lab will send to
state, who will
divide sample to
state and CDC

Results will be
received
electronically in
provider inbox and
under “Misc Send
out”

FOR ARBOVIRAL DISEASE BRANCH USE ONLY

CDC R-number _____

ZIKVID: _____

Reporting Jurisdiction

Person completing form: _____ Phone number: _____ State: _____

Demographic Information

State ID number _____

Age: _____ ☐ Years ☐ Months

Sex: ☐ Male ☐ Female

Patient Initials: _____

Pregnant: ☐ Yes ☐ No

If yes, gestational week at illness onset: _____

Travel History

Dates of travel: _____

Country(s) visited: _____

Vaccination History