BNI, HPI, HZI, NFELTP, RKI, SAP

SORMAS-N INJECTS

DAILY DATA FOR EXERCISE DISEASE

Copyright © 2015 BNI, HPI, HZI, NFELTP, RKI, SAP

Licensed under the Apache License, Version 2.0 (the "License"); you may not use this file except in compliance with the License. You may obtain a copy of the License at http://www.apache.org/licenses/LICENSE-2.0. Unless required by applicable law or agreed to in writing, software distributed under the License is distributed on an "AS IS" BASIS, WITHOUT WARRANTIES OR CONDITIONS OF ANY KIND, either express or implied. See the License for the specific language governing permissions and limitations under the License.

First printing, June 2015

Contents

Introduction 4

Daily Tasks (Hospital Focal Person) 5

The End 31

Introduction1

About You

You collect information on illness and death among patients and health care workers in your health facility and enter them into SORMAS.

Name	Institute	LGA	Code
Mr Adedeji Obanor	State Hospital	Atiba	HFP-OY-FMT-4

Table 1: Your Coordinates.

Data for Exercise Disease

This booklet gives you all the data for your daily tasks on exercise disease. The data it contains, which have been generated by the SORMAS simulation, are invented especially for this pilot. Please do not worry, if some fields are named differently in the mobile app, the desktop app or this document resp.. For example, not all symptoms in the applications match those in this booklet. You are ask to put in some grain of salt here and there (indicated by text in *italic font*). All entered facts will trigger further action by various other users and will result in additional data. These resulting data will then be compared with the expected data to provide another evaluation method.

Entries by the users are made from Monday to Friday only.

Tasks as Hospital Focal Person (ExD)

Concerning exercise disease¹:

before 10 AM

- 1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfill your duty as a Hospital focal person.
 - ... list of possible cases (person information with symptoms)
- 1. Some patients have died. Please notify this via SORMAS-N.
 - ... list of persons that have died

¹ according to the daily information given in the tasks section of the day

Daily Tasks (Hospital Focal Person)

 $Day\ 8 - 2015 \text{--} 06 \text{--} 08 - Mon\ 8\ Jun$

before 10 AM

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focal person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

$Day \ 9 - 2015 - 06 - 09 - Tue \ 9 \ Jun$

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

$Day\ 10\ -\ 2015\text{-}06\text{-}10\ -\ Wed\ 10\ Jun$

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 11 - 2015-06-11 - Thu 11 Jun

$before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

Symptomatic Person²

² Person – 3091

Name	Chiazokam Chichi Ekwueme	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $\dots 49 \dots 1965$ -11-25	
Has	Adeyemi Okorowanta male 54 1960-06-21	
as	Co-Traveller	
Marital State	married (and not separated)	
Home Address	Port Harcourt Crescent Ojo Onidade Atiba Oyo	
Phone-1	0705-8908745 mobile	
Phone-2	0705-8080118 mobile	
Occupation	cheese maker	
Onset of Symptoms	2015-06-10	
Date of Death	NA	
Fever Temp.	$yes \dots 38.7$	
Lethargy	yes	
Muscle Pain	yes	
Headache	yes	
Stomach Pain	NA	
Diarrhea	no	
Vomiting	NA	
Breathing Difficulties	no	
Difficulty Swallowing	no	
Hiccup	no	
Unexplained Bleeding	g no	
Anorexia	no	

2. Some patients have died. Please notify this via SORMAS-N.

NA

no

Ther are no persons that died today.

Maculo-papular Rash

Unexplained Sudden Death

Day 12 - 2015-06-12 - Fri 12 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 15 - 2015-06-15 - Mon 15 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 16 - 2015-06-16 - Tue 16 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 17 - 2015-06-17 - Wed 17 Jun

$before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

Symptomatic Person³

 3 Person -2843

Name	Chiburem Akilu	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	$female \dots 46 \dots NA$	
Marital State	married (and not separated)	
Home Address	Dr Ugo Wudo Rd Abodere Oridokun Atiba Oyo	
Phone-1	+234-38-4821420 NA	
Phone-2	NA NA	
Occupation	film or videotape editor	
Onset of Symptoms	2015-06-17	
Date of Death	NA	
Fever Temp.	yes 40.	
Lethargy	NA	
Muscle Pain	yes	
Headache	NA	
Stomach Pain	no	
Diarrhea	no	
Vomiting	no	
Breathing Difficulties	NA	
Difficulty Swallowing	no	
Hiccup	no	
Unexplained Bleeding	no	
Anorexia	NA	
Maculo-papular Rash	no	
Unexplained Sudden I	Death no	

2. Some patients have died. Please notify this via SORMAS-N.

Day 18 - 2015-06-18 - Thu 18 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 19 - 2015-06-19 - Fri 19 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 22 - 2015-06-22 - Mon 22 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 23 - 2015-06-23 - Tue 23 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 24 - 2015-06-24 - Wed 24 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Case of death⁴

Name	Chiburem Akilu
Sex DoB Age	female $\dots 46 \dots NA$
Date of Death	2015-06-24

4 Person – 2843

Day 25 - 2015-06-25 - Thu 25 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 26 - 2015-06-26 - Fri 26 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 29 - 2015-06-29 - Mon 29 Jun

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

 $Day \ 30 - 2015 \text{-} 06 \text{-} 30 - Tue \ 30 \ Jun$

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

$Day \ 31 - 2015 - 07 - 01 - \ Wed \ 1 \ Jul$

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

$Day\ 32-2015 ext{-}07 ext{-}02-Thu\ 2\ Jul$

$before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

Symptomatic Person⁵

 5 Person -2912

Name	Tiwatopelodolurun Tompolo
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $27 \dots NA$
Marital State	living common law
Home Address	Coal Camp Road Alara Iju Atiba Oyo
Phone-1	+234-818-5715110 mobile
Phone-2	NA NA
Occupation	teacher
Onset of Symptoms	2015-07-02
Onset of Symptoms Date of Death	2015-07-02 NA
v -	

2015-07-02
NA
yes 38.2
yes
yes
yes
NA
no
NA
no
NA
NA

$Symptomatic\ Person ^{\color{red} 6}$

 6 Person -2989

Name	Chinenye Amokachi
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $46 1969-01-29$
Marital State	NA
Home Address	Kosofe Road Awon Atiba Oyo
Phone-1	038-3219687 landline
Phone-2	038-5736625 NA
Occupation	police officer

Onset of Symptoms	2015-07-02
Date of Death	NA
Fever Temp.	yes $\dots 40.6$
Lethargy	NA
Muscle Pain	yes
Headache	NA
Stomach Pain	no
Diarrhea	no
Vomiting	NA
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	no
Anorexia	NA
Maculo-papular Rash	NA
Unexplained Sudden Death	no

 $2.\,$ Some patients have died. Please notify this via SORMAS-N.

Day 33 - 2015-07-03 - Fri 3 Jul

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 36 - 2015-07-06 - Mon 6 Jul

$before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

Symptomatic Person⁷

 7 Person -2892

Name	Teeban Birninkudu
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male NA 1951-03-19
Has	Precious Binabo female 46 1968-03-10
as	Wife
Marital State	single (not living common law)
Home Address	Clenz Metals Street Aba Ilowa Atiba Oyo
Phone-1	0806-4141884 mobile
Phone-2	NA NA
Occupation	assistant printing worker

Onset of Symptoms	2015-07-06
Date of Death	NA
Fever Temp.	yesNA
Lethargy	yes
Muscle Pain	NA
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	NA
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	no
Anorexia	no
Maculo-papular Rash	no
Unexplained Sudden Death	no

2. Some patients have died. Please notify this via SORMAS-N.

Day~37-2015-07-07-Tue~7~Jul

$before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

Symptomatic Person⁸

 8 Person -3072

Name	Edoja Shittu
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male NA 1987-01-17
Marital State	married (and not separated)
Home Address	Oladipo Oluwole Road Agbegba Atiba Oyo
Phone-1	+234-803-9798398 mobile
Phone-2	+234-801-1898251 mobile
Occupation	car service worker (service station worker)

Onset of Symptoms	2015-07-07
Date of Death	NA
Fever Temp.	yes 38.7
Lethargy	NA
Muscle Pain	no
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	NA
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	NA
Unexplained Bleeding	no
Anorexia	no
Maculo-papular Rash	NA
Unexplained Sudden Death	NA

2. Some patients have died. Please notify this via SORMAS-N.

Day 38 - 2015-07-08 - Wed 8 Jul

before 10~AM

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

 $Case\ of\ death^{9}$

Date of Death

Name

Tiwatopelodolurun Tompolo $\mathrm{Sex}\,\ldots\mathrm{DoB}\,\ldots\mathrm{Age}$ female . . . 27 . . . NA 2015-07-08

⁹ Person – 2912

Day 39 - 2015-07-09 - Thu 9 Jul

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about $exercise\ disease.$ Use them to fulfil your duty as a $Hospital\ focal$ person.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

Day 40 - 2015-07-10 - Fri 10 Jul

 $before\ 10\ AM$

1. You have the following information about patients or health care workers in your facility about exercise disease. Use them to fulfil your duty as a Hospital focalperson.

There are no symptomatic persons today.

2. Some patients have died. Please notify this via SORMAS-N.

3 The End

You have successfully reached the end of the SORMAS-N pilot. There are no more data for you to enter. Please do not forget to fill out the logbook and hand it in to Dr. Ebiwumi Aikhionbare. We appreciate your feedback, which is of great importance for improving the performance of SORMAS.

> Thank you very much for participating in the SORMAS-N field test. We hope you had a pleasant time.