BNI, HPI, HZI, NFELTP, RKI, SAP

# SORMAS-N INJECTS

DAILY DATA FOR EXERCISE DISEASE

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#### 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
Mrs Olasubomi Olomu	Unicare Hospital	Ungogo	HFP-KN-UGG-3

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 disease<sup>1</sup>:

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

<sup>&</sup>lt;sup>1</sup> 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  $Hospital\ focal$ person.

There are no symptomatic persons today.

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

### 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.

## $Day\ 17-2015 \hbox{--} 06 \hbox{--} 17-Wed\ 17\ Jun$

 $before\ 10\ AM$ 

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  $Hospital\ focal$ person.

There are no symptomatic persons today.

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 focalperson.

#### Symptomatic Person<sup>2</sup>

 $^{2}$  Person -2077

Name	Ololade Envoh
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $58 1956-11-08$
Marital State	living common law
Home Address	Chris Ogbe Drive Hausawa Ungogo Kano
Phone-1	NA NA
Phone-2	NA NA
Occupation	NA
Onset of Symptoms	2015-06-18

2015-06-18
NA
yesNA
yes
yes
yes
NA
no
no
NA
NA
NA
no
no
no
no

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.

#### Symptomatic Person<sup>3</sup>

 $^{3}$  Person -2035

Name	Adeleke Ogundana
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $31 1984-05-21$
Has	Chisom Oni female 29 1985-10-14
as	Co-Traveller
Marital State	NA
Home Address	Laz. Nweke Close Ungogo Ungogo Kano
Phone-1	064-8546074 NA
Phone-2	NA NA
Occupation	commentator (reporter or journalist)

Onset of Symptoms	2015-06-19
Date of Death	NA
Fever Temp.	yes 39.9
Lethargy	yes
Muscle Pain	yes
Headache	NA
Stomach Pain	no
Diarrhea	no
Vomiting	no
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 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.

#### 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 focalperson.

#### Symptomatic Person<sup>4</sup>

 $^{4}$  Person -2033

Name	Chinelotam Erese
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $\dots 17 \dots NA$
Has	Aniyemawen Barda female 61 1953-12-13
as	Colleague
Marital State	married (and not separated)
Home Address	Abakiliki Close Dorawar Yan Kifi Ungogo Kano
Phone-1	+234-705-4047148 mobile
Phone-2	NA NA
Occupation	school pupil

Onset of Symptoms	2015-06-24
Date of Death	NA
Fever Temp.	$yes \dots 38.4$
Lethargy	yes
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	no
Breathing Difficulties	NA
Difficulty Swallowing	NA
Hiccup	no
Unexplained Bleeding	no
Anorexia	NA
Maculo-papular Rash	no
Unexplained Sudden Death	no

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.

 $^{5}$  Person -2033

#### 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.

2015 - 06 - 29

Case of death<sup>5</sup>

 $\mathrm{Sex}\,\ldots\mathrm{DoB}\,\ldots\mathrm{Age}$ Date of Death

Name

Chinelotam Erese
emale 17 NA

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

 $before\ 10\ AM$ 

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 - 2015-07-02 - 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 Person<sup>6</sup>

 $^{6}$  Person -2047

Name	Efuose Okodogbe
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female NA 1994-09-11
Marital State	divorced (not living common law)
Home Address	Link A Fagge D1 Ungogo Kano
Phone-1	0706-8140429 mobile
Phone-2	NA NA
Occupation	student
Onset of Symptoms	2015-07-02
Date of Death	NA

Onset of Symptoms Date of Death	2015-07-02 NA
Fever Temp.	yesNA
Lethargy	NA
Muscle Pain	no
Headache	no
Stomach Pain	NA
Diarrhea	NA
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	NA
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.

#### $Day\ 33-2015\text{-}07\text{-}03-Fri\ 3\ Jul$

#### $before\ 10\ AM$

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.

#### Symptomatic Person<sup>7</sup>

 $^{7}$  Person -2016

Name	Osaruese Kama	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male NA 1950-10-24	
Marital State	married (and not separated)	
Home Address	Independent Street Dan Agundi	iUngogoK
Phone-1	0706-4041034 mobile	
Phone-2	0809-4578131 mobile	
Occupation	soldier	
Onset of Symptoms	2015-07-03	
Date of Death	NA	
Fever Temp.	yesNA	
Lethargy	yes	
Muscle Pain	yes	
Headache	NA	
Stomach Pain	no	
Diarrhea	NA	
Vomiting	no	
Breathing Difficulties	no	
Difficulty Swallowing	NA	
Hiccup	no	
Unexplained Bleeding	NA	
Anorexia	no	
Maculo-papular Rash	NA	
Unexplained Sudden I	Death no	

## $Symptomatic\ Person^{8}$

 $^{8}$  Person -2017

Name	Isibor Henry Jegede
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $15 2000-02-23$
Has	Adebolajo Akpovi male 39 1975-06-19
as	Neighbor
Marital State	single (not living common law)
Home Address	Victoria Omowun me Agbeke Street $\dots$ Rijiyar Zaki $\dots$ Ungogo $\dots$ Kano
Phone-1	NA landline
Phone-2	0803-5447302 NA
Occupation	NA

Onset of Symptoms	2015-07-03
Date of Death	NA
Fever Temp.	yes $\dots 40.7$
Lethargy	yes
Muscle Pain	NA
Headache	no
Stomach Pain	no
Diarrhea	NA
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	no
Anorexia	no
Maculo-papular Rash	NA
Unexplained Sudden Death	no

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.

There are no symptomatic persons today.

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 Person<sup>9</sup>

Vomiting

Breathing Difficulties

Difficulty Swallowing

 $^{9}$  Person -2057

Name	Osagie Adeola	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $21 1994-01-23$	
Marital State	married (and not separated)	
Home Address	Ero Street Madigawa Ungogo Kano	
Phone-1	NA mobile	
Phone-2	NA NA	
Occupation	NA	
Onset of Symptoms	2015-07-07	
Date of Death	NA	
Fever Temp.	yes 39.9	
Lethargy	yes	
Muscle Pain	yes	
Headache	yes	
Stomach Pain	no	
Diarrhea	no	

 $_{
m no}$ 

 $_{
m no}$ 

NA

Hiccup	NA
Unexplained Bleeding	no
Anorexia	NA
Maculo-papular Rash	no
Unexplained Sudden Death	no

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.

 $Case\ of\ death^{10}$ 

Name	Efuose Okodogbe
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	female NA 1994-09-11
Date of Death	2015-07-08

 $^{10}$  Person -2047

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 focalperson.

There are no symptomatic persons today.

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

 ${\it Case \ of \ death}^{11}$ 

Name	Isibor Henry Jegede
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	male 15 2000-02-23
Date of Death	2015-07-09

 $^{11}$  Person -2017

#### 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.