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
Mr Godwin Fajinmi	Dandalama PHC	Dawakin Tofa	HFP-KN-DTF-1

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.

Symptomatic Person<sup>2</sup>

 $^{2}$  Person -393

Name	Olufunso Agbebaku	
Sex Age DoB	male NA $1962-09-21$	
Marital State	divorced (not living common law)	
Home Address	Upper 3rd Ivbiore Street Nasarawa Dawakin Tofa Kano	
Phone-1	0802-3656576 NA	
Phone-2	NA NA	
Occupation	soldier	
Onset of Symptoms	2015-06-08	
Date of Death	NA	
Fever Temp.	noNA	
Lethargy	yes	
Muscle Pain	NA	
Headache	yes	
Stomach Pain	no	
Diarrhea	no	
Vomiting	NA	
Breathing Difficulties	NA	
Difficulty Swallowing	no	
Hiccup	no	
Unexplained Bleeding	no	
Anorexia	NA	
Maculo-papular Rash	NA	
Unexplained Sudden I	Death no	

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 focalperson.

Symptomatic Person<sup>3</sup>

 $^{3}$  Person -479

Name	Okwong Arase
$Sex \dots Age \dots DoB$	male NA 1992-05-05
Marital State	NA
Home Address	Mohammed Nasiru Mukhtar Close Yakasai Dawakin Tofa Kano
Phone-1	+234-818-4262384 NA
Phone-2	0805-1207008 mobile
Occupation	shoemaker (cobbler)
Onset of Symptoms	2015-06-09

Onset of Symptoms Date of Death	2015-06-09 NA
Fever Temp.	yes 38.8
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	no
Maculo-papular Rash	no
Unexplained Sudden Death	no

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 Person<sup>4</sup>

 $^{4}$  Person -552

Name	Ebiwumi Mmoh
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $13 2002-09-05$
Has	Ikeoluwatomiwa opayemi Egwero female 55 1959-09-15
as	Friend
Marital State	NA
Home Address	Universal road Yaratu Dawakin Tofa Kano
Phone-1	064-9536317 landline
Phone-2	NA NA
Occupation	NA

Onset of Symptoms	2015-06-11
Date of Death	NA
Fever Temp.	yesNA
Lethargy	no
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	NA
Breathing Difficulties	NA
Difficulty Swallowing	no
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 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.

 ${\it Case \ of \ death}^5$ 

Name	Okwong Arase
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	male NA 1992-05-05
Date of Death	2015-06-12

 $^{5}$  Person – 479

#### 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  $Hospital\ focal$ 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.

#### 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.

#### Symptomatic Person<sup>6</sup>

 $^{6}$  Person -355

Name	Okomah Dawodu	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	$male\dots 61\dots NA$	
Marital State	widowed (not living co	mmon law)
Home Address	Berkley Street Sabo	o Dawakin Tofa Kano
Phone-1	NA NA	
Phone-2	NA mobile	
Occupation	sound effects technicia	n
Onset of Symptoms	2015-06-26	
Date of Death	NA NA	
Fever $\dots$ Temp.	NA 39.4	
Lethargy	yes	
Muscle Pain	NA	
Headache	yes	
Stomach Pain	no	
Diarrhea	no	
Vomiting	no	
Breathing Difficulties	s no	
Difficulty Swallowing	no	
Hiccup	no	
Unexplained Bleedin	g no	
Anorexia	no	
Maculo-papular Rasl	n no	
Unexplained Sudden	Death no	

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

 $Ther \ are \ no \ persons \ that \ died \ today.$ 

#### 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.

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

<sup>7</sup> Person – 429

Name	Akindela Yakubu	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	$male  \dots 44  \dots NA$	
Marital State	separated (not living	g common law)
Home Address	Hawley Street Ba	agadawaDawakin TofaKanc
Phone-1	+234-806-3945488 N	JA
Phone-2	NA NA	
Occupation	teacher	
Onset of Symptoms	2015-06-29	
Date of Death	NA	
Fever Temp.	no NA	
Lethargy	yes	
Muscle Pain	yes	
Headache	NA	
-		

Stomach Pain no Diarrhea NAVomiting NABreathing Difficulties no Difficulty Swallowing NAHiccup NAUnexplained Bleeding no NAAnorexia Maculo-papular Rash NAUnexplained Sudden Death NA

### Symptomatic Person<sup>8</sup>

 $^{8}$  Person -500

kin Tofa Kano
]

2015-06-29
NA
NANA
yes
yes
yes
NA
no
no
NA
no
no
no
no
NA
no

 $2.\,$  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 focalperson.

#### Symptomatic Person<sup>9</sup>

 $^{9}$  Person -342

Name	Omoregie Osanebi
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	$male \dots NA \dots NA$
Marital State	single (not living common law)
Home Address	Wokemba Street Tudun Fulani Dawakin Tofa Kano
Phone-1	NA NA
Phone-2	NA NA
Occupation	NA
Onset of Symptoms	2015-06-30

Onset of Symptoms	2015-06-30
Date of Death	NA
Fever Temp.	NA 40.7
Lethargy	yes
Muscle Pain	NA
Headache	NA
Stomach Pain	NA
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.

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

 $before\ 10\ AM$ 

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  $Hospital\ focal$ person.

There are no symptomatic persons today.

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.

 $Case\ of\ death^{10}$ 

Name	Akindela Yakubu
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	male $\dots 44 \dots NA$
Date of Death	2015-07-03

 $^{10}$  Person – 429

#### 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  $Hospital\ focal$ person.

There are no symptomatic persons today.

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.

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.