

BNI, HPI, HZI, NFELTP, RKI, SAP

SORMAS-N INJECTS

DAILY DATA FOR EXERCISE DISEASE

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1 Introduction

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 Oluremi Bali	OkeAdu Health Centre	Ibadan North East	HFP-OY-AGG-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 disease¹:
before 10 AM

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

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

2 Daily Tasks (*Hospital Focal Person*)

Day 8 – 2015-06-08 – 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.

There are no persons that died today.

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.

There are no persons that died today.

Day 10 – 2015-06-10 – 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 focal person*.

There are no symptomatic persons today.

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

There are no persons that died today.

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.

There are no persons that died today.

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 focal person*.

There are no symptomatic persons today.

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

There are no persons that died today.

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 focal person*.

There are no symptomatic persons today.

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

There are no persons that died today.

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.

There are no persons that died today.

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 focal person*.

There are no symptomatic persons today.

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

There are no persons that died today.

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.

There are no persons that died today.

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 focal person*.

*Symptomatic Person*²

² Person – 2410

Name	Igbo Oladapo
Sex ... Age ... DoB	female ... 40 ... 1974-04-10
Has ...	Edeosa Eguavoen ... female ... 52 ... 1962-09-19
as ...	Non-Marital Partner
Marital State	married (and not separated)
Home Address	Ladega Street ... Olunloyo ... Ibadan North East ... Oyo
Phone-1	0803-2748789 NA
Phone-2	0818-5646354 mobile
Occupation	textile refiner
Onset of Symptoms	2015-06-19
Date of Death	NA
Fever ... Temp.	no ... NA
Lethargy	NA
Muscle Pain	yes
Headache	NA
Stomach Pain	no
Diarrhea	NA
Vomiting	NA
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	NA
Unexplained Bleeding	no
Anorexia	no
Maculo-papular Rash	no
Unexplained Sudden Death	no

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

There are no persons that died today.

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*.

*Symptomatic Person*³

³ Person – 2329

Name	Oluwasemilore Akabueze
Sex ... Age ... DoB	male ... 27 ... NA
Marital State	married (and not separated)
Home Address	Emole Street ... Akamo ... Ibadan North East ... Oyo
Phone-1	NA mobile
Phone-2	NA NA
Occupation	crate maker (cooper)
Onset of Symptoms	2015-06-22
Date of Death	NA
Fever ... Temp.	yes ... 38.3
Lethargy	NA
Muscle Pain	NA
Headache	yes
Stomach Pain	no
Diarrhea	NA
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	NA
Hiccup	no
Unexplained Bleeding	no
Anorexia	no
Maculo-papular Rash	no
Unexplained Sudden Death	NA

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

There are no persons that died today.

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.

There are no persons that died today.

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.

There are no persons that died today.

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.

*Case of death*⁴

⁴ Person – 2329

Name	Oluwasemilore Akabueze
Sex ... DoB ... Age	male ... 27 ... NA
Date of Death	2015-06-25

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 focal person*.

*Symptomatic Person*⁵

⁵ Person – 2496

Name	Ehiszogie Babalola
Sex ... Age ... DoB	female ... 61 ... 1953-09-15
Has ... as ...	Afulenu Orode ... female ... 39 ... 1976-07-01 Neighbor
Marital State	single (not living common law)
Home Address	Edo Street ... Akamo ... Ibadan North East ... Oyo
Phone-1	038-6424603 landline
Phone-2	NA NA
Occupation	NA
Onset of Symptoms	2015-06-26
Date of Death	NA
Fever ... Temp.	yes ... 38.8
Lethargy	yes
Muscle Pain	NA
Headache	yes
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.

There 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*⁶

⁶ Person – 2371

Name	Okwong Eteimo
Sex ... Age ... DoB	male ... NA ... 1996-01-04
Has ...	Oluwaseyanu Chiom ... female ... 62 ... 1952-11-26
as ...	Friend
Marital State	living common law
Home Address	Mercury Close ... Olunloyo ... Ibadan North East ... Oyo
Phone-1	NA mobile
Phone-2	NA mobile
Occupation	student
Onset of Symptoms	2015-06-29
Date of Death	NA
Fever ... Temp.	NA ... 38.8
Lethargy	yes
Muscle Pain	NA
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	NA
Breathing Difficulties	NA
Difficulty Swallowing	NA
Hiccup	NA
Unexplained Bleeding	NA
Anorexia	NA
Maculo-papular Rash	NA
Unexplained Sudden Death	no

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

There are no persons that died today.

Day 30 – 2015-06-30 – 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.

There are no persons that died today.

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*.

*Symptomatic Person*⁷

⁷ Person – 2388

Name	Chisom Ezinwa
Sex ... Age ... DoB	female ... NA ... 1998-02-01
Marital State	single (not living common law)
Home Address	Bishop Fashoro Street ... Akamo ... Ibadan North East ... Oyo
Phone-1	+234-809-3184838 mobile
Phone-2	NA NA
Occupation	cable car driver
Onset of Symptoms	2015-07-01
Date of Death	NA
Fever ... Temp.	yes ... 40.5
Lethargy	yes
Muscle Pain	yes
Headache	yes
Stomach Pain	NA
Diarrhea	no
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	NA
Unexplained Bleeding	NA
Anorexia	no
Maculo-papular Rash	NA
Unexplained Sudden Death	no

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

*Case of death*⁸

⁸ Person – 2496

Name	Ehiszogie Babalola
Sex ... DoB ... Age	female ... 61 ... 1953-09-15
Date of Death	2015-07-01

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.

There are no persons that died today.

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 focal person*.

There are no symptomatic persons today.

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

There are no persons that died today.

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 focal person*.

There are no symptomatic persons today.

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

*Case of death*⁹

⁹ Person – 2371

Name	Okwong Eteimo
Sex ... DoB ... Age	male ... NA ... 1996-01-04
Date of Death	2015-07-06

*Case of death*¹⁰

¹⁰ Person – 2388

Name	Chisom Ezinwa
Sex ... DoB ... Age	female ... NA ... 1998-02-01
Date of Death	2015-07-06

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*.

Symptomatic Person¹¹

¹¹ Person – 2522

Name	Chinedu Gogwim
Sex ... Age ... DoB	male ... 16 ... 1998-10-23
Marital State	single (not living common law)
Home Address	Okanata Street ... Akamo ... Ibadan North East ... Oyo
Phone-1	0807-8760184 mobile
Phone-2	+234-38-5430255 landline
Occupation	NA
Onset of Symptoms	2015-07-07
Date of Death	NA
Fever ... Temp.	NA ... NA
Lethargy	yes
Muscle Pain	NA
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	NA
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	NA
Anorexia	no
Maculo-papular Rash	no
Unexplained Sudden Death	no

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

There are no persons that died today.

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.

There are no persons that died today.

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.

There are no persons that died today.

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 focal person*.

Symptomatic Person¹²

¹² Person – 2423

Name	Chibuzoa Ajayi
Sex ... Age ... DoB	female ... 42 ... 1973-03-26
Marital State	married (and not separated)
Home Address	Rumens Road ... Madeko ... Ibadan North East ... Oyo
Phone-1	NA landline
Phone-2	+234-708-7492473 mobile
Occupation	teacher
Onset of Symptoms	2015-07-10
Date of Death	NA
Fever ... Temp.	no ... NA
Lethargy	yes
Muscle Pain	NA
Headache	no
Stomach Pain	NA
Diarrhea	no
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	NA
Anorexia	no
Maculo-papular Rash	NA
Unexplained Sudden Death	NA

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

There are no persons that died today.

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.*