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 Ogbu Iyam	Almu Hospital	Tarauni	HFP-KN-TRN-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>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 focalperson.

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

<sup>2</sup> Person – 1827

Name	Ohoma Brigidi
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $32 1983-03-21$
Has	Umahi Imasuen male 42 1973-12-04
as	Ex-Husband
Marital State	NA
Home Address	Timber Market Road Dan Tsinke Tarauni Kano
Phone-1	+234-64-3750241  NA
Phone-2	NA NA
Occupation	nurse
Onset of Symptoms	2015-06-09
Date of Death	NA

Onset of Symptoms Date of Death	2015-06-09 NA
Fever Temp.	yes 38.8
Lethargy	yes
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	NA
Vomiting	NA
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	NA
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 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 focalperson.

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

<sup>3</sup> Person – 1889

Name	Niamke Afikuyomi
$Sex \dots Age \dots DoB$	male $28 1987-03-23$
Marital State	married (and not separated)
Home Address	Aliyu Makama Road Gyadi-Gyadin Arewa Tarauni Kano
Phone-1	0705-2706033 mobile
Phone-2	NA NA
Occupation	tanner

Onset of Symptoms	2015-06-10
Date of Death	NA
Fever Temp.	yes 38.3
Lethargy	yes
Muscle Pain	yes
Headache	NA
Stomach Pain	NA
Diarrhea	NA
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.

### Case of death<sup>4</sup>

4 Person – 1827

Name	Ohoma Brigidi
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	female $32 \dots 1983$ -03-21
Date of Death	2015-06-10

### 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  $Hospital\ focal$ person.

#### Symptomatic Person<sup>5</sup>

 $^{5}$  Person -1863

Name	Mesoma Iyke
Sex Age DoB	female NA 1981-09-28
Has	Aniyemawen Biobaku female 55 1959-10-22
as	Friend
Marital State	NA
Home Address	Isingwu Ugbo Street Maradi Tarauni Kano
Phone-1	064-1556888 landline
Phone-2	NA NA
Occupation	NA
	1121
Onset of Symptoms	2015-06-12
Date of Death	NA
Fever Temp.	yes 40.
Lethargy	yes
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	NA
Breathing Difficulties	s no
Difficulty Swallowing	
Hiccup	no

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

NANA

no

NA

Ther are no persons that died today.

Unexplained Bleeding

Maculo-papular Rash

Unexplained Sudden Death

Anorexia

### $Day\ 15 - 2015 - 06 - 15 - Mon\ 15\ Jun$

 $before\ 10\ AM$ 

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.

 ${\it Case \ of \ death}^6$ 

 $^{6}$  Person - 1889

Name	Niamke Afikuyomi
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	male 28 1987-03-23
Date of Death	2015-06-15

### 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 focalperson.

 $There\ are\ no\ symptomatic\ persons\ today.$ 

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

Case of death<sup>7</sup>

Name	Mesoma Iyke
$\mathrm{Sex}\dots\mathrm{DoB}\dots\mathrm{Age}$	female NA 1981-09-28
Date of Death	2015-06-16

 $^{7}$  Person - 1863

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

 $before\ 10\ AM$ 

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>8</sup>

 $^{8}$  Person - 1806

Name	Oluwaseyi Alaoakala
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female NA 1957-09-21
Marital State	living common law
Home Address	Onyuike Street Unguwar Tijjani Maibu Tarauni Kano
Phone-1	+234-809-8846299 mobile
Phone-2	0813-2712640 NA
Occupation	NA
Onset of Symptoms	2015-06-18
D + CD +1	27.4

Onset of Symptoms	2015-06-18
Date of Death	NA
Fever Temp.	yesNA
Lethargy	yes
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	NA
Vomiting	NA
Breathing Difficulties	no
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 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>9</sup>

 $^{9}$  Person - 1783

Name	Adaku Orakwue
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $\dots 56 \dots NA$
Marital State	NA
Home Address	Karimu Opeloyeru Street Hotoro North Tarauni Kano
Phone-1	+234-809-8363409 NA
Phone-2	NA NA
Occupation	production manager in textile industry
Onset of Symptoms	2015-06-19
Date of Death	NA

Onset of Symptoms	2015-06-19
Date of Death	NA
Fever Temp.	$NA \dots NA$
Lethargy	NA
Muscle Pain	NA
Headache	NA
Stomach Pain	no
Diarrhea	no
Vomiting	NA
Breathing Difficulties	NA
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	NA
Anorexia	no
Maculo-papular Rash	NA
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 focalperson.

### $Symptomatic\ Person^{10}$

 $^{10}$  Person - 1746

Name	Odera Adenowo
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $\dots 48 \dots 1967$ -11-05
Has	Eno-Obong Akabueze female 63 1952-02-02
as	Non-Marital Partner
Marital State	married (and not separated)
Home Address	Onuoha Street Unguwar Uku Tarauni Kano
Phone-1	064-830273 NA
Phone-2	NA NA
Occupation	teacher

Onset of Symptoms	2015-06-22
Date of Death	NA
Fever Temp.	NA 39.1
Lethargy	NA
Muscle Pain	no
Headache	yes
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

# $Symptomatic\ Person^{11}$

11 Person – 1770

Name	Precious Babalola
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $47 1967-08-30$
Marital State	divorced (not living common law)
Home Address	Ojo Street Yar Akwa Tarauni Kano
Phone-1	+234-801-1497947 mobile
Phone-2	NA NA
Occupation	NA

Onset of Symptoms	2015-06-22
Date of Death	NA
Fever Temp.	NA 38.4
Lethargy	NA
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	NA
Vomiting	no
Breathing Difficulties	NA
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.

#### 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.

Case of  $death^{12}$ 

 $^{12}$  Person - 1746

Name	Odera Adenowo
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	female $48 \cdot \cdot 1967 - 11 - 05$
Date of Death	2015-06-23

Case of  $death^{13}$ 

 $^{13}$  Person – 1783

Name	Adaku Orakwue
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	female $\dots 56 \dots NA$
Date of Death	2015-06-23

## 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.

## $Symptomatic\ Person^{\bf 14}$

 $^{14}$  Person - 1951

Name	Arome Elias
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $54 \dots 1960-03-10$
Marital State	NA
Home Address	Arowo Yabuna Street Daurawa Tarauni Kano
Phone-1	NA mobile
Phone-2	NA NA
Occupation	dairy worker (dairy operator)
Onset of Symptoms	2015-06-24
Date of Death	NA
Fever Temp.	yes $\dots 39.1$
Lethargy	NA
Muscle Pain	NA
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	no
Breathing Difficulties	s NA
Difficulty Swallowing	no
Hiccup	NA
Unexplained Bleeding	g NA
Anorexia	NA

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

no

Ther are no persons that died today.

Maculo-papular Rash

Unexplained Sudden Death

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.

 $Case\ of\ death^{15}$ 

Date of Death

 $^{15}$  Person - 1770

Name	Precious Babalola
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	female $47 \dots 1967-08-30$
Date of Death	2015-06-29
Case of death <sup>16</sup>	
Name	Arome Elias
$Sex \dots DoB \dots Age$	male $54 \cdot \cdot 1960-03-10$

2015-06-29

 $^{16}$  Person - 1951

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

 $before\ 10\ AM$ 

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  $Hospital\ focal$ 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.

#### 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 focalperson.

## $Symptomatic\ Person^{17}$

 $^{17}$  Person - 1840

Name	Osarenren Obleajula
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $36 1979-04-19$
Has	Ngozika Iheme Onazi female 20 1994-08-26
as	Neighbor
Marital State	single (not living common law)
Home Address	Akatakpo Street Tarauni Tarauni Kano
Phone-1	+234-703-6319853 mobile
Phone-2	NA NA
Occupation	NA

Onset of Symptoms	2015-07-08
Date of Death	NA
Fever Temp.	yes 40.5
Lethargy	NA
Muscle Pain	NA
Headache	no
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 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.

## $Symptomatic\ Person^{{\color{blue}18}}$

 $^{18}$  Person -1759

Name	Ogunde Agbo
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male 29 1986-02-05
Marital State	widowed (not living common law)
Home Address	Adeola Johnson Street Hausawa Tarauni Kano
Phone-1	NA mobile
Phone-2	+234-703-5978016 mobile
Occupation	police officer
Onset of Symptoms	2015-07-10
Date of Death	NA
Fever Temp.	yes 38.9
Lethargy	NA
Muscle Pain	NA
Headache	NA
Stomach Pain	NA
Diarrhea	no
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	g no
Anorexia	NA
Maculo-papular Rash	NA

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

Ther are no persons that died today.

Unexplained Sudden Death

#### 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.