

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 Oni Ezeife	Grace Hospital	Atiba	HFP-OY-FMT-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 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*.

*Symptomatic Person*²

² Person – 3003

Name	Bose Lagelu
Sex ... Age ... DoB	female ... 41 ... 1973-12-23
Marital State	single (not living common law)
Home Address	Presidential Road ... Oloko ... Atiba ... Oyo
Phone-1	038-4918631 landline
Phone-2	0802-4397625 mobile
Occupation	keeper of records (archivist)
Onset of Symptoms	2015-06-08
Date of Death	NA
Fever ... Temp.	NA ... 38.8
Lethargy	NA
Muscle Pain	no
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	NA

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*.

*Symptomatic Person*³

³ Person – 2983

Name	Chibuzoa Fidelis
Sex ... Age ... DoB	female ... NA ... 1995-01-02
Marital State	single (not living common law)
Home Address	Dr Ugo Wudo Rd ... Abodere Oridokun ... Atiba ... Oyo
Phone-1	+234-818-8783051 mobile
Phone-2	NA landline
Occupation	student
Onset of Symptoms	2015-06-09
Date of Death	NA
Fever ... Temp.	yes ... 38.9
Lethargy	yes
Muscle Pain	no
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.

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*.

*Symptomatic Person*⁴

⁴ Person – 3126

Name	Attahlerne Erese
Sex ... Age ... DoB	male ... NA ... 1999-12-12
Marital State	single (not living common law)
Home Address	Govt. House Rd ... Dahunsi ... Atiba ... Oyo
Phone-1	+234-803-5616784 NA
Phone-2	NA NA
Occupation	trainee
Onset of Symptoms	2015-06-11
Date of Death	NA
Fever ... Temp.	yes ... NA
Lethargy	yes
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	no
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.

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.

*Case of death*⁵

⁵ Person – 3126

Name	Attahlerne Erese
Sex ... DoB ... Age	male ... NA ... 1999-12-12
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 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*.

*Symptomatic Person*⁶

⁶ Person – 2971

Name	Adama Ahman
Sex ... Age ... DoB	female ... 44 ... 1970-07-15
Marital State	single (not living common law)
Home Address	Owen Street ... Igbo Kekere ... Atiba ... Oyo
Phone-1	NA mobile
Phone-2	NA NA
Occupation	specialist in animal husbandry (livestock specialist)
Onset of Symptoms	2015-06-17
Date of Death	NA
Fever ... Temp.	yes ... 39.3
Lethargy	yes
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	no
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.

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*⁷

⁷ Person – 2873

Name	Chuma Onumanyi
Sex ... Age ... DoB	male ... 46 ... 1969-01-23
Marital State	NA
Home Address	Ilorin Street ... Elemibo ... Atiba ... Oyo
Phone-1	NA NA
Phone-2	0806-2419846 mobile
Occupation	piano tuner
Onset of Symptoms	2015-06-19
Date of Death	NA
Fever ... Temp.	yes ... 39.8
Lethargy	NA
Muscle Pain	NA
Headache	NA
Stomach Pain	NA
Diarrhea	no
Vomiting	no
Breathing Difficulties	NA
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.

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*.

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 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.

There are no persons that died today.

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*.

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 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.

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*.

*Symptomatic Person*⁸

⁸ Person – 2976

Name	Olubowale Ameh
Sex ... Age ... DoB	male ... 12 ... 2002-11-07
Marital State	single (not living common law)
Home Address	Wilson Close ... Orokoroko ... Atiba ... Oyo
Phone-1	+234-801-4740582 NA
Phone-2	NA NA
Occupation	school pupil
Onset of Symptoms	2015-06-30
Date of Death	NA
Fever ... Temp.	yes ... 38.3
Lethargy	yes
Muscle Pain	yes
Headache	yes
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.

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*.

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 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*.

*Symptomatic Person*⁹

⁹ Person – 2990

Name	Kaneng Friday
Sex ... Age ... DoB	female ... 42 ... 1973-03-22
Has ... as ...	Nkoyo Yakubu ... male ... 13 ... 2001-07-25 Neighbor
Marital State	single (not living common law)
Home Address	Umuaga Street ... Sado ... Atiba ... Oyo
Phone-1	0706-2146611 NA
Phone-2	+234-802-6608350 NA
Occupation	purchasing officer (buyer or merchandiser)
Onset of Symptoms	2015-07-06
Date of Death	NA
Fever ... Temp.	yes ... 39.2
Lethargy	yes
Muscle Pain	yes
Headache	yes
Stomach Pain	NA
Diarrhea	no
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	NA
Hiccup	no
Unexplained Bleeding	no
Anorexia	no
Maculo-papular Rash	no
Unexplained Sudden Death	no

*Symptomatic Person*¹⁰

¹⁰ Person – 3108

Name	Ifeanyi Aromire
Sex ... Age ... DoB	male ... NA ... 1966-02-10
Has ... as ...	Ololade Folawiyo ... female ... 35 ... 1979-11-22 Colleague
Marital State	widowed (not living common law)
Home Address	Aria Road ... Olonje ... Atiba ... Oyo
Phone-1	038-4219467 NA
Phone-2	NA NA
Occupation	wood carver

Onset of Symptoms	2015-07-06
Date of Death	NA
Fever ... Temp.	yes ... NA
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	NA

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

There are no persons that died today.

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 Person*¹¹

¹¹ Person – 2909

Name	Timi Abedi
Sex ... Age ... DoB	male ... NA ... 1996-08-03
Has ... as ...	Chiazokam Chichi Ekwueme ... female ... 49 ... 1965-11-25 Colleague
Marital State	separated (not living common law)
Home Address	Nnokwa Street ... Awon ... Atiba ... Oyo
Phone-1	038-704893 landline
Phone-2	NA NA
Occupation	student
Onset of Symptoms	2015-07-07
Date of Death	NA
Fever ... Temp.	yes ... 40.1
Lethargy	yes
Muscle Pain	yes
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	NA

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

*Case of death*¹²

¹² Person – 2976

Name	Olubowale Ameh
Sex ... DoB ... Age	male ... 12 ... 2002-11-07
Date of Death	2015-07-07

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 Person*¹³

¹³ Person – 3048

Name	Ayotide Ojomoh
Sex ... Age ... DoB	female ... NA ... 1984-11-23
Marital State	NA
Home Address	Attahiru road ... Awon ... Atiba ... Oyo
Phone-1	NA NA
Phone-2	+234-38-5911330 landline
Occupation	animal technician
Onset of Symptoms	2015-07-10
Date of Death	NA
Fever ... Temp.	yes ... 38.2
Lethargy	yes
Muscle Pain	NA
Headache	NA
Stomach Pain	NA
Diarrhea	NA
Vomiting	NA
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	NA
Anorexia	no
Maculo-papular Rash	no
Unexplained Sudden Death	NA

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

*Case of death*¹⁴

¹⁴ Person – 2909

Name	Timi Abedi
Sex ... DoB ... Age	male ... NA ... 1996-08-03
Date of Death	2015-07-10

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.*