BNI, HPI, HZI, NFELTP, RKI, SAP

SORMAS-N INJECTS

DAILY DATA FOR EXERCISE DISEASE

Copyright © 2015 BNI, HPI, HZI, NFELTP, RKI, SAP

Licensed under the Apache License, Version 2.0 (the "License"); you may not use this file except in compliance with the License. You may obtain a copy of the License at http://www.apache.org/licenses/LICENSE-2.0. Unless required by applicable law or agreed to in writing, software distributed under the License is distributed on an "AS IS" BASIS, WITHOUT WARRANTIES OR CONDITIONS OF ANY KIND, either express or implied. See the License for the specific language governing permissions and limitations under the License.

First printing, June 2015

Contents

Introduction 4

Daily Tasks (Hospital Focal Person) 5

The End 30

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 Olatunbosun Azeez	Kisi General Hospital	Irepo	HFP-OY-KSH-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. 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

¹ 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 - 2015-06-10 - 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 Person²

² Person – 3679

Name	Esema Gumba	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $50 1964-06-28$	
Marital State	living common law	
Home Address	Yemi Adetayo Street Duroye Irepo Oyo	0
Phone-1	0708-4398796 mobile	
Phone-2	NA NA	
Occupation	NA	
Ot -f Ct	2017 06 10	
Onset of Symptoms	2015-06-10	
Date of Death	NA NA	
Fever \dots Temp.	$yes \dots NA$	
Lethargy	NA	
Muscle Pain	yes	
Headache	yes	
Stomach Pain	NA	
Diarrhea	no	
Vomiting	no	
Breathing Difficultie	es no	
Difficulty Swallowing	g NA	
Hiccup	no	
Unexplained Bleedin	ng no	
Anorexia	NA	
Maculo-papular Ras	h no	

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

Ther are no persons that died today.

Unexplained Sudden Death

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 focalperson.

There are no symptomatic persons today.

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

 $Case\ of\ death^3$

Name	Esema Gumba
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	male 50 1964-06-28
Date of Death	2015-06-16

 3 Person -3679

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

 $before\ 10\ AM$

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 Person⁴

 4 Person -3678

Name	Nkoyo Orewa
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $39 1975-07-16$
Marital State	separated (not living common law)
Home Address	Ojo Road Ajetowa Irepo Oyo
Phone-1	NA landline
Phone-2	NA NA
Occupation	NA
Onset of Symptoms	2015-06-18
Date of Death	NA
Fever Temp.	NA 40.4
Lethargy	yes
Muscle Pain	NA
Headache	yes
Stomach Pain	no
Diarrhea	NA
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	NA
Unexplained Bleeding	NA
Anorexia	NA
Maculo-papular Rash	NA
Unexplained Sudden I	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.

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 focalperson.

Symptomatic Person⁵

 5 Person -3519

Name	Kelechi Jegede
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $58 1957-05-25$
Marital State	single (not living common law)
Home Address	Badaru Abina Street Kosigi Irepo Oyo
Phone-1	NA landline
Phone-2	0806-6182859 NA
Occupation	NA
O	2017 06 22
Onset of Symptoms	2015-06-23
Date of Death	NA NA
Fever \dots Temp.	$NA \dots NA$
Lethargy	yes
Muscle Pain	NA
Headache	NA
Stomach Pain	no
Diarrhea	NA
Vomiting	NA
Breathing Difficulties	s no
Difficulty Swallowing	NA
Hiccup	NA
Unexplained Bleeding	g NA
Anorexia	no
Maculo-papular Rash	n NA
Unexplained Sudden	Death no

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

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

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.

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.

There are no symptomatic persons today.

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

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

Name	Nkoyo Orewa
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	female 39 1975-07-16
Date of Death	2015-06-25

 6 Person -3678

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 Person⁷

 7 Person -3567

Name	Uche Nguirmamaramama	
$Sex \dots Age \dots DoB$	male 24 1990-09-23	
Marital State	NA	
Home Address	Akpu Street Ago Fulani Irepo ()yo
Phone-1	+234-813-1737815 mobile	
Phone-2	NA NA	
Occupation	weaver	
Onset of Symptoms	2015-06-26	
Date of Death	NA	
Fever Temp.	yes 39.7	
Lethargy	yes	
Muscle Pain	yes	
Headache	yes	
Stomach Pain	NA	
Diarrhea	no	
Vomiting	NA	
Breathing Difficulties	s no	
Difficulty Swallowing	no	
Hiccup	no	
Unexplained Bleeding	g no	
Anorexia	no	
Maculo-papular Rash	n no	
Unexplained Sudden	Death NA	

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 focalperson.

There are no symptomatic persons today.

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

Case of death⁸

Name	Kelechi Jegede
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	male $58 \dots 1957 \text{-} 05 \text{-} 25$
Date of Death	2015-06-29

⁸ Person – 3519

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

 $before\ 10\ AM$

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.

Symptomatic Person⁹

 9 Person -3410

Name	Chidi Aluma
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $28 1986-08-09$
Has	Temilore Edeh female 46 1968-12-31
as	Colleague
Marital State	single (not living common law)
Home Address	Aigbedion Street Ago Fulani Irepo Oyo
Phone-1	NA mobile
Phone-2	NA NA
Occupation	career diplomat or diplomat
Onset of Symptoms	2015-07-03
D + CD +1	D.T. A

Onset of Symptoms	2015-07-03
Date of Death	NA
Fever Temp.	yes 40.
Lethargy	no
Muscle Pain	no
Headache	NA
Stomach Pain	no
Diarrhea	no
Vomiting	NA
Breathing Difficulties	NA
Difficulty Swallowing	no
Hiccup	NA
Unexplained Bleeding	no
Anorexia	NA
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

Diarrhea

Vomiting

Breathing Difficulties

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.

$Symptomatic\ Person^{\hbox{\scriptsize 10}}$

¹⁰ Person – 3460

Name	Wuraola Nwakaeme	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $62 1953-04-27$	
Marital State	single (not living common law)	
Home Address	MCC Road Ago Fulani Irepo Oyo	
Phone-1	+234-801-8106818 NA	
Phone-2	NA NA	
Occupation	physician	
Onset of Symptoms	2015-07-07	
Date of Death	NA	
Fever Temp.	yes 40.1	
Lethargy	NA	
Muscle Pain	yes	
Headache	NA	
Stomach Pain	no	

no

no

no

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 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.

 $Symptomatic\ Person^{11}$

 11 Person -3581

Name	Olufunso Achuzie
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	male $13 2001-12-20$
Marital State	NA
Home Address	Association Road Abule Soro Irepo Oyo
Phone-1	NA mobile
Phone-2	+234-706-5948547 mobile
Occupation	school pupil
Onset of Symptoms	2015-07-08
Date of Death	NA
Fever Temp.	no NA
Lethargy	yes
Muscle Pain	yes
Headache	no
Stomach Pain	no
Diarrhea	NA
Vomiting	no
Breathing Difficulties	s no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	g no
Anorexia	no
Maculo-papular Rash	n no

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

Ther are no persons that died today.

Unexplained Sudden Death NA

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.