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 Affiong Nworuh	Rahama Clinic	Ungogo	HFP-KN-UGG-2

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.

$Day\ 10\ -\ 2015\text{-}06\text{-}10\ -\ Wed\ 10\ Jun$

 $before\ 10\ AM$

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 Person²

 2 Person -2056

Name	Nyasha Omeili	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $36 1979-04-21$	
Marital State	separated (not living common law)	
Home Address	River Close Shahuchi Ungogo Kano	
Phone-1	NA landline	
Phone-2	NA mobile	
Occupation	nurse	
Onset of Symptoms	2015-06-11	
Date of Death	NA NA	
Fever \dots Temp.	$yes \dots NA$	
Lethargy	yes	
Muscle Pain	yes	
Headache	NA	
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 I	Death NA	

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

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

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 focalperson.

Symptomatic Person³

 3 Person -2000

Name	Isobel Henry Ekpotu	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female NA 1960-07-10	
Marital State	single (not living common law)	
Home Address	Prophet Temple Street Baburawa Ungogo Kano	
Phone-1	+234-818-7527240 NA	
Phone-2	NA NA	
Occupation	cutler	
Onset of Symptoms	2015-06-12	
Date of Death	NA	
Fever Temp.	NA 40.9	
Lethargy	yes	
Muscle Pain	yes	
Uandaaha	**00	

Onset of Symptoms	2010-00-12
Date of Death	NA
Fever Temp.	NA 40.9
Lethargy	yes
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	NA
Hiccup	no
Unexplained Bleeding	no
Anorexia	NA
Maculo-papular Rash	NA
Unexplained Sudden Death	no

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

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

 $before\ 10\ AM$

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.

 4 Person -2000Case of death⁴

Name	Isobel Henry Ekpotu
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	female NA 1960-07-10
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.

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

 $before\ 10\ AM$

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 focalperson.

There are no symptomatic persons today.

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

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

Name	Nyasha Omeili
$\mathrm{Sex}\ldots\mathrm{DoB}\ldots\mathrm{Age}$	female $36 \dots 1979$ -04-21
Date of Death	2015-06-17

 5 Person -2056

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 focalperson.

Symptomatic Person⁶

 6 Person -2004

Name	Mujeedat Uchechukwu	
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female $63 1951-08-24$	
Marital State	divorced (not living common law)	
Home Address	Royal Palm Drive Raudakeyi Ungogo Kano	
Phone-1	064-2987275 landline	
Phone-2	NA NA	
Occupation	soldier	
	2017 04 27	
Onset of Symptoms	2015-06-25	
Date of Death	NA NA	
Fever \dots Temp.	$yes \dots 38.6$	
Lethargy	NA	
Muscle Pain	NA	
Headache	no	
Stomach Pain	no	
Diarrhea	no	
Vomiting	no	
Breathing Difficulties	s NA	
Difficulty Swallowing	y NA	
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 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.

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

 $before\ 10\ AM$

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 Person⁷

 7 Person -2141

Name	Igbudu Agbamuche
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	$male \dots NA \dots NA$
Has	Boumi Jegede female 20 1994-09-26
as	Colleague
Marital State	NA
Home Address	Sanusi Fafunwa Street Sheshe Ungogo Kano
Phone-1	+234-806-4399548 mobile
Phone-2	NA NA
Occupation	producer
	2017 07 02
Onset of Symptoms	2015-07-03
Date of Death	NA NA
Fever Temp.	yesNA

Onset of Symptoms	2015-07-03
Date of Death	NA
Fever Temp.	yesNA
Lethargy	yes
Muscle Pain	yes
Headache	NA
Stomach Pain	no
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.

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.

Symptomatic Person⁸

 8 Person -2042

Name	Omoye Elegbede
$\mathrm{Sex}\ldots\mathrm{Age}\ldots\mathrm{DoB}$	female NA 1978-02-10
Marital State	divorced (not living common law)
Home Address	Ukehe StreetRinjiUngogoKano
Phone-1	0801-2762440 mobile
Phone-2	064-8020848 landline
Occupation	$production\ manager\ (electronic\ appliances)$

Onset of Symptoms	2015-07-10
Date of Death	NA
Fever Temp.	yes 39.4
Lethargy	NA
Muscle Pain	yes
Headache	yes
Stomach Pain	no
Diarrhea	no
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	NA
Anorexia	no
Maculo-papular Rash	NA
Unexplained Sudden Death	no
Chexplained Sudden Death	110

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.