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# 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	Table 1: Your Coordinates.
Mr Osabuhien Ofere	Oluyoro Catholic Hospital	Ibadan North East	HFP-OY-AGG-4	

## 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

## 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*<sup>2</sup>

<sup>2</sup> Person – 2544

Name	Udensi Oshaniwa
Sex ... Age ... DoB	male ... 58 ... 1956-02-09
Marital State	living common law
Home Address	Iyienu Street ... Akamo ... Ibadan North East ... Oyo
Phone-1	0803-6899582 mobile
Phone-2	NA NA
Occupation	baker
Onset of Symptoms	2015-06-08
Date of Death	NA
Fever ... Temp.	yes ... 40.1
Lethargy	yes
Muscle Pain	yes
Headache	NA
Stomach Pain	no
Diarrhea	NA
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	NA
Hiccup	no
Unexplained Bleeding	no
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.*

*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*.

*Symptomatic Person*<sup>3</sup>

<sup>3</sup> Person – 2296

Name	Chukwudi Ameh
Sex ... Age ... DoB	male ... NA ... 1956-07-24
Has ... as ...	Ogunbanwo Barka ... male ... 38 ... 1976-09-06 Friend
Marital State	single (not living common law)
Home Address	Odutayo Street ... Madeko ... Ibadan North East ... Oyo
Phone-1	0809-4722162 mobile
Phone-2	+234-813-5954153 mobile
Occupation	NA
Onset of Symptoms	2015-06-10
Date of Death	NA
Fever ... Temp.	yes ... 39.
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 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*<sup>4</sup>

<sup>4</sup> Person – 2502

Name	Ogbu Ezeh
Sex ... Age ... DoB	male ... 53 ... 1962-02-04
Marital State	NA
Home Address	Federal Road F.126 Zungeru - Izom ... Madeko ... Ibadan North East ... Oyo
Phone-1	NA landline
Phone-2	0818-2952439 NA
Occupation	chipboard or fibreboard production operative
Onset of Symptoms	2015-06-11
Date of Death	NA
Fever ... Temp.	NA ... 39.4
Lethargy	yes
Muscle Pain	NA
Headache	NA
Stomach Pain	no
Diarrhea	NA
Vomiting	NA
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	NA
Anorexia	NA
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 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>

<sup>5</sup> Person – 2375

Name	Ebube Ajanwachukwu
Sex ... Age ... DoB	male ... NA ... 1997-03-03
Marital State	widowed (not living common law)
Home Address	Douglas Close ... Akamo ... Ibadan North East ... Oyo
Phone-1	038-6686290 NA
Phone-2	+234-38-8833888 landline
Occupation	student
Onset of Symptoms	2015-06-12
Date of Death	NA
Fever ... Temp.	no ... NA
Lethargy	yes
Muscle Pain	yes
Headache	no
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

*Symptomatic Person*<sup>6</sup>

<sup>6</sup> Person – 2396

Name	Madukairo Audu
Sex ... Age ... DoB	male ... NA ... 1967-10-19
Marital State	separated (not living common law)
Home Address	Adolphus Chukwuemeka Street ... Saka ... Ibadan North East ... Oyo
Phone-1	0705-9509999 mobile
Phone-2	NA NA
Occupation	mining air control technician

Onset of Symptoms	2015-06-12
Date of Death	NA
Fever ... Temp.	NA ... 39.1
Lethargy	yes
Muscle Pain	yes
Headache	NA
Stomach Pain	NA
Diarrhea	NA
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	NA
Unexplained Bleeding	no
Anorexia	no
Maculo-papular Rash	no
Unexplained Sudden Death	NA

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

*Case of death*<sup>7</sup>

<sup>7</sup> Person – 2502

Name	Ogbu Ezech
Sex ... DoB ... Age	male ... 53 ... 1962-02-04
Date of Death	2015-06-12

*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*.

*Symptomatic Person*<sup>8</sup>

<sup>8</sup> Person – 2370

Name	Omoregie Akarandut
Sex ... Age ... DoB	male ... 15 ... 1999-02-08
Marital State	single (not living common law)
Home Address	Adolphus Chukwuemeka Street ... Saka ... Ibadan North East ... Oyo
Phone-1	NA mobile
Phone-2	+234-803-1855552 NA
Occupation	school pupil
Onset of Symptoms	2015-06-16
Date of Death	NA
Fever ... Temp.	yes ... NA
Lethargy	yes
Muscle Pain	yes
Headache	NA
Stomach Pain	no
Diarrhea	NA
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	no
Hiccup	no
Unexplained Bleeding	NA
Anorexia	NA
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 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.

*Case of death*<sup>9</sup>

<sup>9</sup> Person – 2296

Name	Chukwudi Ameh
Sex ... DoB ... Age	male ... NA ... 1956-07-24
Date of Death	2015-06-18

*Case of death*<sup>10</sup>

<sup>10</sup> Person – 2375

Name	Ebube Ajanwachukwu
Sex ... DoB ... Age	male ... NA ... 1997-03-03
Date of Death	2015-06-18

*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*.

*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 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<sup>11</sup>

<sup>11</sup> Person – 2337

Name	Oluwatofunmi Edoheart
Sex ... Age ... DoB	female ... 19 ... 1995-07-29
Marital State	single (not living common law)
Home Address	Colliery Avenue ... Saka ... Ibadan North East ... Oyo
Phone-1	038-8028406 NA
Phone-2	NA NA
Occupation	student
Onset of Symptoms	2015-06-22
Date of Death	NA
Fever ... Temp.	NA ... 39.5
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 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*.

Symptomatic Person<sup>12</sup>

<sup>12</sup> Person – 2302

Name	Affiong Aminu
Sex ... Age ... DoB	male ... 16 ... NA
Marital State	NA
Home Address	T R E M ... Omiyale ... Ibadan North East ... Oyo
Phone-1	+234-813-2936725 mobile
Phone-2	+234-801-7529895 mobile
Occupation	NA
Onset of Symptoms	2015-06-26
Date of Death	NA
Fever ... Temp.	NA ... NA
Lethargy	NA
Muscle Pain	yes
Headache	yes
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.

*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*.

*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*.

*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*.

Symptomatic Person<sup>13</sup>

<sup>13</sup> Person – 2338

Name	Oluremi Biobaku
Sex ... Age ... DoB	female ... NA ... 1992-03-26
Has ...	Afulenu Orode ... female ... 39 ... 1976-07-01
as ...	Non-Marital Partner
Marital State	married (and not separated)
Home Address	Waziri Ibrahim Crescent ... Saka ... Ibadan North East ... Oyo
Phone-1	+234-802-5479558 mobile
Phone-2	0703-4820779 NA
Occupation	student
Onset of Symptoms	2015-07-02
Date of Death	NA
Fever ... Temp.	yes ... 38.4
Lethargy	yes
Muscle Pain	yes
Headache	NA
Stomach Pain	NA
Diarrhea	no
Vomiting	no
Breathing Difficulties	no
Difficulty Swallowing	NA
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.

*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.

*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*.

*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 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.

*Case of death*<sup>14</sup>

<sup>14</sup> Person – 2338

Name	Oluremi Biobaku
Sex ... DoB ... Age	female ... NA ... 1992-03-26
Date of Death	2015-07-08

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*.

Symptomatic Person<sup>15</sup>

<sup>15</sup> Person – 2452

Name	Nadoca Alake
Sex ... Age ... DoB	female ... NA ... 1957-03-21
Marital State	single (not living common law)
Home Address	Idi Street ... Akamo ... Ibadan North East ... Oyo
Phone-1	NA landline
Phone-2	+234-38-7508237 landline
Occupation	construction or building site manager (site manager)
Onset of Symptoms	2015-07-09
Date of Death	NA
Fever ... Temp.	yes ... NA
Lethargy	no
Muscle Pain	NA
Headache	no
Stomach Pain	NA
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 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*.

*There are no symptomatic persons today.*

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

*Case of death*<sup>16</sup>

<sup>16</sup> Person – 2452

Name	Nadoca Alake
Sex ... DoB ... Age	female ... NA ... 1957-03-21
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.*