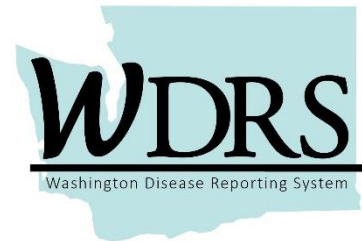


Washington Disease Reporting System General Communicable Diseases Instruction Manual

Washington State Department of Health
Office of Communicable Disease Epidemiology



2019



DOH 420-227 February 2019

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KEY TO SYMBOLS



Pay particular attention



WDRS new GCD specific questions (not in PHIMS)



Remember to routinely 'Save' event records




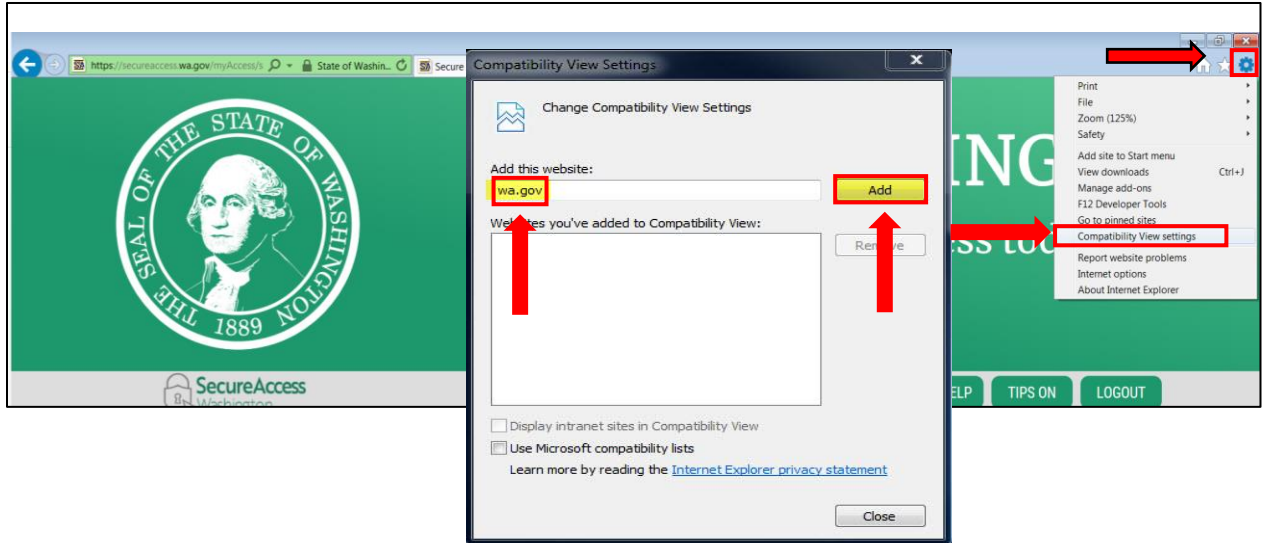
Questions?

- Contact: Washington State Department of Health
- Office of Communicable Diseases Epidemiology
- Email: CommDisEpi@doh.wa.gov | Phone: (206) 418-5500

Getting Started

The Washington Disease Reporting System (WDRS) General Communicable Disease (GCD) models are used to track and report suspect and confirmed cases of GCDs ([notifiable communicable diseases](#), including hepatitis A and E but not hepatitis B, C or D, TB, or STDs) to the Washington State Department of Health (DOH). All WDRS users will first be required to set up a Secure Access Washington (SAW) account. For more information see the [WDRS Reference Guide \(Chapter 2: Security and Logging In\)](#).

If users choose to operate WDRS in Internet Explorer, the **Compatibility View** settings will need to be adjusted to prevent WDRS from freezing. This is accomplished by left-clicking the gear-shaped icon located at the top-right of the browser window  and selecting **Compatibility View settings** from the drop-down menu. Next, add the website by entering the URL (**wa.gov**) into the 'Add this website' textbox, and click 'Add'. Click the 'Close' button and continue logging into SAW as normal.



Disable the auto-fill feature in your browser before using WDRS



WDRS will automatically time out due to inactivity after 30 minutes.

General Information

After logging into WDRS through SAW, you will be automatically routed to the **WDRS Home Page**. The WDRS Home Page is customizable and may look different depending the user's permissions and settings.

Washington Disease Reporting System WDRS Modeling Build 6.0.4.0 Project-1

Enter Case ID or Search Term... Search Lindsay

Alerts and Notifications

Recent Records

Event ID	Full Name	Disease
100000000	Doe, John	Botulism, infant
100000001	Doe, Jane	Campylobacteriosis

Workflows

Workflow Queue	Events	Assigned
GCD all open events [LHJ]	0	0
GCD bruceellosis missing laboratory exposure details [LHJ]	0	0
GCD congenital Zika infant missing birth mother lab evidence [LHJ]	0	0
GCD event missing 'Likely geographic region of exposure' information [LHJ]	0	0
GCD event missing 'travel out of' information [LHJ]	0	0

Tasks

No tasks to display

Quick Links

Welcome To Washington Disease Reporting System WDRS Modeling Build 6.0.4.0 Project-1

Have comments or questions? Contact us:

Business Area	Phone	Email
Tuberculosis:	360-236-3443	tbsservices@doh.wa.gov
STD (Surveillance and HIV/STD Partner Services):	360-236-3445	STD_Surveillance@doh.wa.gov
HIV Surveillance:	360-236-3427	HIV_Sur@doh.wa.gov
Hepatitis B and D:	206-418-5500	CommDisEpi@doh.wa.gov
Hepatitis C:	360-236-3390	hepatitis@doh.wa.gov
General Communicable Diseases:	206-418-5500	CommDisEpi@doh.wa.gov
Blood Lead:	360-236-4280	lead@doh.wa.gov
WDRS Administration Office:	360-236-4229	wdrs.community@doh.wa.gov

Calendar

Manage appointments

Help Desk

DOH Service Central: 360-236-4357 or ServiceCentral@doh.wa.gov

Creating an Event

You may search for a person or create a new event (case record) from the **WDRS Home Page**. For guidance on searching for persons or events and creating new events, refer to the general [WDRS Reference Guide](#) (Chapter 4: Search for Persons and Events and Chapter 5: New Events and Updating Data).



Search for an event or person **BEFORE** creating a new event or new person.



It is important to include as much information as possible when creating an event because the 'Person Information' entered is used by the system to populate fields throughout the event. The most pertinent are the first and last name, sex, date of birth (DOB), and address. For instance, addresses are used to assign the accountable county, sex and age are used to determine if pregnancy questions will appear, and ages that are greater than 12 years will prompt the employment field to appear in the **Demographics** question package.

Create Event - Person Information		
Event Information		
Disease: <input type="text"/>		
Add Person		
First Name:* <input type="text"/>	Middle Name: <input type="text"/>	
Suffix: <input type="text"/>		
Birth Date: <input type="text" value="MM/DD/YYYY"/>	Sex assigned at birth: <input type="text"/>	
Contact Information		
Address Type:* <input type="text" value="Home"/>		
Street 1: <input type="text"/>		
Street 2: <input type="text"/>		
City: <input type="text"/>	State: <input type="text" value="WA"/>	Zip Code: <input type="text"/>
County: <input type="text"/>	Country: <input type="text" value="USA"/>	
Survey Email: <input type="text"/>		
Residence Type: <input type="text"/>	Address Status: <input type="text"/>	

Once you have created, or located, an event (case record), the **Event Summary Screen** (shown below) will be displayed. WDRS events are formatted with multiple tabs for data entry by topic area under the **Event Data Tab**. Depending on the condition associated with the event, the

Event Data Tab may include a series of question packages, such as: **Administrative, Demographics, Clinical and Laboratory, Risk and Response, Transmission Tracking, Treatment, Contract Tracing Form, Case Classification, and CDC Notification.**

Event Summary

Basic Information

Event ID: 10000017
 Disease: Arboviral disease, other
 Person: Jane Doe Birth Date: 03/06/2000 (18 yo Female)
 Dates: Create Date: 03/15/2018
 Type: Interactive
 Investigation Status: Open
 Linked Events/Contacts: 0 linked event(s)/contact(s) (View)
 Attachments: 0 attachment(s) (Add)
 Notices: General Notifications (1)
 Vital Status: Alive

Notes (Add/Edit | Show My Notes)

Edit Event Properties Copy Event

Event Data Lab Results Concerns Persons Tasks Surveys Calendar Event Properties Event History

Question Packages

Question Package	Person	Last Update	Updated By	Status
Administrative	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]	Incomplete
Demographics	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]	Completed
Clinical and Laboratory	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]	Incomplete
Risk and Response	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]	Completed
Transmission Tracking	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]	Completed
Treatment	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]	Completed
Contact Tracing Form	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]	Completed
CDC Notification	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]	Completed
Section Headers for Wizards Only	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]	Completed

View Question Package Wizards View Wizard

Within the GCD model of WDRS, question packages will look similar across conditions, with the exception of the **Clinical and Laboratory** question package and **Risks and Response** question package. The **CDC Notification** question package will be used by DOH Office of Communicable Disease Epidemiology (OCDE) Program.

To open a question package, double click on the name of the question package or single click to highlight the name and click the 'View Question Package' button located at the bottom of the list. When entering data into question packages, answer fields in order, from the top of the page to the bottom.

Data Entry

There are two ways to enter data for a new event:

- Enter data into individual question packages.
- Enter data directly into the **Wizard** (recommended best practice).

Question packages, or tabular entry, requires the user to enter data through the individual question packages, which entails choosing the fields to input data. **Wizards**, however, are

condition-specific, and use data from various question packages to create a singular spot for data entry. **Wizards** are the recommended method for data entry.



WDRS events are formatted with multiple tabs for data entry by topic area. Continuous data entry into one screen can be done using wizards. View the [Wizards section](#) below to learn more.

Certain 'read-only' fields (appear as grayed out fields) are not directly editable, and are completed by data input elsewhere (e.g. 'Age years' pulls data from the date of birth entered on the **Person page**.) If changes to 'read-only' fields are required, users must go back and locate the original field, and change on the original information entered to drive the change in the read only field. For example, refer to the [Persons Tab](#) on the **Event Summary Screen** to add addresses, or change demographics. Various 'read-only' fields are editable by DOH only and appear for your information.

Question formats include:

- Drop-down answer choices will appear in various forms, including:
 - 'Yes', 'No', 'Unknown' (Unknown could be refused/not applicable/doesn't know, but it implies that there was an attempt to gather information)
 - 'Yes', 'Maybe', 'No', 'Unknown'
 - Various pre-populated lists, called reference parties, that users select from
- Text box
 - Allow entry of free text
- Radio buttons
 - Allow for one selection from the available options
- Check boxes
 - Allow for one or multiple selections from the available options
- Dates
 - Input MM/DD/YYYY or select the date by clicking on the calendar logo.
 - When using the year drop-down found under the calendar icon for date fields, WDRS will automatically select a 20-year range from 2007-2027, with the current year pre-selected in the middle.
 - To select years before or after the 20 year range, (like a birthdate in 1972), click on the year at the top of the list, then select the drop down again, the drop-down is now a 20 year range with the selected year in the middle.
 - There is no option to scroll to additional years.
 - A **red error message** will appear for illogical date entries, for example, if a diagnosis date precedes the symptom onset date.

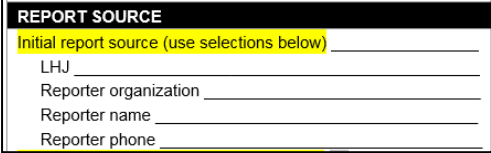

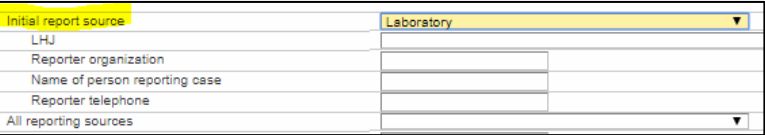


Users should leave questions blank that were not asked in the investigation.

Parent and Child Questions

WDRS contains parent questions and child questions. Parent questions always appear in the model. Child questions do not appear in WDRS until the parent question is answered and in a certain way (e.g. answering 'Yes' to 'Hospitalized overnight' will prompt a field to input the facility).

WDRS will only show the parent questions until data is input, however, paper forms show all applicable fields. The dependent relationship of the child questions are indicated on the paper forms by either appearing on the same line as the parent question, or by indentation on the following line.

Paper form	WDRS
The 'Initial report source' question on the paper form displays all child questions with indentation.	The 'Initial report source' question in WDRS does not display the child questions until a response is input.
	<p>Before a response is input</p> 
	<p>After a response is input</p> 



Some fields in WDRS, particularly dates, have additional drop-down fields that may not appear until the field is completed, and the user tabs to or navigates the cursor to the following field.

Search Icon



When a magnifying glass icon appears next to a field, click on the icon to search for a response from a preexisting list. Best practice is to enter the first few letters of the name followed by an asterisk (*). This is called a **Wildcard Function**, a process that will allow the system to search for terms that match the initial characters input, as well as unknown characters that may follow the asterisk. In the example below, searching 'Harborview' retrieves no results (first image), whereas searching 'harb*' returns numerous options (second image).

Full Name	Street Address	City	State	Zip Code
Harborview Med Ctr-Er	325 9th Ave	Seattle	WA	98104
Harborview Med Ctr-Inpt	325 9th Ave	Seattle	WA	98104
Harborview Med Ctr-Outpt	325 9th Ave	Seattle	WA	98104
Harborview Med Ctr-Unk	325 9th Ave	Seattle	WA	98104
Harborview Medical Center East-Unk	325 9th Ave # 359815	Seattle	WA	98104
Harborview Medical Center Neurology-Unk	325 9th Ave	Seattle	WA	98104
Harborview Medical Center-Sop-Unk	325 9th Ave	Seattle	WA	98104
Harborview Medical Center-Trauma Icu-Unk	325 9th Ave	Seattle	WA	98104

Concerns

Red error messages will appear for illogical entries, such as entering an onset date or vaccination date before the birthdate. These illogical entries will generate concerns which are displayed under 'Notices' on the **Basic Information** section of the **Event Summary Screen**.



'Concerns' may prevent rules from running in the system. It is important to resolve concerns as they occur.

For example, Brucellosis has infant-specific questions that will only appear if 'age at symptom onset' is less than 365 days. If 'Symptom onset date' is incorrectly entered with a date preceding DOB, the concern '**Symptom onset date cannot be before birthdate**' will generate.

This concern will prevent WDRS from calculating the age at symptom onset, and therefore, will not display infant-specific questions.

CDC Forms



Several conditions previously requiring CDC forms will no longer need to be faxed to the OCDE. As of June 2018, those conditions include: *novel influenza, pediatric influenza death, legionellosis, and typhoid fever.*

Uncertain Dates



The handling of uncertain dates in WDRS varies by the program area.

For GCDs:

1. If month and year are known and you can make a close estimate of the day, pick a day.
Note: Do not select 'Derived' = 'Yes' if this is used to populate the symptom onset date.
2. If the month and year are known and you cannot make a close estimate of the day, input the first of the month for that month and year.
Note: Select 'Derived' = 'Yes' if this is used to populate the symptom onset date.
3. If the date is unknown, do not enter it. This is especially important for the symptom onset date.



Be sure to routinely save the data input into each question package by either clicking on the 'Save and Stay' button to remain in that question package, or the 'Save' button which takes you back to the **Event Summary Screen**.

Wizards

Wizards are condition-specific and use relevant questions from the different question packages to create one spot for data entry. Wizards are designed to streamline data entry and make data viewing easier. WDRS paper forms are designed to match the respective condition's wizard in WDRS.

On the **Event Summary Screen** select the Wizards drop down at the bottom on the screen, select the condition from the dropdown, and click 'View Wizard.'

Event Data	Lab Results	Concerns	Persons	Tasks	Surveys	Calendar	Event Properties	Event History
Question Packages								
Question Package	Person	Last Update	Updated By		Status			
Administrative	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]		Incomplete			
Demographics	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]		Completed			
Clinical and Laboratory	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]		Incomplete			
Risk and Response	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]		Completed			
Transmission Tracking	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]		Completed			
Treatment	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]		Completed			
Contact Tracing Form	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]		Completed			
CDC Notification	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]		Completed			
Section Headers for Wizards Only	Jane Doe	03/15/2018	Lindsay Horn [Ima0303]		Completed			
View Question Package Wizards View Wizard								

The following sections walk through various wizard subsections. Additional fields, not often included in the wizards, are described in their corresponding question package section.

ADMINISTRATIVE

Wizards begin by collecting administrative information using select fields from the **Administrative** question package. This section is similar across all GCD conditions.

The screenshot shows the 'ADMINISTRATIVE' wizard form. The 'Event Data' tab is selected. The 'Question Packages' sidebar on the left has 'Administrative' selected. The main form contains the following fields:

- Select reporting address
- Accountable county (dropdown)
- * Investigator (text input)
- LHJ Case ID (optional) (text input)
- LHJ notification date (MM/DD/YYYY date picker)
- Case classification (dropdown)
- Final case classification (dropdown)
- Investigation status (dropdown)
- Investigation start date (MM/DD/YYYY date picker)
- Investigation complete date (MM/DD/YYYY date picker)
- Case complete date (text input)

A red box highlights the 'View Question Package' button in the sidebar. A red arrow points from this button to the 'Accountable county' field in the main form. A red text box at the bottom of the form states: "This question will remain locked until all of the following questions have been answered: Investigator, LHJ notification date, Investigation start date and accountable county".

Accountable County (required)

This field is auto-filled based on the reporting address of the person, which was entered either at event creation or on the **Persons Tab** afterwards. To populate the field, click on the 'Select reporting address' link and a pop-up menu will appear with addresses previously input. Click on

'Select an Official Address' next to the correct address and this will populate the 'Accountable County' and autofill the address fields 'City,' 'County,' 'State,' 'Zip code,' and 'Country'.

To change address information, return to the **Event Summary Screen** and select the **Persons Tab**. Click the 'Edit Person' button and select 'Add Address Type.' Enter and save the additional address and it will appear as an option when you click on 'Select reporting address.'

Out-of-state events are assigned 'Accountable county' = DOH OCDE. If you determine an event to be out of state, assign a task to the DOH program area to update the 'Accountable county.'



If you need to maintain visibility to the event for any reason, be sure to share the event with your LHJ before assigning the task to update 'Accountable county'.

Investigator (required)

Enter the primary data case manager for this event. This can be changed to another investigator in your jurisdiction. For transfers outside of your jurisdiction, contact the OCDE. The * indicates that if left blank, the status of this question package on the **Event Summary Screen** will read as **Incomplete**. However, there are no required fields other than those to create an event (condition and person's name).

LHJ Case ID (optional)

Optional field for LHJ use.

LHJ Notification Date (required)

Enter the date the LHJ is made aware of a suspect or confirmed case or received information on the person by phone, fax, or email. Note that this is an assessment field (old 5930 report).

Case Classification (required)

Classifications are based on national surveillance case definitions used by the National Notifiable Diseases Surveillance System (NNDSS: <https://wwwn.cdc.gov/nndss/case-definitions.html>) or a DOH surveillance case definition for conditions not included in NNDSS (included in the condition's guideline).

Depending on the condition, WDRS will auto-classify certain conditions based on a combination of laboratory and/or clinical information. Auto-classification fields are read-only. If the case classification assigned by WDRS is incorrect, the user will need to update the previously entered laboratory and/or clinical information that is driving the classification.



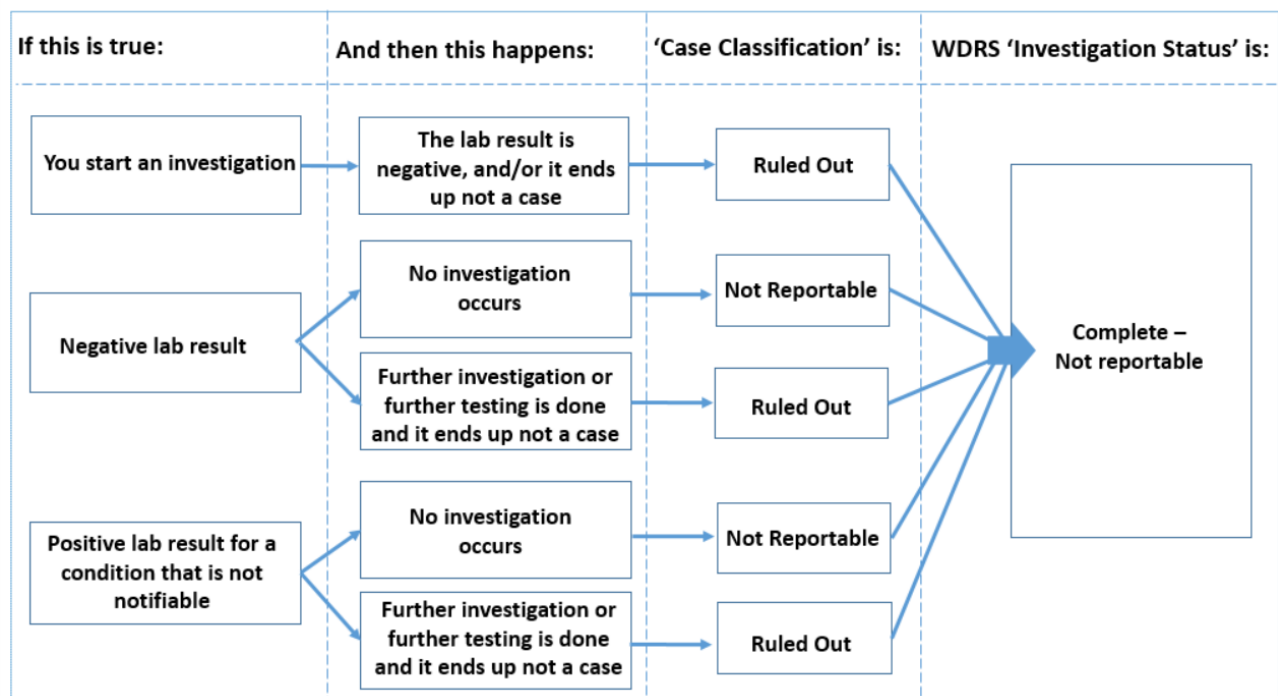
For further clarification on the GCD conditions that auto-classify, please see the Auto-Classification Flowcharts [\[Appendices A-H: Auto-Classification Flowcharts\]](#).

For conditions that **do not** auto-classify, the case investigator will provide classification by following the surveillance case definitions for the condition. Options include:

- Classification pending

- Confirmed
- Not reportable
- Probable – See table
- Ruled out – See table
- Suspect – To be selected when the event fits a formal suspect case classification, regardless of whether a suspect case for that condition is reportable to CDC; may also be selected when the symptoms that lead to the notifiable condition report are consistent with the clinical presentation of the disease, but the case can be neither confirmed nor ruled out with the information available.

Use the chart below to determine when events are ‘Ruled out’ vs. ‘Not reportable’. This logic applies to all conditions **that do not include** animal bites:



Final case classification

This read-only field pulls data entered in the ‘Case classification’ field (for both auto-classified and manually entered) or from the ‘Case classification override’ field in the **Administrative** question package. Once the record is saved, and the rules have run, the ‘Final classification’ status is populated from the most recently updated fields. After saving, the user can return to the question package to edit the fields that derive the ‘Final classification’ status.



Each case will only have one classification.

Investigation Status (required)

Selected from the dropdown menu, options include:

- Complete
- Complete – not reportable to DOH
- Unable to complete
 - Select this if applicable or if the person is lost to follow up (LTFU). A free text box will appear to specify the reason. If LTFU, input either:
 - Unable to reach: If no contact was made with the person
 - LTFU: If partial contact was made with the person
- In progress

Investigation start date (required)

Input the investigation start date. The investigation start date cannot precede the LHJ notification date or error message will appear. Note that this is an assessment field (old 5930 report).

Investigation complete date

Input the date the investigation was completed. This may be when all that can be done locally is complete, but you're still be waiting for lab results.

Case complete date (required)

This field will unlock once the required fields are completed, including '*Investigator,' 'LHJ notification date,' 'Investigation start date' and 'Accountable county.' Input the date that all labs, test results, genotyping, etc. have arrived and are input. Inputting a 'Case complete date' will effectively *close* the event for the LHJ and the event will exit your open event workflows.

Outbreak related

If an event is outbreak related, the LHJ has the option to complete the 'Outbreak related' field. If 'Yes', additional fields will appear to input 'LHJ Cluster ID' and 'LHJ Cluster Name.' 'Cluster ID' and 'Cluster Name' will be input by the OCDE with outbreak details.

- **Cluster ID:** DOH-only editable field for a numeric cluster ID
- **Cluster Name:** DOH-only editable free text field

DOH review status

DOH review status is completed by the OCDE. Auto-classified conditions will populate with 'Auto-classification' when successfully classified.

Senior Epi staff review

This checkbox will be used by the OCDE as workflow exits criteria.

REPORT SOURCE

REPORT SOURCE	
Initial report source	<input type="text"/>
All reporting sources	<input type="text"/>



This section is the same across all GCD conditions.

Initial report source

Select an initial reporting source from the drop-down. Additional fields will appear after any selection, including:

- 'Reporter organization'
- 'Name of person reporting case'
- 'Reporter telephone'

All reporting sources

If there are additional reporting sources that you would like to track, select an option from the 'All reporting sources' dropdown menu. Additional fields will appear as above.

Multiple reporting source entries are possible. If you wish to add additional reporting sources, select 'Add New' next to the 'All reporting sources' field and additional fields will appear to input reporting sources.

DEMOGRAPHICS

Demographics	
Suggested open-ended language if interviewing patient:	
What race or races do you consider yourself (your child)? You can be as broad or specific as you'd like.	
Indicate ALL race values reported under "Race" and "Additional race(s)" fields.	
* Race (select all that apply)	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other Race <input type="checkbox"/> Patient declined to respond <input type="checkbox"/> Unknown
* Specify whether American Indian and/or Alaska Native (required if available)	<input type="checkbox"/> American Indian <input type="checkbox"/> Alaska Native
* Specify whether Native Hawaiian and/or other Pacific Islander (required if available)	<input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Pacific Islander
* What race or races do you consider yourself (your child)? You can be as broad or specific as you'd like. (check all responses)	<input type="text"/>
* Do you consider yourself (your child) Hispanic, Latino/a, or Latinx?	<input type="text"/>
What is your (your child's) preferred language (check one?)	<input type="text"/>



This section is the same across all GCD conditions.

Age

This question will only be visible if a date of birth is unknown and not entered on the **Persons Tab**. When the user enters the age, an additional field will appear to specify the units - years or months.

Race

This field allows for one or more selections, unless 'Unknown' or 'Patient declined to respond' is chosen. Options include: American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, or White. If 'Other' is selected, a drop-down will appear to further specify.

Specify whether American Indian and/or Alaska Native

This field allows for one or more selections. Options Include: American Indian or Alaska Native.

Specify whether Native Hawaiian and/or other Pacific Islander

This field allows for one or more selections. Options include: Native Hawaiian or Pacific Islander.

What race or races do you consider yourself (your child)? You can be as broad or specific as you'd like.

Indicate the patient's race(s) by selecting the name of the race from the list of answer options. This field allows for one or more selections. If you are unsure whether a particular race is on the drop-down list, enter the first letter of the race and the list will progress to the section with values starting with that letter.

Do you consider yourself (your child) Hispanic, Latino/a, or Latinx?

Hispanic or Latino description includes if patient considers themselves Cuban, Mexican, Puerto Rican, South or Central American, or of other Spanish culture or origin, regardless of race.

What is your (your child's) preferred language?

Identify the patient's preferred language by selecting the option from the list of options. If a language other than English is selected, a drop-down will appear asking if an interpreter is needed.

Is the patient employed?



This field will only show if the person is at least 12 years of age.

Occupation and school details are at the discretion of the county. This information might only be applicable to conditions spread person-to-person in these settings. This may be considered optional entry if disease spread in these settings is not a concern. Select one of these options:

- Yes
- No
- Unknown

If 'Yes' is selected, a comment box will appear to allow you to specify:

- **Occupation**

Type the occupation if known. After entering text, additional fields will appear to collect 'Occupation type' (listed below), 'Work site name,' 'Street address,' 'Suite number,' 'City,' 'State,' 'Zip code,' and 'Phone number.'

- **Occupation type**

Select an occupation type from the dropdown menu of occupations at high risk for communicable diseases. Multiple entries for 'Occupational type' are possible by selecting the 'Add New' link that will appear next to the occupation textbox. Choices include:

- Animal care worker
- Correctional facility employee
- Daycare worker
- Farm/dairy worker
- Food handler
- Health care worker
- Homeless shelter staff
- Migrant/Seasonal farmworker
- Other

Occupation	
Is the patient employed	Yes ▾
Occupation	Teacher Add New
Occupation type	▾
Work site name	
Street address	
Suite number	
City	
State	WA ▾
Zip code	
Phone number	
Is the patient a student (including daycare)	Yes ▾
Type of school	College ▾
School or daycare name	Samford
Street address	
Suite number	
City	
State	WA ▾
Zip code	
Phone number	
Teacher's name	
<input type="button" value="Save"/> <input type="button" value="Cancel"/> <input type="button" value="Help"/>	

Is the patient a student?

Select one of these options:

- Yes
- No
- Unknown

If 'Yes' is selected then additional fields will appear to collect details.

- **Type of school**

Select school type from the dropdown menu. Choices include:

- Preschool/daycare
- K-12
- College
- Graduate School
- Vocational
- Online
- Other (if selected, an additional box will appear for specification).

- **School or daycare name**

Specify the name of the school or daycare. After entering text, additional fields will appear to collect 'Street address,' 'Suite number,' 'City,' 'State,' 'Zip code,' 'Phone number,' and 'Teacher's name.'

COMMUNICATIONS

COMMUNICATIONS	
Name of primary healthcare provider	<input type="text"/>
Okay to talk to patient	<input type="text"/>
Date of interview attempt	<input type="text" value="MM/DD/YYYY"/> <input type="button" value="📅"/>
Patient could not be interviewed	<input type="text"/>
Alternate contact available	<input type="text"/>



This section varies slightly across GCD conditions. For example, interview questions are removed for fatal conditions (Influenza deaths or varicella deaths).

Name of primary healthcare provider

Specify the patient's primary healthcare provider and an additional field will appear for 'Telephone number.'

Okay to talk to patient



Please note: the following three fields are available to help the LHJ track their work; this is not information needed by the OCDE.

Indicate if it's okay to talk to the patient, 'Yes', 'Later', or 'Never'. If Later, a field will appear to input the starting date if it's acceptable to contact the patient.

Date of interview attempt

Specify the date and a field will appear to input the outcome. Options include:

- Complete interview
- Partial interview
- Unable to reach case/contact

Patient could not be interviewed

Indicate if this is true or false.

Alternate contact available

If 'Yes', additional fields appear to collect 'Alternate contact type,' 'Alternate contact name' and 'Alternate contact phone number.'

CLINICAL INFORMATION

This section includes fields from the **Clinical and Laboratory** question package and varies widely across GCDs. It may have any or all of the following subsections in varying orders with and differing content:

- Clinical Information
- Clinical features

- Predisposing conditions
- Clinical testing
- Hospitalization
- Vaccination
- Culture (only for *Highly Antibiotic Resistant Organism [HARO]* events)
- Laboratory (only for *Diphtheria* events- all other laboratory information is entered in the **Lab Results Tab**)
- Pregnancy (only for female of reproductive age)
- Physician Reporting/Patient Healthcare (only for *Tularemia* events)

Below are questions that frequently appear in each section:

CLINICAL INFORMATION	
Complainant ill	<input type="text"/>
Symptom onset date	MM/DD/YYYY <input type="text"/>
Diagnosis date	MM/DD/YYYY <input type="text"/>
Illness duration	<input type="text"/>

The ‘Clinical Information’ section captures details on whether the patient was ill. In this section, the conditions *Arboviral disease, other, rare disease, and shellfish poisoning* require the user to indicate the specific condition being investigated. The user will generally see the below fields, as well as additional condition-specific fields (e.g., *Rabies, suspected human exposure; Influenza, seasonal; Highly antibiotic resistant organism [HARO]; etc.*).

Complainant ill

Select ‘Yes’, if the person is symptomatic. Otherwise, select ‘No’ or ‘Unknown’.

Symptom onset date

Enter the symptom onset date and an additional field will appear to indicate if the date was derived. Refer to the ‘Uncertain Dates’ guidance above. Select ‘No’ if the date is exactly known or it’s a close estimate of the date (within 1-2 days). Select ‘Yes’ if the month and year are known but you cannot make a close estimate of the day.

Diagnosis date

This is the specimen collection date for the first positive lab or the date of clinical diagnosis of the condition, whichever is earlier. Criteria vary by condition.

Illness duration

Enter the number (using the digits key) indicative of the duration and hit tab or move the cursor to the next field and additional fields will drop-down to input the unit for illness duration (days, weeks, months, or years) and to indicate if the illness is still ongoing.

Clinical Features

Clinical Features	
Any fever, subjective or measured	▼
Recurring fever	▼
Anorexia (loss of appetite)	▼
Arthralgia (joint pain)	▼
Arthritis	▼
Endocarditis	▼
Fatigue	▼
Headache	▼
Hepatomegaly	▼
Myalgia (muscle aches or pain)	▼
Meningitis	▼



This section is very condition-dependent. For some conditions, this section begins by asking:

Any fever, subjective or measured

If 'Yes' is selected, a dropdown asking if temperature was measured and additional fields that vary by condition may appear.

The remainder of this section will most frequently consist of a list of symptoms, including asking if the person is asymptomatic, each with a dropdown menu. Answer choices commonly include:

- Yes
- No
- Unknown

Selecting 'Yes' (and in some cases 'No') may cause additional fields to appear. These fields may ask you to provide an onset date, the site of the symptom, or to specify further.



Case-defining fields **do not** appear in bold font in WDRS.

Predisposing Conditions

Predisposing Conditions	
Alcoholism	▼
Asthma/reactive airway disease	▼
Bone marrow transplant	▼
Chronic heart disease	▼
Chronic kidney disease	▼
Chronic liver disease	▼
Chronic obstructive lung disease	▼
Diabetes mellitus	▼

- Disposition
- If selected, will ask for facility name which may or may not be applicable.

Died of this illness

If the patient died of this illness select 'Yes' which will prompt the message 'Please fill in the date death information on Person Screen.' When a Death Date is entered on the **Person page**, the message will disappear.

Additional fields may appear.

- **Autopsy performed**

Select one of the options:

- Yes
- No
- Unknown

- **Location of death**

Select one of the options:


- Outside of hospital (e.g., home or in transit to the hospital)
- Emergency department (ED)
- Inpatient ward
- ICU
- Other (if selected, an additional comment box will appear for specification)

- **Death certificate lists disease as a cause of death or a significant contributing condition**

Select one of the options:

- Yes
- No
- Unknown

Pregnancy

Pregnancy	
Pregnancy status at time of symptom onset	Postpartum ▼
(Estimated) delivery date	MM/DD/YYYY 
Weeks pregnant at any symptom onset	<input type="text"/>
OB Name	<input type="text"/>
OB Phone	<input type="text"/>
OB Address	<input type="text"/>
Outcome of pregnancy	<input type="radio"/> Still pregnant <input type="radio"/> Delivered - full term <input type="radio"/> Delivered - preemie <input type="radio"/> Delivered - unknown <input type="radio"/> Fetal death (miscarriage or stillbirth) <input type="radio"/> Abortion <input type="radio"/> Other

If the patient sex is female and age is between 12-50 years old, the pregnancy subsection will appear for applicable conditions. Fields commonly included are outlined below, though there are condition-specific additional fields; for example, pertussis will ask for pregnancy status at cough onset.

Pregnancy status at time of symptom onset

Select one of these options:

- Pregnant
- Postpartum
- Neither
- Unknown

If Pregnant or Postpartum is selected, additional fields will appear to collect: ‘(Estimated) delivery date,’ ‘Weeks pregnant at any symptom onset’ (enter the number of weeks the person is pregnant at symptom onset, using the digit keys. Example: ‘5’ instead of ‘five’), ‘OB Name,’ ‘OB Phone,’ and ‘OB Address.’

- **Outcome of pregnancy**

This field will appear if any selection is made in ‘Pregnancy status as time of symptom onset,’ including ‘Neither’ or ‘Unknown’. Select one of the following:

- Still pregnant
- Delivered – full term
- Delivered – preemie
- Delivered – unknown
 - If any of the three Delivered options is selected, a dropdown will appear to indicate the delivery method. Options include:
 - Vaginal
 - C-section
 - Unknown
- Fetal death (miscarriage or stillbirth)
- Abortion
- Other (if selected, an additional comment box will appear for specification)

Vaccination

Vaccination	
Ever received Pertussis containing vaccine	▼
Vaccine information available	▼
Pertussis vaccination up to date for age per ACIP	▼

This section will be present when applicable and content varies by condition. The first field will typically ask if the person has received a vaccine specific to the condition in the past. If 'Yes', additional fields may appear and ask for the number of doses of vaccine received. If No, an additional field may appear to specify the reason not received.

Vaccine information available?

If 'Yes' is selected, an additional field will appear.

- **Date of vaccine administration**

Enter the date that the vaccine was administered. Additional fields may appear.

- **Vaccine administered (Type)**

Select the vaccine type from a dropdown list of condition-specific vaccine options.

- **Information source**

Several conditions will ask for the information source. Options include:

- WIISS

- The Washington State Immunization Information System is a data repository and data retrieval facility for health care providers and health plans to exchange immunization data.

- Medical record

- Patient vaccination card

- Verbal with approximate date

- Verbal only/no documentation

- Other state IIS

- **Vaccine lot number**

Enter the vaccine lot number in the free text field.

- **Administering provider**

Enter the name of the administering provider in the free text field.



Multiple entries are possible by selecting the 'Add New' link that appears next to the date of vaccine administration field.

Vaccination up to date for age per ACIP?

Several conditions will ask if the patient is up to date on their vaccinations according to ACIP guidelines. If 'No' is selected, an additional field will appear.

- **Vaccine series not up to date reason**

Select one from the following reasons:

- Religious exemption

- Medical contraindication
- Philosophical exemption
- Laboratory confirmation of previous disease
- MD diagnosis of previous disease
- Underage for vaccine
- Parental refusal
- Other (if selected, an additional comment box will appear for specification)
- Unknown

Novel influenza and *influenza death* events will ask about vaccination in both current and previous season. For an infant with pertussis, this section also includes fields about mother’s TDAP status during pregnancy.

Clinical Testing

Clinical testing	
CSF obtained	<input type="text"/>
Pleocytosis (CSF)	<input type="text"/>
<i>Thrombocytopenia defined as platelets < 100,000 /mm³</i>	
Thrombocytopenia	<input type="text"/>

This section will include supportive laboratory results, such as leukopenia or thrombocytopenia, when applicable.

Case-defining tests for the condition will be entered in the separate **Lab Results Tab**. This section is most extensive for Prion disease.

Culture Information

Culture information	
Types of infection associated with culture(s)	<input type="text"/>
Initial culture site	<input type="text"/>
Was the initial isolate tested for carbapenemase	<input type="text"/>
Was this patient positive for the SAME organism in the year prior to the date of the initial culture	<input type="text"/>

This section will only appear for *Highly Antibiotic Resistant Organism conditions (HARO)*.

Laboratory

Laboratory	
Culture of <i>C. diphtheriae</i> from nares, pharynx, tonsil or larynx	<input type="text"/>  

Case-defining laboratory results must be entered in the **Lab Results Tab**. Only *Diphtheria* events will have a Laboratory subsection to collect information.

Physician Reporting/Patient Healthcare

Physician Reporting/Patient Health Care	
Date first seen by healthcare provider	<input type="text" value="MM/DD/YYYY"/> 

This section appears only for Tularemia.



Click the 'Save & Stay' button to save your data.

RISK AND RESPONSE

RISK AND RESPONSE (Ask about exposures 10 days before symptom onset)	
Travel	
Travel out of	<input type="text"/>

This section includes fields from the **Risk and Response** question package and varies across conditions such as if there was a known contaminated food product, contact with a lab confirmed case, contact with a recent foreign arrival, congregate living, outdoor recreational activities, and/or food consumption. It may also ask about occupational exposure. The section header will provide a condition-specific timeframe for which to ask exposure information.

It may have any of the following subsections, when applicable:

- Travel
- Risk and Exposure Information
- Food Exposure
- Water Exposure
- Animal Exposure (animal setting is a subsection of this)
- Sexual Exposure
- Exposure and Transmission Summary
- Public Health Issues
- Public Health Interventions/Actions

Travel

The **Risk and Response** section will begin by collecting travel information from the grid on the case reporting form. Initial travel fields vary by condition, though all conditions will include (and most begin with) the following fields.

Travel out of

Select one of the options:

- County (if selected, a drop-down will appear for specification)
- State (if selected, a drop-down will appear for specification)

- Country (if selected, a drop-down will appear for specification)
- Other

If any option is selected for travel, additional fields will appear to collect ‘Destination,’ ‘Start date,’ and ‘End date.’



Multiple entries are possible by selecting the ‘Add New’ link.

Risk and Exposure Information

Risk and Exposure Information	
Is case a recent foreign arrival (e.g. immigrant, refugee, adoptee, visitor)	<input type="text"/>
Contact with recent foreign arrival	<input type="text"/>
Does the case know anyone else with similar symptoms or illness	<input type="text"/>
Congregate living	<input type="text"/>



This section has questions shared across many diseases (described below) as well as condition-specific questions.

Is case a recent foreign arrival (e.g. immigrant, refugee, adoptee, visitor)

Indicate if the case is a recent foreign arrival. Options include:

- ‘Yes’
- ‘No’
- ‘Unknown’

If ‘Yes’, a textbox will appear to specify the country from the drop-down options.

Does the case know anyone else with similar symptoms or illness

If ‘Yes’, additional fields or a comment box may appear to collect details such as the ill person’s contact onset date and relationship.

Food Exposure

Food Exposure - Food exposure timeframe: 1 - 10 days prior to onset of illness	
Sources of food	<input type="text"/>
During food exposure timeframe, did you eat food outside the home (including take-out)	<input type="text"/>
Any food sampled (grocery, warehouse stores, food court, etc.)	<input type="text"/>
Consumed any of the following during exposure period	
<i>Meat</i>	
Poultry (chicken, turkey, other)	<input type="text"/>
<i>Other processed meat products</i>	
Other processed meat products (jerky, deli meats, sausage, chitlins, other)	<input type="text"/>
<i>Miscellaneous meat exposures</i>	

Conditions provide exposure timeframes within which to collect exposure information.

Foodborne conditions will collect in-depth information about food exposures with any of the

following categories: Meat, Fish and Seafood, Eggs and Dairy, Produce, Drinks, Other Foods/Supplements.

Sources of food

This question corresponds to the 'Sources of food' grid on the case reporting form. Select food sources (e.g., ethnic markets or warehouse stores) from the drop-down menu. An additional field will appear to list the store/retail names and locations.

Multiple entries are possible by selecting the 'add new' link that will appear next to the 'Sources of food' response.

During food exposure timeframe, did you eat food outside the home (including take-out)

Answer choices include:

- 'Yes'
- 'Maybe'
- 'No'
- 'Unknown'

If 'Yes' or 'Maybe', additional fields will appear to specify the setting:

- Restaurant
- Catered events
- School or institution meal
- Group meal (e.g. potluck, reception)
- Street-vended food

If 'Yes' or 'Maybe', additional fields will appear to collect details.



The date/time of restaurant meals must be entered in the specified format, MM/DD/YYYY, HH:MM, AM/PM. Any deviations will result in an error message and deletion of date data input. If the exact time is unknown, input 08:00 AM for morning/breakfast time, 12:00 PM for afternoon/lunch, and 06:00 PM for evening/diner. If the time is completely unknown, leave blank or input 11:11 PM.

Subsequent food exposure fields may be categorized by type of food, e.g. Meat, Other processed meat products, Eggs and Dairy, Produce, etc. Additional fields will appear to specify further if 'Yes' or 'Maybe' are selected. Entering a date may also result in additional fields displaying.

Water Exposure

Water Exposure	
Source of drinking water known	<input type="text"/>
Untreated/unchlorinated water (e.g. surface, well, lakes, streams, spring)	<input type="text"/>
Any recreational water exposure during exposure period (Lakes, Rivers, Pools, Waterpark, etc.)	<input type="text"/>

Water exposure questions vary by condition. Enteric conditions will often have the following questions.

Source of drinking water known

If 'Yes', additional fields will appear to indicate and describe the drinking water source.

Untreated/unchlorinated water (e.g. surface, well, lakes, streams, spring)

If 'Yes', a field to 'Describe' will appear.

Any recreational water exposure during exposure period (Lakes, Rivers, Pools, Waterpark, etc.)

If 'Yes', a field to input 'Water site name/location' will appear. Once completed, additional fields will appear to collect additional details.

Animal Exposure

Animal Exposure	
Any contact with animals at home or elsewhere	<input type="text"/>
Any contact with pet food or treats	<input type="text"/>
Any contact with farm animals	<input type="text"/>
<i>Animal Settings</i>	
Live on a farm or other setting that has farm animals	<input type="text"/>
<i>Visited or worked on any of the following settings even if no direct animal contact</i>	
Zoo	<input type="text"/>
County/state fairs, 4-H events, or similar events where animals were present	<input type="text"/>
Pet store or other place where animals are sold or adopted	<input type="text"/>
Other settings with animals	<input type="text"/>

When applicable, field will be present to collect information on animal exposure and animal settings. Additional fields may appear if 'Yes' or Maybe are selected.

Sexual Exposure

Sexual Exposure	
Any type of sexual contact with others during the exposure period	<input type="text"/>

When present, this subsection will collect details of sexual contact.

Exposure and Transmission Summary

Exposure and Transmission Summary	
Likely geographic region of exposure	<input type="text"/>
Likely geographic area of exposure must be completed	
International travel related	<input type="text"/>
Suspected exposure type	<input type="text"/>
Suspected exposure setting	<input type="text"/>
Exposure summary	<input type="text"/>
Suspected transmission type	<input type="text"/>
Suspected transmission setting	<input type="text"/>

This section appears, varyingly, for all conditions and is intended be filled out after the investigation.

Likely geographic region of exposure

Indicate the likely region of exposure. Drop-down options include:

- In Washington state
 - Select if no time spent in endemic areas during incubation period AND possible exposure in Washington
 - If in Washington is selected, a drop-down will appear to indicate a 'County' of likely exposure
- US but not Washington state
 - Select if time spent in out-of-state endemic area during incubation period AND no time spent in endemic area in Washington during incubation period (i.e. spent entire incubation period outside Washington), OR
 - Time spent in out-of-state endemic area during incubation period AND exposure much more likely during travel than in Washington (e.g. Lyme disease case with travel to Minnesota for part of incubation period)
 - If US but not Washington state is selected, a drop-down will appear to indicate a 'State' of likely exposure
- Not in US
 - Select if time spent in endemic country during incubation period AND no time spent in endemic area in Washington during incubation period, OR
 - Time spent in endemic country during incubation period AND exposure much more likely in endemic country than in Washington
 - If Not in US is selected, a drop-down will appear to indicate a 'Country' of likely exposure
- Unknown

- Select if time spent in endemic area in Washington during incubation period and time spent in endemic area outside Washington during incubation period, OR
- Unknown travel history
 - If Unknown is selected and there is travel, name counties/states/countries of likely exposure

You can indicate more than one geographic region by selecting the 'Add New' link which will appear after specifying the county, state, or country. The 'Likely geographic area of exposure must be completed' message in red highlights the importance of this question to understanding where exposure may have occurred and implications for control. The message will disappear when entry is completed and is merely an indicator.

International travel related

Indicate the timing of international travel in relation to exposure period. Options include:

- During entire exposure period
- During part of exposure period
- No international travel

Suspected exposure type

Exposure is how the case patient was exposed to the disease. Select suspected exposure type from the standard drop-down. The forms will indicate which options apply to that condition.

- Describe (e.g. name of facility, dates)

Any answer to exposure type will yield an additional textbox to describe further.

Suspected exposure setting

Indicate the suspected exposure setting from the drop-down list, including school, healthcare facility, corrections, restaurant, and hotel.

- Describe (e.g. name of facility, dates)

Any answer to exposure type will yield an additional textbox to describe further.

Exposure summary

Input exposure summary details in the comment box.

Suspected transmission type

Transmission is how the case patient spread the disease to others. Transmission questions may not be present if the disease is not spread person to person, for example, tetanus or shellfish poisoning.

Select suspected transmission type from the drop-down. Answer options are identical to those in the 'Suspected exposure type' drop-down.

- **Specify**
Any answer will yield an additional textbox to specify the transmission type and dates.
- **Dates**
Specify the dates to the suspected transmission type.



Multiple entries are possible by selecting the 'Add New' link that will appear next to the selected response.

Suspected transmission setting

Indicate the suspected transmission setting. This list will match the suspected exposure settings. Multiple entries are possible by selecting the 'Add New' link that will appear next to the selected response.

Epi Links

This section may also collect epidemiological link information. If a link is indicated, the message **'Please link the event(s) on the Event Summary Screen (WA residents only)'** will appear. Return to the **Event Summary Screen** Basic Information section and link the events through the 'View' link next to Linked Events/Contacts.

Event Summary	
Basic Information	
Event ID:	100000042
Disease:	Influenza, seasonal (required for deaths of lab-confirmed cases)
Person:	Lindsay Test ()
Dates:	Create Date: 01/09/2018
Type:	Interactive
Investigation Status:	Open (Change to Closed)
Linked Events/Contacts:	1 linked event(s)/contact(s) (View)
Attachments:	0 attachment(s) (Add)
Notices:	Workflow Status (1) Event is in workflows [View List]
	General Notifications (1) Vital Status: Alive
<input type="button" value="Edit Event Properties"/> <input type="button" value="Copy Event"/>	

If the epi-linked person resides out of state and was not diagnosed in Washington, no link is required. You may provide a description in the 'Exposure Summary' notes field. For more details visit the Linking Events quick reference guide.

Public Health Issues

Public Health Issues	
Household member or close contact in sensitive occupation or setting (HCW, childcare, food)	<input type="text"/>
Non-occupational food handling (e.g. potlucks, receptions) during contagious period	<input type="text"/>
Employed as a food handler	<input type="text"/>
Employed as health care worker	<input type="text"/>
Employed in child-care or preschool	<input type="text"/>
<i>If needed, enter detailed information in the Transmission Tracking Question Package</i>	

This section and the following are primarily for the county to document public health issues identified and actions taken. It may help determine what public health actions need to be taken, either because of a person’s occupation or activities while they were contagious. There may also be a shared exposure that has to be investigated.

Public Health Interventions/Actions

Public Health Interventions/Actions	
Exclude case from sensitive occupations (HCW, food, child-care) or situations (child-care) until diarrhea ceases	<input type="text"/>
Exclude symptomatic contacts from sensitive occupations (HCW, food, child-care) or situations (child-care) until diarrhea ceases	<input type="text"/>
Hygiene education provided	<input type="text"/>
Child-care inspection	<input type="text"/>
Test symptomatic contacts	<input type="text"/>
Restaurant inspection	<input type="text"/>
Letter sent	<input type="text"/>

This section is mainly for the LHI to document public health issues identified and actions taken, and varies by condition.

For applicable conditions, this section may begin with exclusion or isolation of sensitive occupations and symptomatic contacts. For example, STEC specifies that 2 negative stools are criteria for return to work or school. There may be a field to indicate if a letter was sent, including the date and batch date. There may also be a field for testing symptomatic contact and/or childcare and restaurant inspections.

Some common fields include:

- **Notified blood or tissue bank (if recent donation)**
 - Yes
 - No
 - Unknown

Various formats exist to collect information on prophylaxis recommendations and receipt.

- **Prophylaxis of appropriate contacts recommended**
 - Yes

- No
- Unknown
- Not applicable

If 'Yes', additional fields may appear (or already be present for some conditions) to specify 'Date recommendation for prophylaxis of appropriate contacts initiated,' 'Number of contacts recommended prophylaxis,' 'Number of contacts receiving prophylaxis,' and 'Number of contacts completing prophylaxis.' Numbers must be entered using the digits keys.

Any other public health action

Conditions may have a field to indicate if any other public health action was taken. If 'Yes', a comment box will appear to specify.

TRANSMISSION TRACKING

TRANSMISSION TRACKING	
Visited, attended, employed, or volunteered at any public settings (Child care, healthcare setting, etc.) while contagious	<input type="text"/>

The Transmission Tracking section is identical across conditions and includes questions from **Transmission Tracking** question package. This section will appear when applicable and is only useful for conditions spread person to person. When applicable, a message will appear at the top of the page to specify the contagious period.

Visited, attended, employed, or volunteered at any public settings (Child care, healthcare setting, etc.) while contagious

If 'Yes', an additional field will appear to select a setting from the dropdown list. Multiple entries are possible by selecting the 'Add New' link next to the 'Settings' field. Once specified, additional fields will appear to collect details.

TREATMENT

TREATMENT	
Did patient receive treatment/prophylaxis	<input type="text"/>

The Treatment section includes questions from the **Treatment** question package.

Did patient receive treatment/prophylaxis

If the person received treatment/prophylaxis select 'Yes'. Child questions that appear will be filtered by the condition.

Note: the wizards do not contain fields from the **Contact Tracking Form** question package or **Case Classification** question package.

NOTES

NOTES	
Notes	

Notes

This field will appear at the end of each wizard and is for optional use as needed. Event notes are intended to be input on the **Event Summary Screen** notes panel.



Click 'Save' button to save your changes and return to the **Event Summary Screen**. A 'Cancel' and 'Help' button are also available options.

Lab Results Tab

Event Data	Lab Results	Concerns	Persons	Tasks	Surveys	Calendar	Event Properties	Event History
Labs								
Lab No.	Specimen collection date	WDRS specimen type	WDRS test performed	WDRS test result	WDRS test result (additional)	WDRS interpretation code		
Add Lab Result Update Lab Result Delete Lab Result								
Details								
Last Update:								
Updated By:								
Results:								

The **Lab Results Tab** presents the user with the ability to view, add, and edit lab results for a particular event. Summary information about each lab result is displayed.

Refer to the WDRS Lab Results Manual for directions on entering labs

For GCDs, required lab fields include:

- Lab report reviewed – LHJ
- Performing lab for entire report
- Specimen identifier/accession number
- Specimen collection date* (collection)
 - If not available, Specimen received date or Result date
- WDRS specimen type
- WDRS test performed
- WDRS test result, coded
 - If applicable, the drop-down will activate based on the WDRS test performed
- WDRS result, numeric only
 - Only if a numeric result is given, including as necessary: WDRS test result, comparator and WDRS units of measure.
- WDRS result summary



Upload each lab result under the Test performed and result section using the ‘Upload Document’ link.

Lab Results	
Lab Results:	WDRS manual GCD lab DE template 20171026
Lab report information	
Lab report reviewed - DOH	<input type="text"/>
Lab report reviewed - LHJ	<input type="text"/>
WDRS user-entered lab report note	<input type="text"/>
Submitter	<input type="text"/>
If submitter is not on the pick list, please select "Laboratory not listed" and enter information below:	
Lab not listed-specify	<input type="text"/>
Performing lab for entire report	<input type="text"/>
If performing lab is not on the pick list, please select "Laboratory not listed" and enter information below:	
Lab not listed-specify	<input type="text"/>
Referring lab	<input type="text"/>
If referring lab is not on the pick list, please select "Laboratory not listed" and enter information below:	
Lab not listed-specify	<input type="text"/>
Specimen	
Specimen identifier/accession number	<input type="text"/>
Specimen collection date*	MM/DD/YYYY <input type="text"/>
Specimen received date	MM/DD/YYYY <input type="text"/>
WDRS specimen type	<input type="text"/>
Specimen type-Other, specify	<input type="text"/>
WDRS specimen source site	<input type="text"/>
Specimen source site	<input type="text"/>
WDRS specimen reject reason	<input type="text"/>
WDRS specimen reject reason-Other, specify	<input type="text"/>

Test performed and result

WDRS test performed

Test performed-Other, specify

WDRS test result, coded

WDRS test result, comparator

WDRS result, numeric only

WDRS units of measure

Test method

WDRS interpretation code

Interpretation code-Other, specify

Test result-Other, specify

WDRS result summary

Test result status

Result date

Event Data Tab

Event Data	Lab Results	Concerns	Persons	Tasks	Surveys	Calendar	Event Properties	Event History
Question Packages								
Question Package	Person	Last Update	Updated By	Status				
Administrative	Badd Bat	06/06/2017	Lindsay Horn [lhorn]	Incomplete				
Demographics	Badd Bat	06/06/2017	Lindsay Horn [lhorn]	Completed				
Clinical and Laboratory	Badd Bat	06/06/2017	Lindsay Horn [lhorn]	Completed				
Risk and Response	Badd Bat	06/06/2017	Lindsay Horn [lhorn]	Completed				
Transmission Tracking	Badd Bat	06/06/2017	Lindsay Horn [lhorn]	Completed				
Treatment	Badd Bat	06/06/2017	Lindsay Horn [lhorn]	Completed				
Contact Tracing Form	Badd Bat	06/06/2017	Lindsay Horn [lhorn]	Completed				
CDC Notification	Badd Bat	06/06/2017	Lindsay Horn [lhorn]	Completed				

Data entry without a wizard requires that you visit individual question packages on the **Event Data Tab**.

Many fields will be visible within individual question packages but not in the wizard, either because that question does not apply to that condition, it is a read-only field not requiring data entry, or is a DOH field for tracking purposes.

The following sections describe select fields found in the some of the individual question packages and not used in the wizards.

Administrative Question Package

Record creation date	<input type="text" value="03/05/2018"/>
Legacy	<input type="text" value="No"/>

Record creation date

This is the WDRS record start date pulled from the 'Create date' on the Event Summary Screen and cannot be changed.

Legacy

Legacy is a read-only field indicating if the case was created from data conversion when PHIMS data was migrated.

Administration

Override Accountable County

Case access is defined by the 'Accountable County' field and unless another LHJ has shared an event with you, you will only be able to edit events in your own jurisdiction (see quick reference guide 'Sharing an Event' for more details on event sharing). In the instance that the person is not being cared for in their county of residence, OCDE staff can override the 'Accountable County.' If this field needs to be utilized, contact the OCDE ([WDRS 'Contact Us'](#)).

Override classification

This is a DOH-only field. If checked, the classification provided by the OCDE will populate the 'Final Case Classification' field. A field will appear to input an 'Override reason' and fields will populate with the person who overrode it and the date and time.

Classification criteria

Select the criteria used for classifying this case. Options include:

- Clinical only
- Epi link and clinical
- Lab and clinical
- Lab only

Address fields

Address fields are read-only, populated from the selected reporting address. This includes the 'Washington state resident' field which populates based on the reporting address selected and it used in determining CDC notification eligibility.

NNC Event Code

This read-only field auto-populates based on the condition selected, when applicable.

Nationally Notifiable

This read-only field auto-populates based on the NNC event code, with some condition-specific indications.

Current CDC notification eligibility

This read-only field auto-populates based on whether the residency of the reporting address for that event is Washington State and the event is nationally notifiable.

Event Date – CDC

This read-only field auto-populates using a date hierarchy with the first available date from:

1. Symptom onset date
2. Diagnosis date
3. Date of first positive case defining lab
4. LHJ notification date
5. Create date in WDRS

CDC event date type

This read-only field displays the date that was used to determine the 'Event Date – CDC' from the list above.

CDC event date year

This read-only field displays the year of the date used in the 'Event Date – CDC.'

CDC event date month

This read-only field displays the month of the date used in the 'Event Date – CDC.'

Review updates after sent to CDC

This DOH-only field is used to notify OCDE staff when a change has been made to a field that was included in a previous CDC message.

Demographics Question Package

Demographics

Fields in grey autofill from patient's date of birth and sex, entered when a new event was created. To edit age and date of birth information, return to the **Event Summary Screen** and select the **Persons Tab**. Click the 'Edit Person' button to manage information about the patient.

Age years, Age in months, Age in days

Ignore these fields and refer to 'Reporting age years' and 'Reporting age months' below.

Sex at birth

This field is read-only auto-fills based on the sex selected on the **Person page**. To edit this information, return to the **Event Summary Screen** and select the **Persons Tab**. Click the 'Edit Person' button to manage information about the patient.

Reporting age years and Reporting age months

If a date of birth and 'Symptom onset date' are input, these fields will calculate with the age at symptom onset. However, if age is manually entered in the 'Age' field, the fields will simply report the person's current age, regardless of data input into 'Symptom onset date.'

Please note: If ‘Symptom onset date’ is not available, reporting ages will calculate using the ‘Event Date – CDC’ hierarchy: ‘Symptom onset date’, ‘Diagnosis date’, ‘Date of first positive case defining lab’, ‘LHJ notification date’, and ‘Record creation date’.

Clinical and Laboratory Question Package

Date of first positive case defining lab

This field is condition-dependent and will be completed by the OCDE. However, if available, the specimen collection date is often used. Refer to the guidelines for more information.

Contact Tracing Form Question Package

Contact Tracing Form	
Investigator	
Contact name	
Notes or actions needed	

The **Contact Tracing Form** question package is the same across all conditions. Fields in this question package are optional for local health jurisdiction use and not included in the wizards.

Investigator

Enter the name of the person investigating the case/contacts

Contact name

Enter the name of the contact. Once entered, additional fields will appear to collect the following details:

- ‘Date of first contact’
- ‘Date of last contact’
- ‘Symptom watch date start’
 - This will automatically populate based on the condition, incubation period, and date of first contact
- ‘Symptom watch date end’
 - This will automatically populate based on the condition, incubation period, and date of last contact
- ‘Relation to case’
- ‘Date of birth’

- 'Age'
- 'Age unit'
- 'Sex'
- 'Address'
 - You can select from addresses listed on person tab or input additional address
- Phone numbers
- 'Contact location,'
- 'Location details'
- 'Is contact symptomatic'
 - If 'Yes', additional fields for further details
- 'Last date contact followed'
- 'Immune status,'
- 'Contacted by Public Health'
- 'Prophylaxis given'
- 'High risk contact'
- 'Did this contact become a case'

Notes or actions needed

Input notes or actions needed in the comment box.

NHGQ Question Package

Additional Interview and Clinical Questions	
Before this interview how many times has the case been interviewed about their illness	<input type="text"/>
Respondent was	<input type="text"/>
Have any close contact with anyone with diarrhea or vomiting	<input type="text"/>
Are you still ill	<input type="text"/>
Food Allergies, Special Diets, Vitamins and Supplements	
If you change a pre-existing response, please note the question(s) changed and reason(s) for change in the notes field	
Any allergies that prevent you from eating a certain food(s)	<input type="text"/>
Vegetarian or vegan diet	<input type="text"/>
Did you (your child) have any special or restricted diet (medical, weight-loss, religious, cultural, etc.)	<input type="text"/>
Any commercially bottled water in personal-sized containers	<input type="text"/>
Any commercially bottled water in large, multi-user tanks or water coolers	<input type="text"/>
Did you (your child) have any vitamins, nutritional or herbal supplements, such as teas, tablets, and pills, etc.	<input type="text"/>
If you answered Yes to any questions or edited any pre-existing responses, please describe briefly	<input type="text"/>

The **NHGQ** (National Hypothesis Generating Questionnaire) question package will appear for Salmonellosis and STEC events. This question package may be assigned by DOH if needed in multi-state outbreaks or clusters.

The question package will appear if 'Copy answers to NHGQ' is checked in the **Risk and Response** question packages.

NHGQ Question Package	
Copy answers to NHGQ	<input checked="" type="checkbox"/> Yes

Case Classification Question Package

WDRS will auto-classify certain conditions based on a combination of laboratory and/or clinical information. Each applicable condition is associated with a read-only **Case Classification** question package. The Case Classification question package contains condition specific, case-defining criteria to prompt auto-classification. For certain enteric conditions, a positive bacterial culture is sufficient to prompt a “confirmed” auto-classification status. Applicable conditions must meet specific criteria to be auto-classified. For instance, meningococcal disease requires a culture-positive specimen from a sterile site. In contrast, Lyme disease requires a positive IgM test result from a specimen taken within 30 days of symptom onset”.

As information is populated in WDRS, the **Case Classification** question package fields will automatically update and drive the case classification.

CDC Notification Question Package

This question package will be used by the OCDE and will be hidden in future versions of WDRS.

Legacy Question Package

This question package contains information about events converted from PHIMS.

Additional Tabs

Refer to the [WDRS Reference Guide](#) for details on Concerns, Tasks, Surveys, Calendar, Event Properties, and Event History tabs.

Persons Tab

The **Persons Tab** provides demographic details about the person associated with the event, and is used to add or update identifying or contact information about the person that was not available when the event was created. To add information or change fields, click the ‘Edit Person’ button.

In addition to the ‘Edit Person’ button, you will see five sub-tabs that allow users to view or update information about the person.

Basic Information Subtab contains the most recently entered information about the person such as name, address, birth date, age, gender. This information is available for viewing

only. To make changes to the Basic Information, click the 'Edit Person' button. Saved changes will appear in the Basic Information table.

Address Information Subtab contains information regarding the person's addresses. This is where information regarding both current and past addresses is accessible. The person's address information can be edited or updated by clicking the **Add Address Type** or **Edit Address** buttons which take you to the lower part of the **Edit Person screen**.

The address history appears at the bottom of the screen. The most recent address information is at the top of the list.

Linked People Subtab provides information about the person's contacts or social network information.

Demographic History Subtab contains information such as a person's last name that can be tracked if a person changes his or her name for any reason. Historical names are noted here with older information at the bottom.

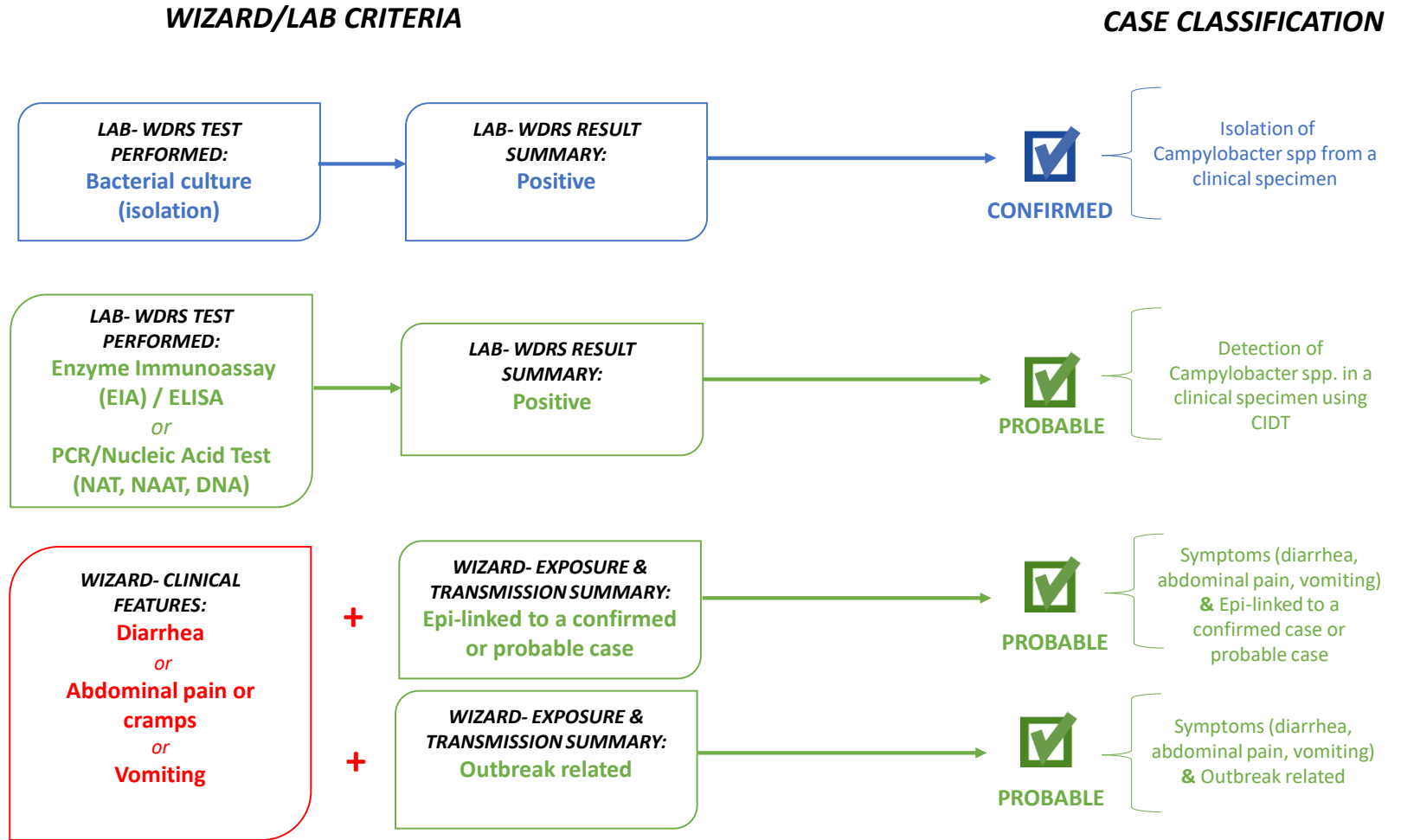
Notes Subtab is used to keep track of notes that are related to the person, not to the event. These would be notes such as the fact that a person is blind, paraplegic, or has Down's syndrome; these things are unlikely to change over time and are not necessarily specific to a person's event. Just as with the event notes, the date and user name are associated with each person note entered.



For persons with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY call 711).

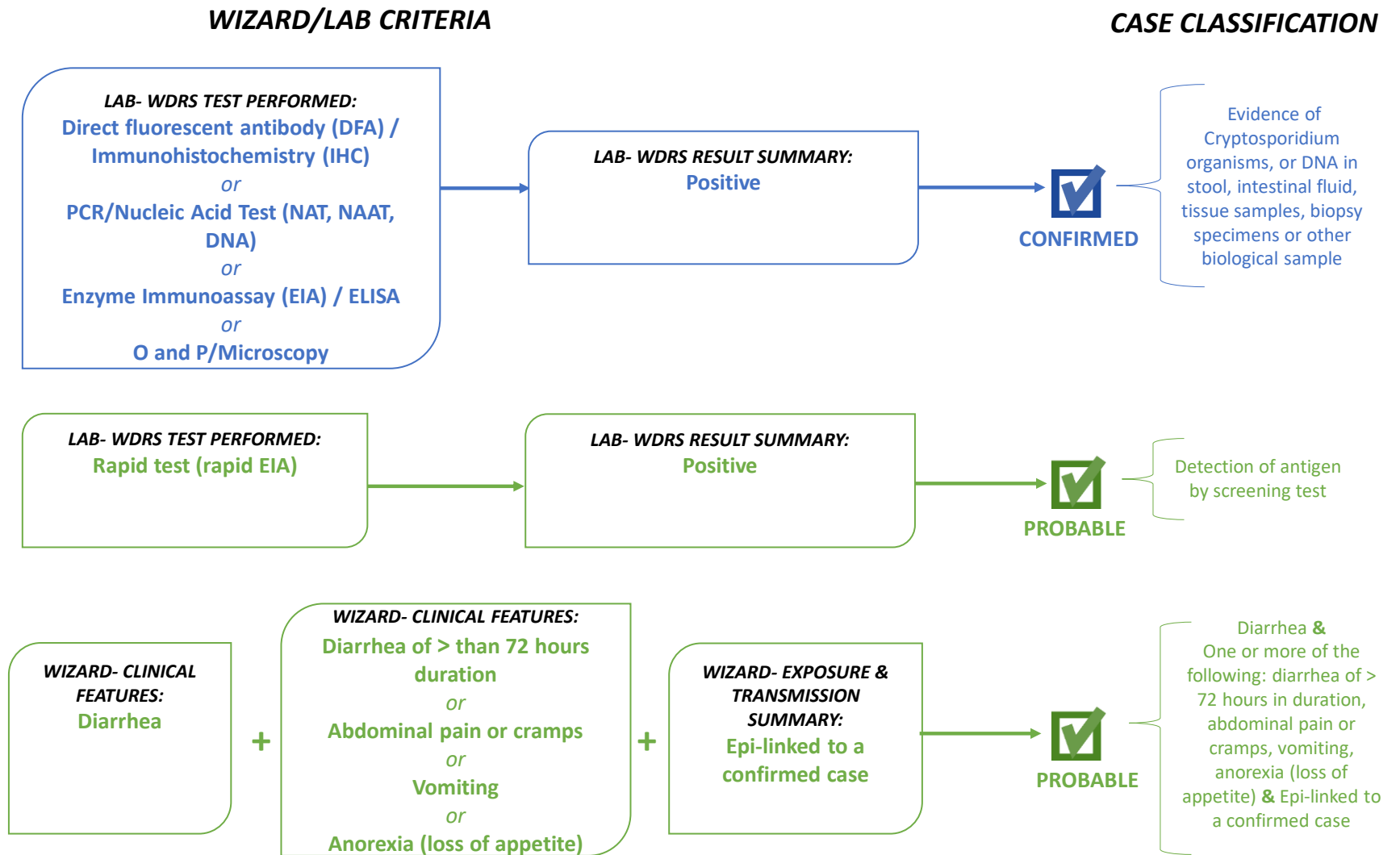
Appendix A: WDRS Auto-Classification of Campylobacteriosis

Campylobacteriosis



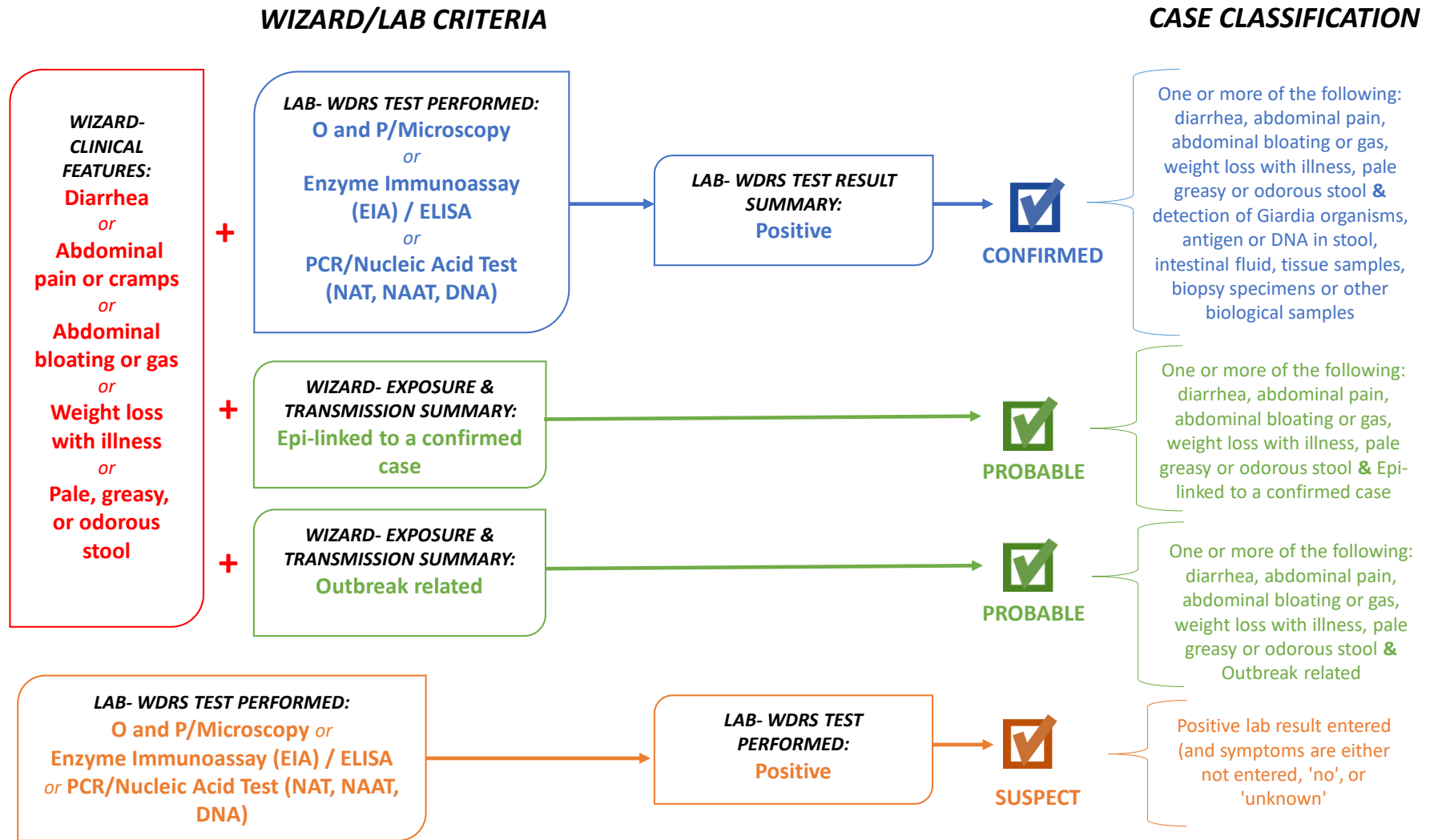
Appendix B: WDRS Auto-Classification of Cryptosporidiosis

Cryptosporidiosis



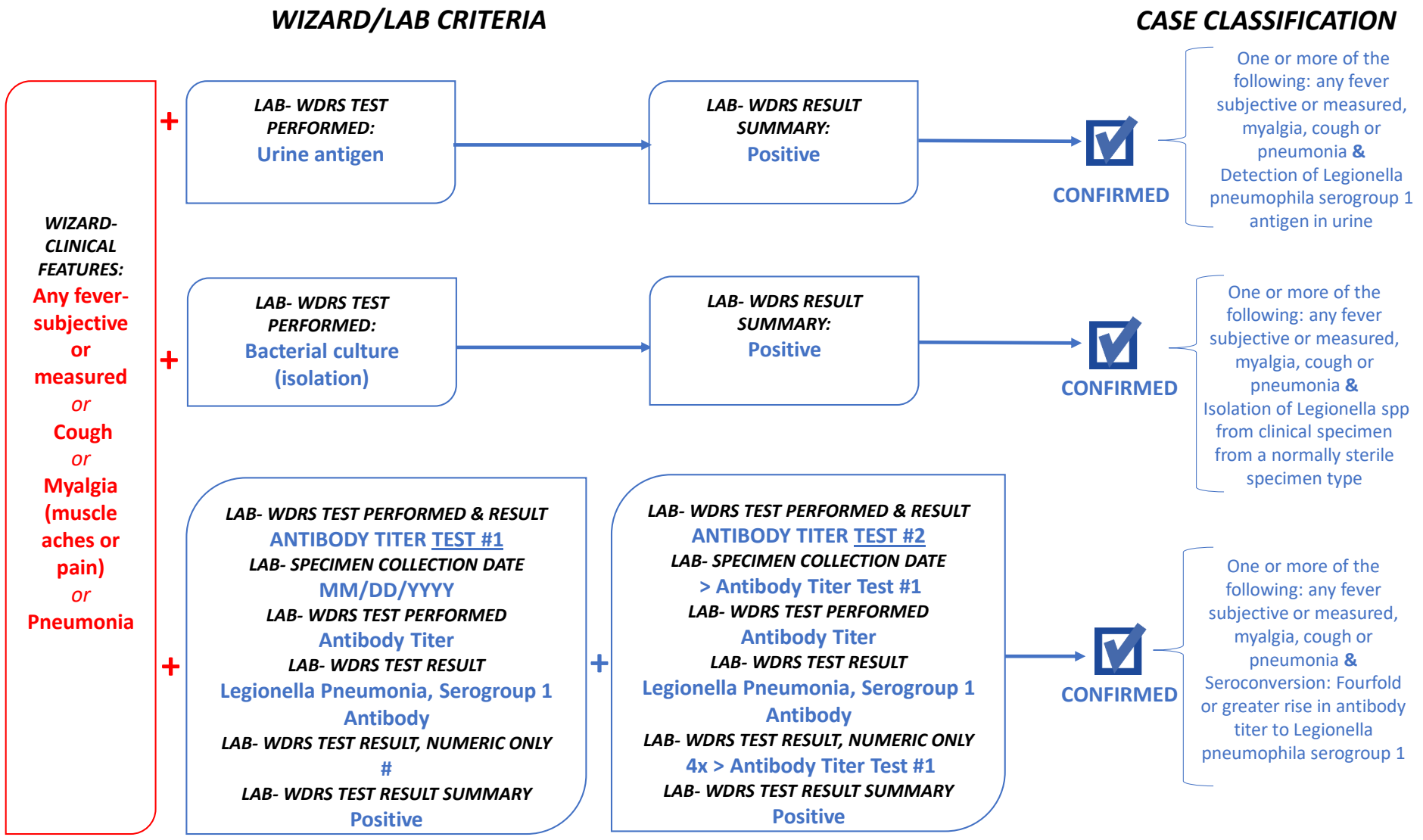
Appendix C: WDRS Auto-Classification of Giardiasis

Giardiasis



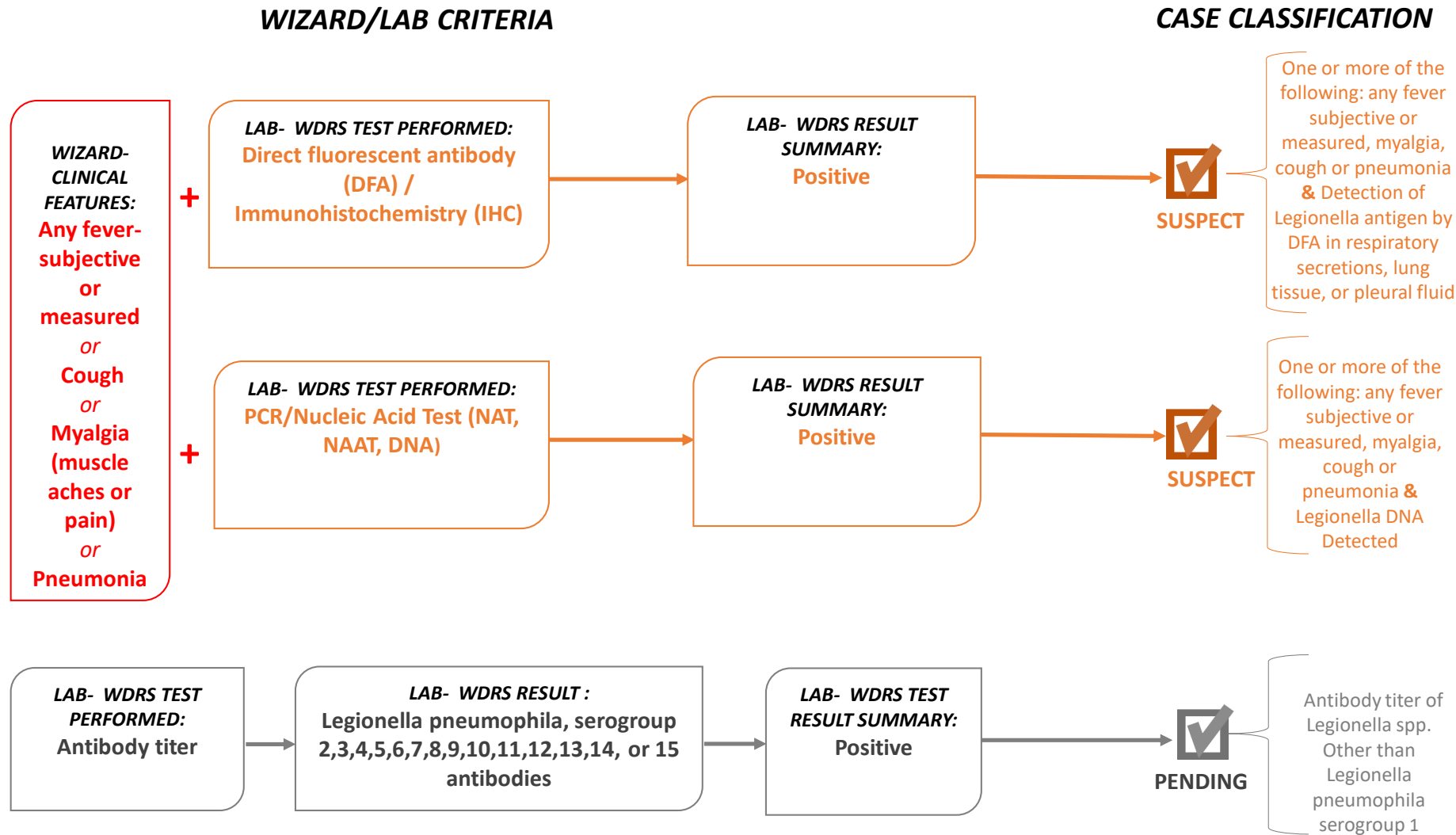
Appendix D: WDRS Auto-Classification of Legionellosis

Legionellosis (page one of two)



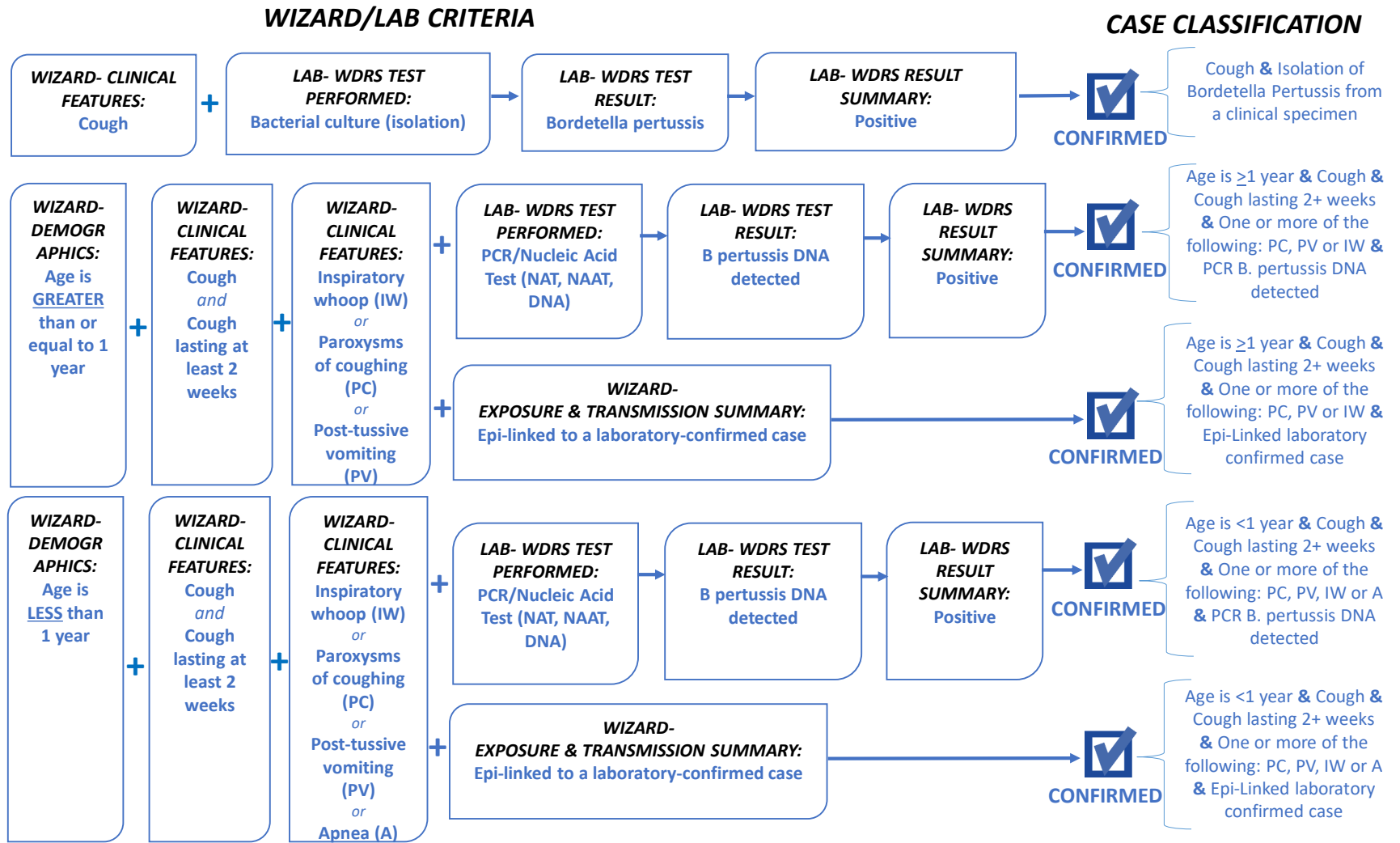
Appendix D: WDRS Auto-Classification of Legionellosis (continued)

Legionellosis (page two of two)



Appendix E: WDRS Auto-Classification of Pertussis

Pertussis (page one of two)

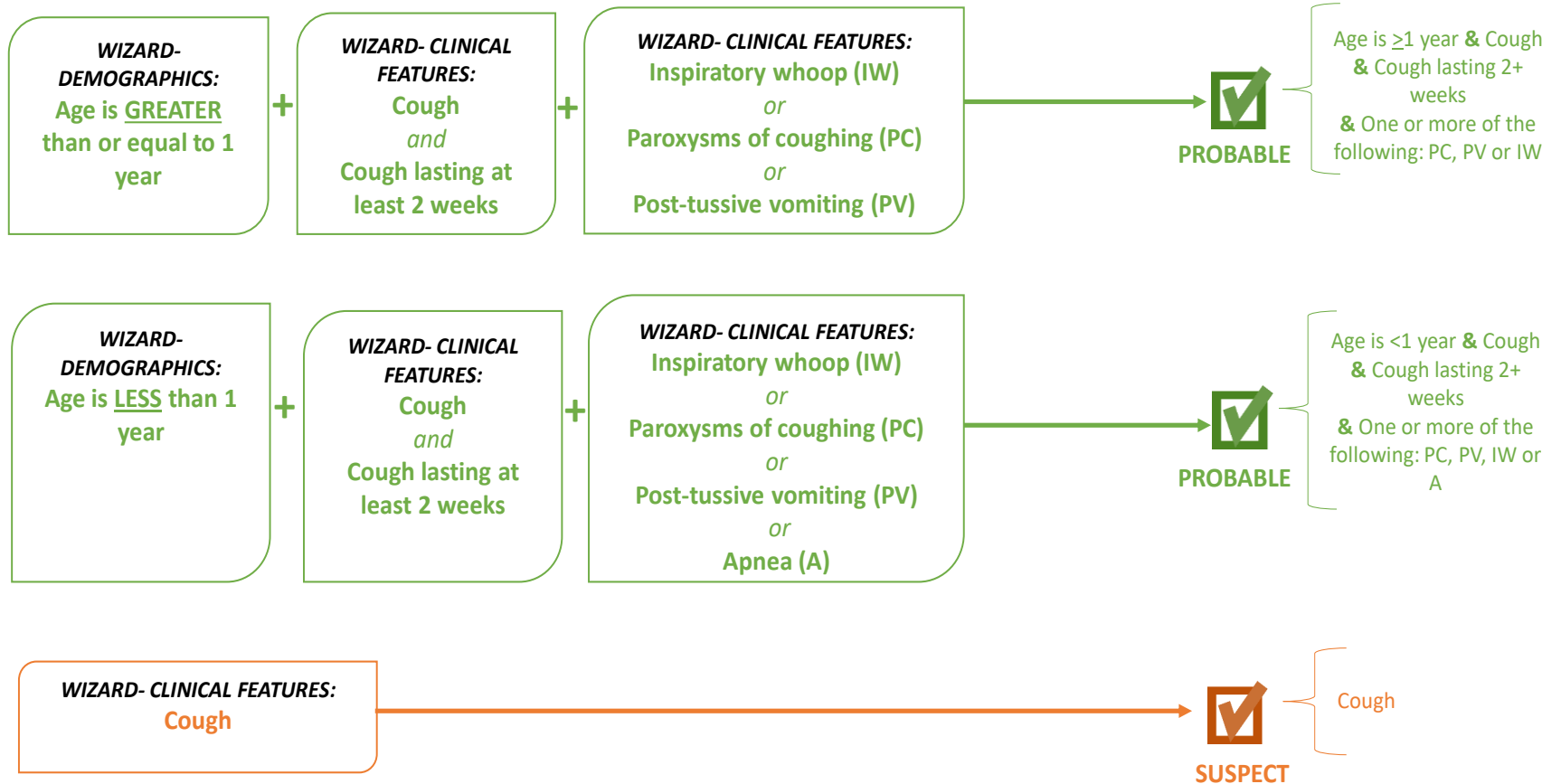


Appendix E: WDRS Auto-Classification of Pertussis (continued)

Pertussis (page two of two)

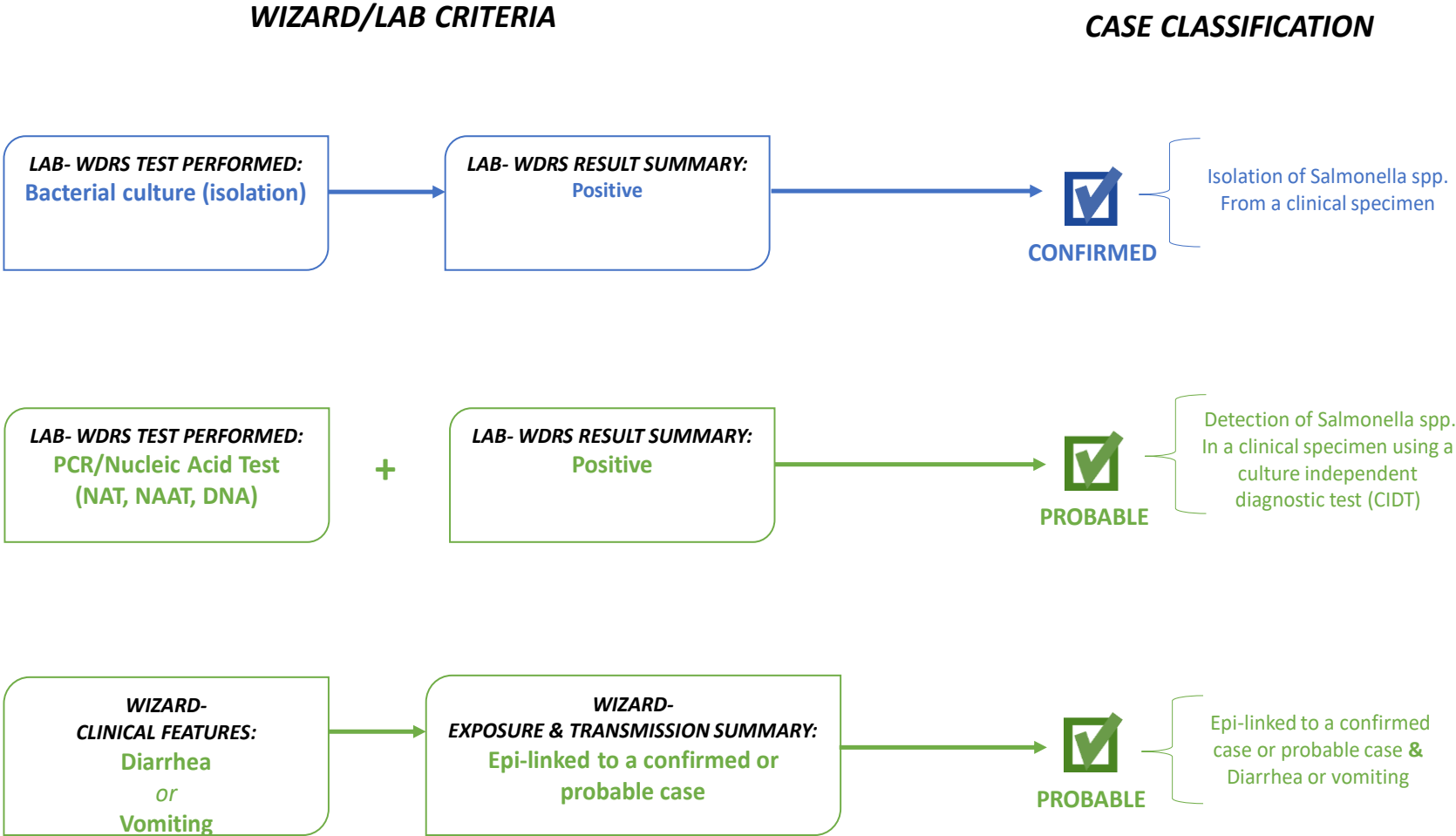
WIZARD/LAB CRITERIA

CASE CLASSIFICATION

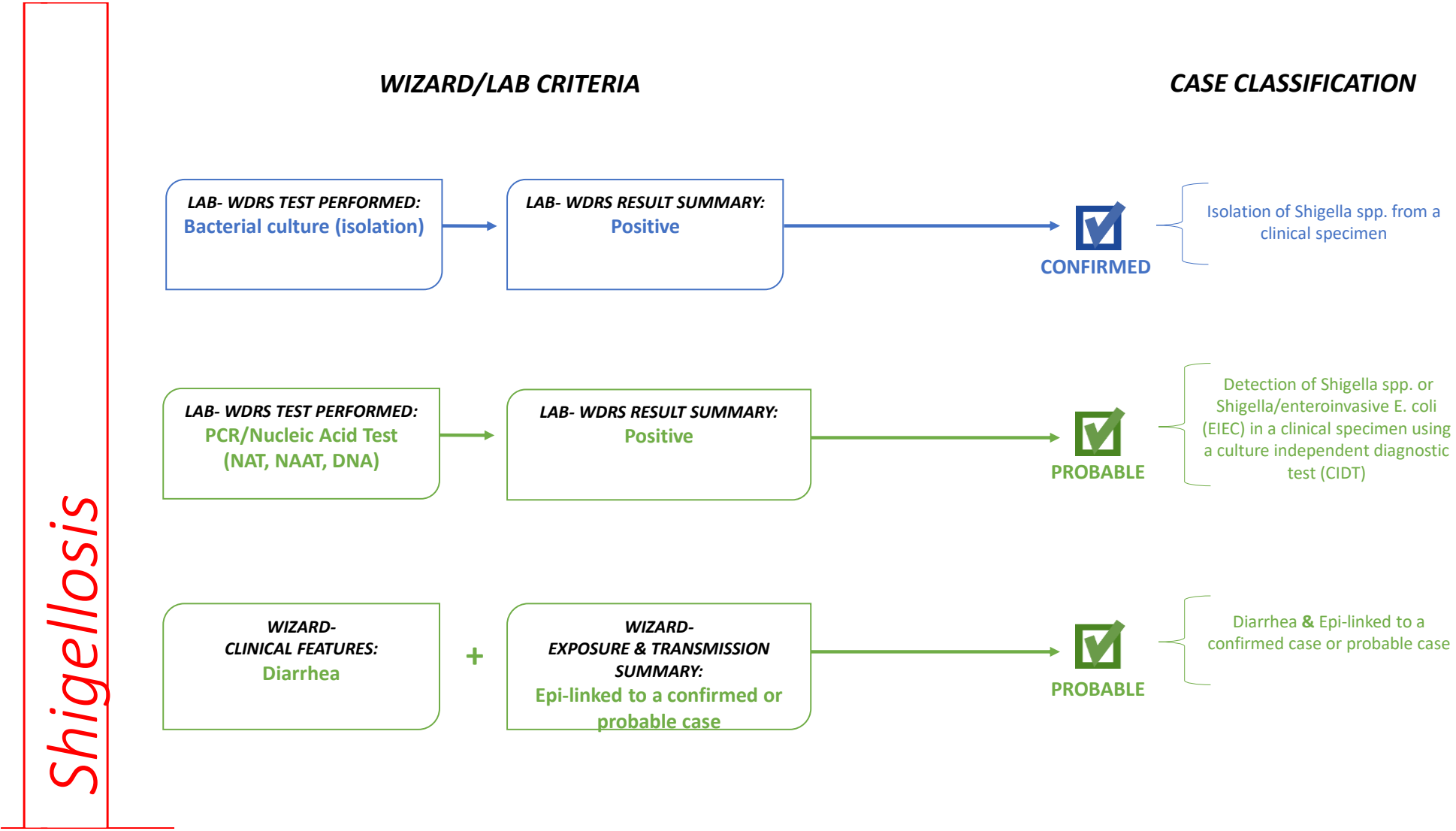


Appendix F: WDRS Auto-Classification of Salmonellosis

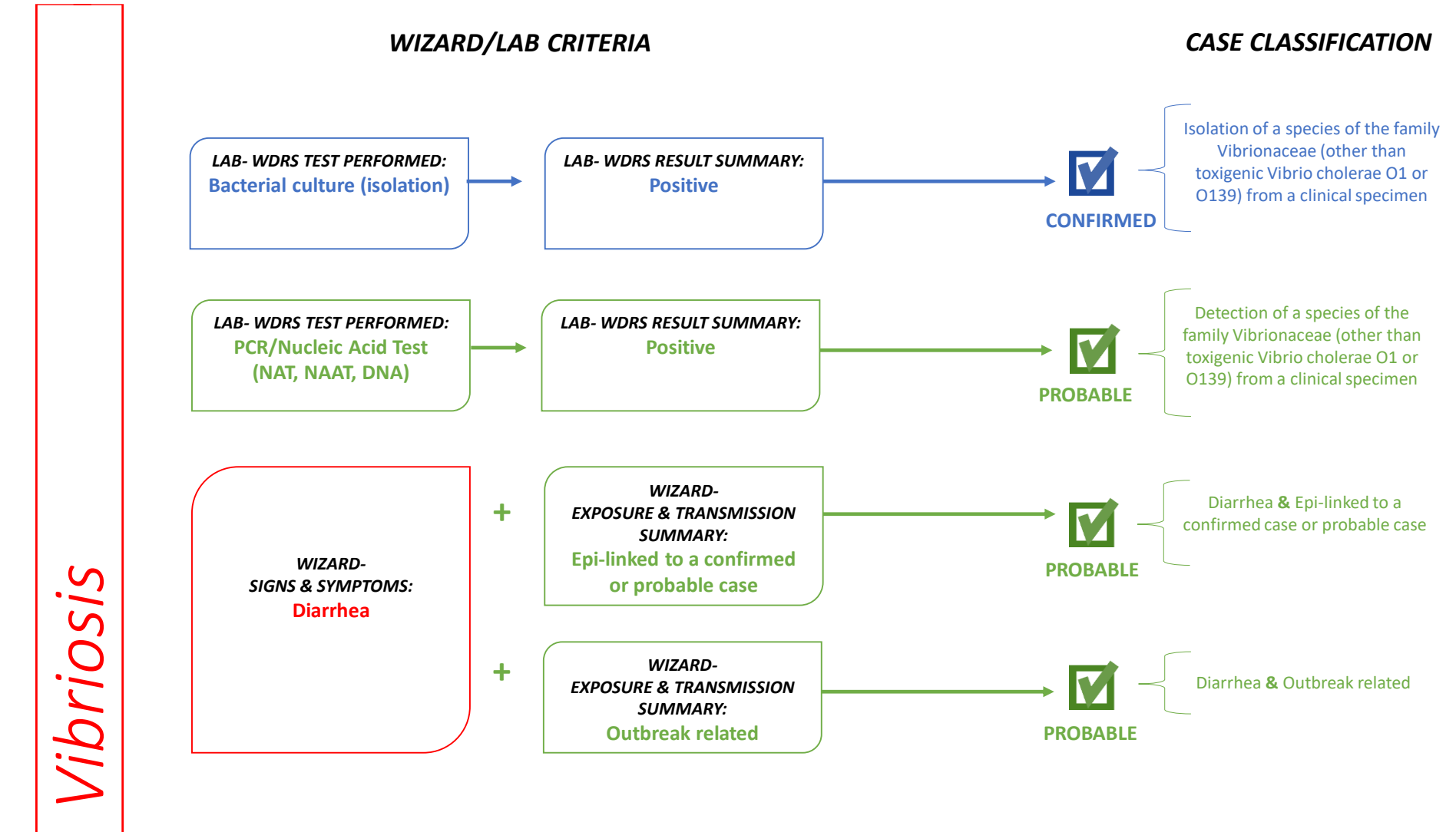
Salmonellosis



Appendix G: WDRS Auto-Classification of Shigellosis



Appendix H: WDRS Auto-Classification of Vibriosis



Revision History

Date	Version	Reason for change
6/25/2018	1	Initial posting
1/9/2023	2	Updates to reflect changes since go-live (diagram for reportable/not reportable, new table of contents and appendices, accessibility updates which include alternative text to all graphics, grammar, and formatting) Adjust all flowcharts to include Barium updates Adjust demographics race questions to reflect SBOH updates