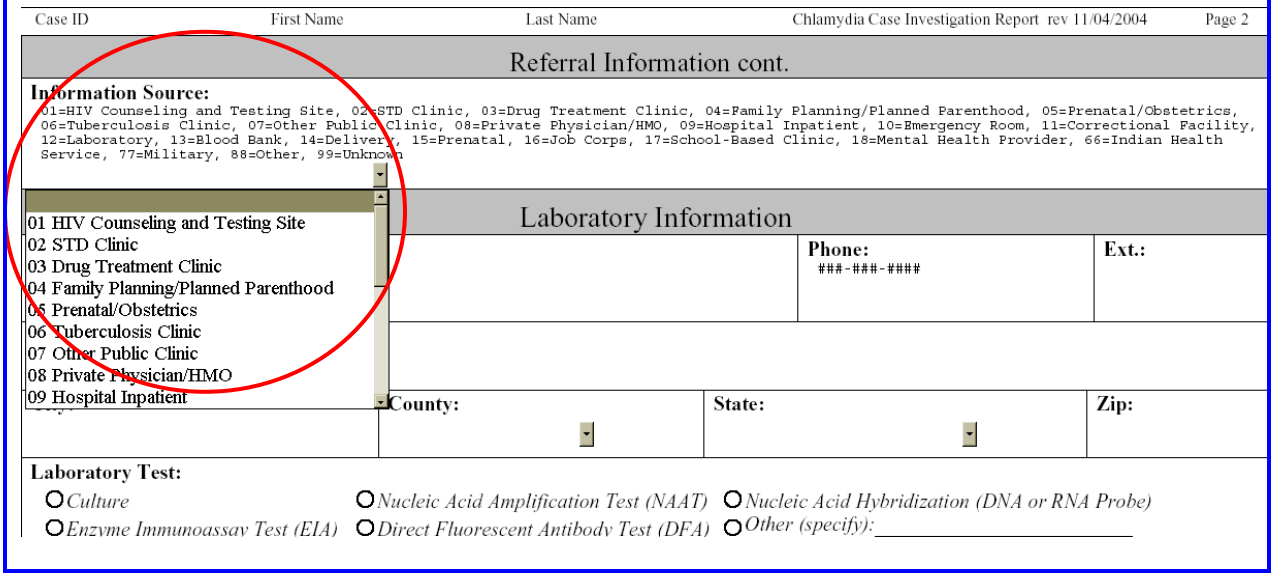
MDSS and STDs

1. **STD Data Fields Issues**:

   a. "Information Source" is a required field. This is an easy field to miss, as it doesn't really look like the other data field in MDSS. It is a drop box located at the top of Page 2. Please make sure you are completing this field:


Case ID | First Name | Last Name | Chlamydia Case Investigation Report rev 11/04/2004 | Page 2

Referral Information cont.

Information Source:
01=HIV Counseling and Testing Site, 02=STD Clinic, 03=Drug Treatment Clinic, 04=Family Planning/Planned Parenthood, 05=Prenatal/Obstetrics, 06=Tuberculosis Clinic, 07=Other Public Clinic, 08=Private Physician/HMO, 09=Hospital Inpatient, 10=Emergency Room, 11=Correctional Facility, 12=Laboratory, 13=Blood Bank, 14=Delivery, 15=Prenatal, 16=Job Corps, 17=School-Based Clinic, 18=Mental Health Provider, 66=Indian Health Service, 77=Military, 88=Other, 99=Unknown

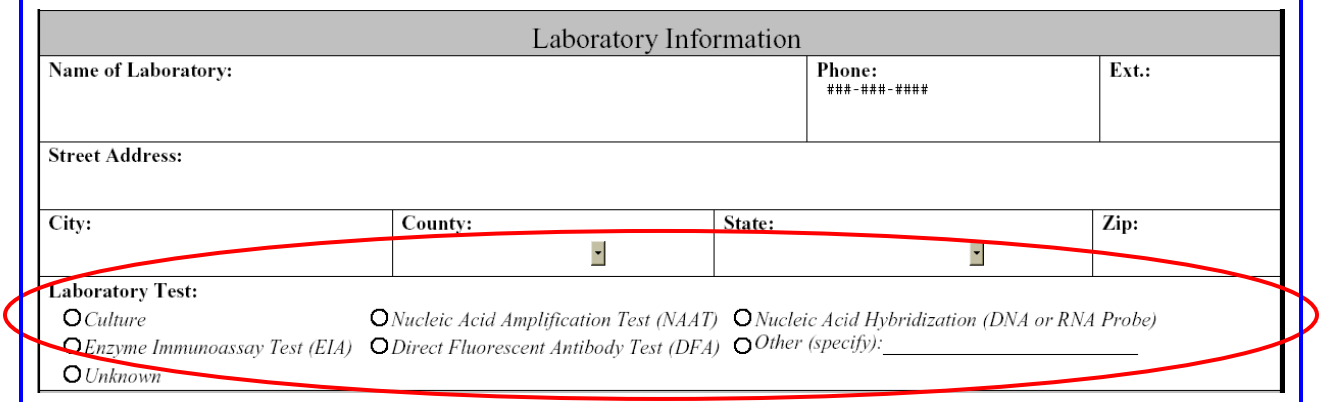
01 HIV Counseling and Testing Site
02 STD Clinic
03 Drug Treatment Clinic
04 Family Planning/Planned Parenthood
05 Prenatal/Obstetrics
06 Tuberculosis Clinic
07 Other Public Clinic
08 Private Physician/HMO
09 Hospital Inpatient

Laboratory Information

Phone: ###-###-####
Ext.:
County:
State:
Zip:

Laboratory Test:
Culture | *Nucleic Acid Amplification Test (NAAT)* | *Nucleic Acid Hybridization (DNA or RNA Probe)*
Enzyme Immunoassay Test (EIA) | *Direct Fluorescent Antibody Test (DFA)* | *Other (specify):*_____

   b. The "Laboratory Test" field gives two options that can be considered "DNA tests for GC/CT" – Nucleic Acid Amplification Test (NAAT) and Nucleic Acid Hybridization (DNA or RNA probe). I will be sending a list of common commercially available GC/CT tests to aid in determining which tests belongs in which categories. Look for it soon.


Laboratory Information

Name of Laboratory:
Phone: ###-###-####
Ext.:
Street Address:
City:
County:
State:
Zip:

Laboratory Test:
Culture | *Nucleic Acid Amplification Test (NAAT)* | *Nucleic Acid Hybridization (DNA or RNA Probe)*
Enzyme Immunoassay Test (EIA) | *Direct Fluorescent Antibody Test (DFA)* | *Other (specify):*_____
Unknown

c. "Site of specimen" is also a required field. Please mark this field "unknown" if you do not know the site from where the specimen was collected.

Specimen Information	
Date Specimen Taken: mm/dd/yyyy	**Date of Laboratory Results:** mm/dd/yyyy
Site of Specimen: ○ *Urethra* ○ *Cervix* ○ *Rectum* ○ *Pharynx* ○ *Eye* ○ *Vagina* ○ *Urine* ○ *Other (specify):* _____ ○ *Unknown*	

d. The "Co-infection information" section presents a new option within MDSS: creating a new case of GC or CT directly from the case detail (pdf) form.
   i. If the case was entered as an Electronic Lab Report (ELR) with results for both GC and CT, the MDSS will already know if there should be one or two cases in the system. It will create cases appropriately and no longer allow changes to the fields "Does this patient have a GC/CT co-infection" (the co-infection field) and "If yes, does the GC/CT case need to be created on MDSS" (the create-a-case field).
   ii. If the case was referred to the LHD as an ELR with only one test result or by means other than ELR, the LHD should mark the co-infection field and the create-a-case field appropriately.
   iii. The MDSS has been programmed to only allow these two fields to be manipulated one time . . . it then makes the fields un-editable.
      1. If the co-infection/create-a-case fields are incorrectly filled out with a yes, find the other case in MDSS and mark it "not-a-case" and "cancelled."
      2. If the co-infection/create-a-case fields are filled out incorrectly with a no, you must create the new case manually (through the new case entry process, merging the patient information, but creating a new case).

The co-infection field

The create-a-case field

Last Name Chlamydia Case Investigation

Co-Infection Information	
Does This Patient Also Have A Gonorrhea Co-Infection? ○ *Yes* ○ *No* ○ *Unknown*	**If yes, does the Gonorrhea case need to be created on MDSS?** ○ *Yes* ○ *No*
Has this patient been treated for THIS infection? ○ *Yes* ○ *No* ○ *Unknown*	**If yes, date of treatment:** mm/dd/yyyy
Specify DRUG/DOSAGE: ○ *400mg Cefixime* ○ *125mg IM Ceftriaxone* ○ *250mg IM Ceftriaxone* ○ *500mg Ciprofloxacin* ○ *250mg Levofloxacin* ○ *2g IM Spectinomycin* ○ *Other (specify):* _____ ○ *Unknown*	

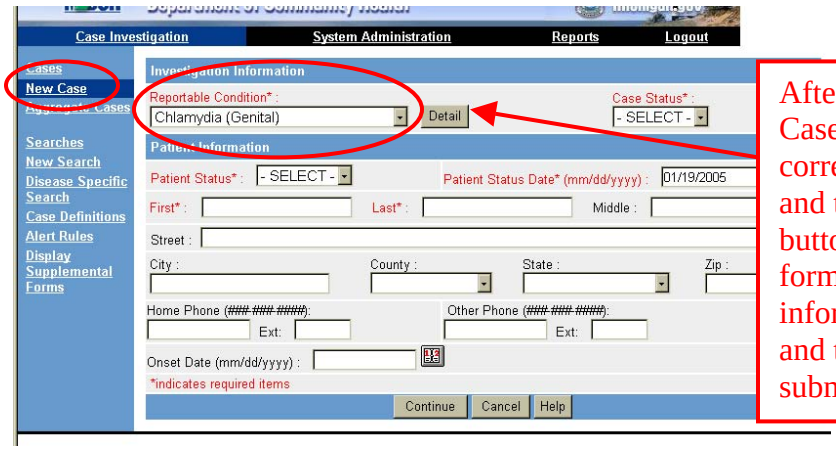
Treated by Provider (report contact information only if different than the primary provider)

First:	Last:	Phone: ###-###-####	Ext.:	Email:
Street Address:				
City:	**County:**	**State:**	**Zip:**	

e. Other date field definitions for clarification purposes:
    i. Referral date – date the case is entered into the MDSS (automatically assigned)
    ii. Diagnosis date – date of the laboratory results
    iii. Onset date – date of first symptoms (leave it blank if you don't have it)
    iv. Date specimen taken – specimen collection date
    v. Date of laboratory results – date lab tests are confirmed (front of V76)
    vi. Date of treatment – date medications were administered
    vii. Patient status date – associated with the "patient status" field, used to indicate the current status of that patient (inpatient, outpatient, died) as of that date, this date is automatically assigned to the day the case was entered
f. If the Patient Address is not available, please enter the LHD address as a default.
g. If the above information is not being filled out, please be aware that Katie Macomber has been updating the fields with the information she has available. This has been mainly limited to completing the address fields and information source.

2. **STD Morbidity Reporting Issues:**

a. STD cases, like all communicable diseases, should be reported by county of patient residence. This means that patients seen in a LHD STD clinic should not be counted for that county if they reside in another county. (For example, a resident of County X travels to County Y's LHD STD clinic for testing and treatment. That disease should be reported in County X – the county of patient residence.) College students living in County Y for the school year should be reported by their school address (in County Y).
b. This is complicated by the LHD STD clinic having all the testing and treatment information available for their clients but not being able to enter this data once the case is sent to another LHD. There are three options to address this issue:
    i. The LHD STD clinic can enter the case into MDSS using the clinic's address during the new case entry process, fill out the case detail (pdf) form, and <u>change the address to the patient's address as the final step</u>, or
    ii. The LHD STD clinic staff can open the case detail (pdf) form during the new case entry process and enter all the patient, testing and treatment information directly on the form and then submit the new case (see image below), or



After opening the "New Case" screen, select the correct reportable condition and then click the "Detail" button. The case detail (pdf) form will open, all the information can be entered, and the new case can be submitted.

iii. The LHD STD clinic can enter the new case with the patient's address and fax the testing and treatment information to the receiving LHD to be filled in by the receiving LHD.

Under all the above options, the receiving LHD will have to close the case (mark it as completed), as the sending LHD will not be able to see the case once they change the address and it leaves their jurisdiction.

c. Along these lines, the MDSS, as a surveillance system, generally should not be used to demonstrate clinic volume for funding purposes. If there is a desire to determine how many cases of disease were seen in a particular LHD STD clinic, a request can be made of MDCH personnel to search all cases statewide for cases seen by certain providers, if one of the following fields is filled out in a standardized manner: testing provider or treatment provider. For example, all cases seen by the Kent County Health Department STD clinic should be listed as "KCHD" in the provider field . . . not "KCHD" and/or "KCHD STD" and/or "Kent STD clinic" and/or "KCHD clinic" etc.

3. **Other STD Issues:**

a. With the discontinuation of sending the V76 (aka DCH-0821) form from the LHD and MDCH, questions have arisen regarding the use of the V76 among labs, HCPs, and the LHD. The V76 will still be provided by MDCH for communication among labs, HCPs, and the LHD. But the V76 should not be sent from the LHD to MDCH as a means of reporting; cases should be entered into MDSS. Remember, LHDs can train HCPs and lab personnel (acting in the HCP role) to report directly into MDSS.

b. Currently, the GC and CT case detail (pdf) forms are not available for practice on the test server. MDCH apologizes for any inconvenience this has caused and hopes to have to situation fixed in the near future.

c. Katie Macomber maintains an email listserv for the purpose of updating MDSS users in regards to STD issues. If you would like to be on her listserv, please email her at macomberk@michigan.gov.