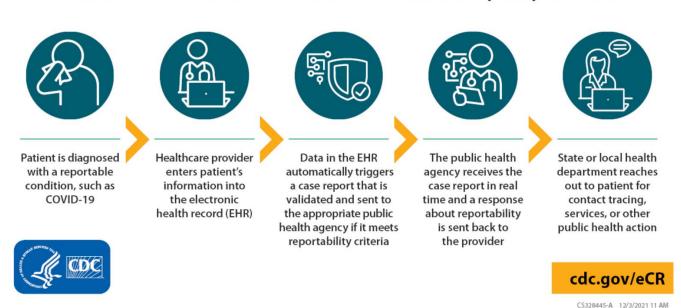
eCR MDHHS Tip-Sheet: Electronic Case Reporting into MDSS

Electronic case reporting (eCR) is the automated, real-time exchange of case report information between electronic health records (EHR) within healthcare facilities and the Michigan Disease Surveillance System (MDSS). It is similar to electronic lab reporting although eCRs are richer messages that contain additional clinical data. For more information about eCR, visit www.cdc.gov/ecr.

HOW DOES ELECTRONIC CASE REPORTING (eCR) WORK?



What types of data are in eCR?

eCR includes a lot of the same identifying information and demographic information that an electronic lab report (ELR) would include. The biggest difference is that since the eCR is sent from an EHR and not from a laboratory system, it doesn't require the presence of a lab result to send. Lab results are likely to be included with it as they are often a requirement to be considered reportable, but not always. eCR may also include treatment information, immunization information, lab history, notes, diagnoses, symptoms, reason for visit, social history or onset information that would be found in an EHR and not in a lab system.

Is every healthcare facility sending eCR?

Not yet. Healthcare facilities need to go through an onboarding process to send eCR messages. Though any healthcare provider using an EHR capable of sending eCR data could onboard, we are actively recruiting hospital systems first. The current facilities (as of 03/25/25) sending eCRs are listed in the table below.

No.	Health Care Organization (HCO)	Conditions Reported	Comments	Service Area
1	CoreWell Health	COVID19 & MPOX	Spectrum, Beaumont and Lakeview	м
2	Henry Ford Health	COVID19, MPOX, Chlamydia & Gonorrhea	In parallel validation stage	Ī
3	Hurley Medical Center	COVID19, MPOX, Chlamydia & Gonorrhea	Added March 2025	С Н
4	Michigan Medicine	COVID19 & MPOX		l G
5	Sparrow Health	COVID19 & MPOX		A
6	UM Health West	COVID19 & MPOX		N
7	Aspirus Health	COVID19, MPOX, Chlamydia & Gonorrhea	Hospital System with in-state and out of state sites	м
8	OSF HealthCare	COVID19 & MPOX Hospital System with in-state and out of state sites		
9	Promedica Health	COVID19, MPOX, Chlamydia & Gonorrhea	Hospital System with in-state and out of state sites	Ī
10	Trinity Health	COVID19, MPOX, Chlamydia & Gonorrhea	Hospital System with in-state and out of state sites	S
11	Aurora Health	COVID19 & MPOX	Out of state hospital system reporting	A T
12	Bellin Health	COVID19, MPOX, Chlamydia & Gonorrhea	Out of state hospital system reporting	Ē
13	Bon Secours Mercy Health	COVID19 & MPOX	Ohio HCO with ambulatory practices in MI	A M B
14	Hillsdale (Parkview Health)	COVID19 & MPOX	Hillsdale Hospital owned ambulatory practices	U L A T
15	Premise Health	COVID19 & MPOX	Ambulatory practices in MI	O R Y

What conditions are currently included in eCR?

Currently only COVID-19 and mpox eCRs are being reported. Starting May 12, 2025, Chlamydia and Gonorrhea eCRs will be sent. Viral hepatitis conditions, such as Hepatitis C, and respiratory conditions, such as novel influenza, are also expected to be added in 2025.

What happens when eCRs enter MDSS?

Incoming eCRs are processed just like ELRs. MDSS will search to see if the patient matches existing persons and cases within the system. If not, a new case will be created based on the disease reported in the eCR. If there are potential matches, the eCR will be sent to the dedup queue (Pending Work Queue) for a user to resolve. When an eCR creates a case or is merged into an existing case, the demographic and condition information is added to the case and the remainder of the eCR data is attached to the case in the Notes tab.

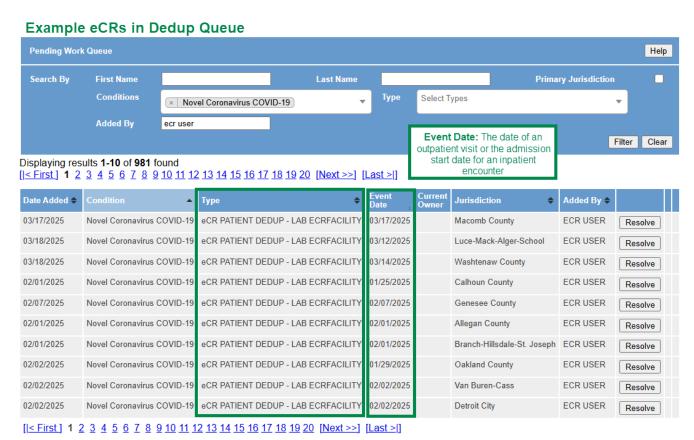
How do I dedup eCRs in MDSS?

eCRs in the dedup queue (Pending Work Queue) will have eCR written in the "Type" field (e.g., eCR Patient Dedup) and may have "ECR USER" in the "Added By" field. Eventually, the "Added by" information will become more specific to the sender. Event date is the date of the healthcare visit that triggered the eCR. If there are

multiple visits corresponding to the reportable disease, each visit will generate its own eCR. Multiple updates on a single visit may trigger more than one eCR for that visit and we are taking steps to help limit duplication.

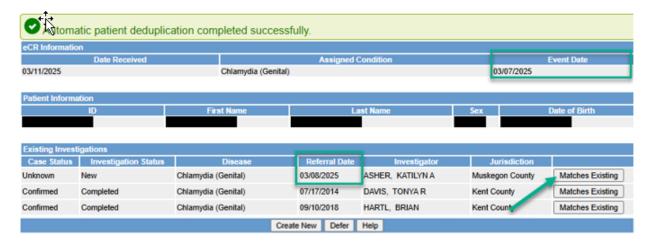
If the person already has a case that corresponds to the reportable disease in the eCR, the eCR should be merged with their existing case according to the condition-specific <u>dedup guidance</u>. If they do not have a case that corresponds to the reportable disease in the eCR, a new case should be created. New cases created by eCR will default to the case status "Unknown."

Prior to the March 27, 2025, MDSS 8.8 Release, the COVID-19 case status default for eCR-created cases was "Suspect". After the release, the case status of eCR-created COVID-19 cases will mimic ELR created cases, e.g., cases with an antigen positive result in eCR will be "Probable" and cases with a PCR/NAAT positive result will be "Confirmed".



How should Gonorrhea and Chlamydia eCR cases be deduped?

Once Chlamydia and Gonorrhea eCR cases are added to MDSS, the automatic eCR case merge logic will work similarly to how ELR cases are merged. The key difference is that, for ELR cases, the event date is based on the specimen collection date, while for eCR cases, the event date is based on the visit date (i.e., encounter date). To manually resolve case de-duplication in the Pending Work Queue, you will need to compare the event date from the new data (either eCR or ELR) with the referral date of the existing case, using the 30-day rule for comparison.



In the screenshot above, notice the eCR information <u>Event Date</u> is 03/07/25 and the <u>Referral Date</u> of the existing case is 03/08/25. Since this is less than 30 days, you can merge it into the matching Chlamydia case by clicking on the **Matches Existing** button. If the new eCR or ELR, is more than 30 days from the existing case's <u>Referral Date</u>, then create a new case by clicking on the **Create New** button at the bottom of the form.

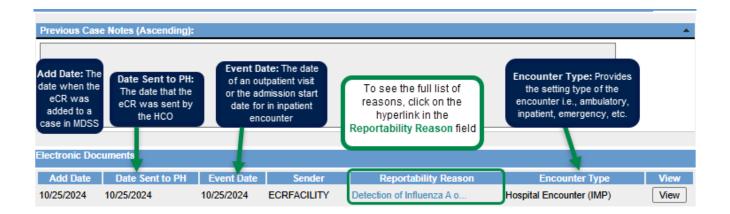
All about Dates in MDSS table:

The table below denotes how and where the dates are transferred from the eCR messages to MDSS:

Messenger	Date Label (with location)	Derived From	Related Dates in MDSS		
ELR	Event Date (dedup queue)	Specimen collection date	Collection Date (Lab Reports tab)		
eCR	Event Date (dedup queue)	Encounter/Visit date for the patient	Event Date (Notes tab)		
ELR	Date Added (dedup queue)	Date when the Lab sent the data to MDSS	Lab Report Date		
eCR	Date Added (dedup queue)	Date when the HCO sent the data to MDSS	Date Sent to PH (Notes tab)		
eCR	Add Date (Notes tab)	MDSS case created date (once resolved from dedup queue) or when the case was added to an existing case	Date Received (dedup resolve step) & Case Entry Date		
ELR	Lab Report Date (Lab Reports tab)	Date when the Lab sent the data to MDSS	Date Added (dedup queue)		
eCR	Date sent to PH (Notes tab)	Date when the HCO sent the data to MDSS	Reported Date & Date Added (dedup queue)		

How do I view the eCR?

The eCR is attached to the case under the Notes tab, in the Electronic Documents section. When you click View, a pop-up window titled ECR Viewer will appear that contains the data.



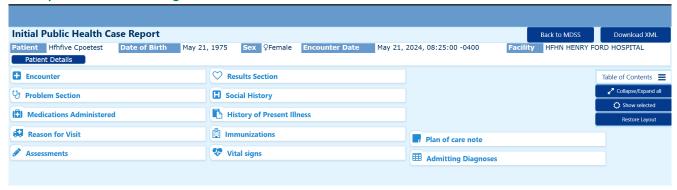
What is the "Reportability Reason(s)?"

The reportability reason shows what criteria in a specific eCR event matched the condition rules and why the eCR was assigned the specific condition. These particular rules are selected by the MDHHS program area to meet the CDC case definition, as closely as possible. Data elements used include diagnosis, problems, lab results, age, and hospitalization, for example.

How do I navigate the eCR Viewer?

You can choose to either open each section of the eCR Viewer individually or expand them all by using the Collapse/Expand all button on the right side of the screen. You can see more of the patient's details by clicking on the dark blue Patient Details button.

Example of eCR Viewer Page in MDSS



What kind of data can I find in each section of the eCR?

Encounter Details: Date and time of the encounter, encounter type, what department and care team saw the patient, and diagnoses associated with the encounter

Results: Lab results, including diagnostic testing, such as a COVID-19 PCR test

Problem List: Active and resolved health problems, may include pregnancy status information

Immunizations: Any immunization records included in the EHR

Social History: May include information such as pregnancy status, sexual orientation and gender identity, (SOGI)and social determinants of health (SDOH).

Reason for Visit: The patient's chief complaint as well as additional details regarding the patient's symptoms or other reasons the patient sought healthcare

Medications Administered: Any medications administered during the encounter

History of Present Illness: May include additional diagnoses or symptoms regarding the patient's present illness

Plan of care note: Upcoming encounters, such as specialist or primary care appointments

Assessments: Assessments completed during the encounter

Vital signs: Can include information such as height, weight, blood pressure, and pulse

Admitting Diagnoses: Diagnosis that the patient is admitted under (will only include information if the patient was admitted)

Why are some of the results in red bold text?

When reviewing the Results section of the eCR you will see abnormally interpretated lab results with a flag such as "A" for abnormal or "H" for high, etc., in red bold text to help make the information stand out and easily findable.

Results Section

Order Number: 887621597.1
CLIAID: 23D0379883

Lab name: MERCY CAMPUS MUSKEGON MI (MCMU) HOSPITAL LAB

١	Component	W	alue	Ref	Test Method	,	Analysis	Perform	and	Pathologist
	Component	V	aiue	Range	rest Method	,	Time	At	nea	Signature
	SARS-COV-2 Screen	POS (A)		Negative	LAB MOLECULAR DIAGNOSTICS METHOD		9/19/2024 02 AM DT	MERCY CAMPUS MUSKED MI (MCN HOSPITA LAB	ON (U)	
	Specimen Anatom (Source) Location Latera		ation /	Collection Method / Volume		Collection	n Time	Re	ceived Time	
			Both ar nares /	nterior Unknown	Non-blood Collection / Unknown		09/19/20 AM EDT	24 1:30		19/2024 1:35 EDT

Will MDSS receive an eCR each time the medical record is updated? How does that work for inpatient encounters where the medical records are frequently updated?

After the initial eCR is sent to MDSS, there may be additional versions of the encounter added to the case. Only one additional version will be added to MDSS every twenty-four hours. This is to balance the need for updated information without overburdening health department staff with deduplication.

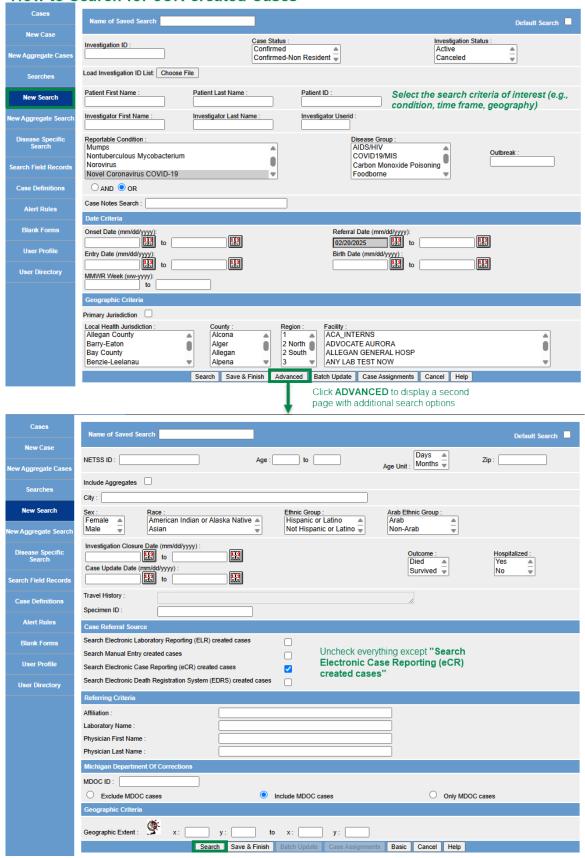
Will data from the eCR, like lab results, automatically transfer into the MDSS Case Report Form?

No. Due to the way deduplication is currently handled, transferring information into the Case Report Forms and Lab Reports tab is difficult. This is expected to change in future releases.

How can I find cases that were created by an eCR?

There is an option in the New Search tab, using the Advanced button, that allows a user to search for eCR created cases. Note: this search finds cases in which an eCR **created** the case; the search will not include existing cases that an eCR was added to, if you need assistance with that, contact your Regional Epidemiologist for tips or email the eCR Team at MDHHS-eCR@michigan.gov.

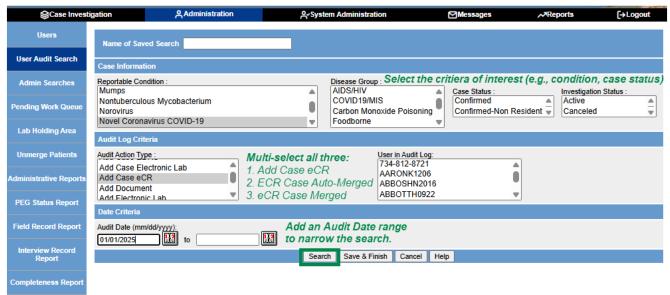
How to Search for eCR-created Cases



How can I find cases with eCRs that weren't necessarily created by an eCR?

You can find cases that have had an eCR added by completing a "User Audit Search" in the Administration tab. The User Audit Search is specific to MDSS Administrator access level.

How to Search for Cases with eCRS:



I think this eCR was sent incorrectly because I don't see anything reportable about it. What should I do?

Review the Reportability Reason (provided next to the eCR in the Notes tab) to help determine why it was reported. If it appears to be an error, please email MDHHS-eCR@Michigan.gov or your Regional Epidemiologist and include the MDSS Investigation ID with a description of the issue.