## Creating a Field Record from a manually entered lab:

First, create the event.



Refer to Chapter 3: Working with Events in THISIS in the Core User Manual for more information on this topic

\*\*\*Always search for an existing event before creating a new event. The skill sheet entitled, 'Searching in THISIS' provides instructions on how to search for an event in the system. If no existing event is found, follow these procedures to create a new event.\*\*\*

Select the **Create Event** button on toolbar to display the **Create Event** screen.

Maven Dis	ease Surveillance S	Suite
Q 00	ெ₿₿≮♥	* 40 40
Workflows		
Workflow Que		Events
No workflows to	odisplay	More .
Tasks		
Туре	Priority Name	Disease
No tasks to disp	olay	More .
Recent Case	IS	
Event ID	Name	Disease
200001446	Smith, John R	200 - Chlamydia
200001644	Smith, John	200 - Chlamydia
200001643	Smith, John	200 - Chlamydia
200001642	Smith, John	200 - Chlamydia
200001641	Smith, John	200 - Chlamydia
		More

When the Create Event screen opens, select a disease. The create event screen will not allow any function to performed without selecting a disease.

Create Event	- Person Information	
Event Information	1	
Disease:	τ	
Add Person First Name:	100 - Chancroid 200 - Chlamydia 300 - Gonorrhea	Last Name:
Suffix:	700 - Syphilis 900 - HIV 900 - HIV Case Report Form - Adult 900 - HIV Case Report Form - Adult	
Birth Date: MM/DD/YYYY		
Additional Demog	Provider Tuberculosis Unknown	
Add N	lew	
	ecurity Number (SSN): Add New	
Alternate Date of E	Birth:	



To navigate the disease list quickly, type the first letter of the disease name to scroll to the first disease that begins with that letter and you will get an alphabetical list of diseases that begin with that letter.

Select the Select Person button.

Address Type:	Street:	
Home •		
City:	State:	Zip Code:
	TX •	
County:	Country:     USA	•
Home Phone:		
Residence Type:		

Enter search criteria for the person associated with this specific event in the Search Party screen. Then select the Search button.

Search Criteria	
Party ID:	
Last Name:	Jon*
First Name:	
Birth Date:	05/22/1989
(Inexact) Social Security Number:	
City:	
State:	•
Zip Code:	
Phone:	
Street:	
Alternate First Name:	
Alternate Middle Name:	
Alternate Last Name:	
Alternate Suffix:	
Estimated Age:	
eHARS Case ID:	
Sex at Birth:	•
Sort Options	
Sort By:	Name 🔻
Sort Order:	Ascending <
Search Options	
Search Options Search History: Search Soundex:	

Select the result for the correct person (highlighted in yellow).

Use the Select button to insert person information into Create Event Screen.

Search Results	1	Rish Date	Charles Address	Ch	Clair	Zie Cede	E-densel ID
Name	-	Birth Date	Street Address	City	State	Zip Code	External ID PBEWUTTCKDW
JOnes, Avery							
Jones, Abbey	9				TX		PBEWRDOUFCK
> Jones, Abel /	3	05/22/1989	123 This Street	Houston	TX	78345	PFMEVUCWWLY
Jones, Amy		07/30/1977			TX		PFMEVTAQEUBD
Jones, Analise	-				TX		PBEWUNUPRBU
Jones, Angel	3				TX		PBEWTBKKGFM
Jones, Angela	2	05/17/1985			TX		PBEWHSCQYV
Jones, Ari		05/15/1987			TX		PBEXBISABDD
Jones, Arty	2				TX		PFMEVTFALICC
Jones, Ava	-	09/28/2015			TX		PBEWSHICKBJ
Showing 1 to	10 of	13 ontrins			First	Draudaur	1 2 Next Last
Showing 1 to 1	0 01	13 entries			First	Previous	1 2 Next Las

If person is not found, select the **Cancel** button to return to Create Event Screen.

Enter the person information into Add Person, Advanced Demographics and Contact Information sections of Create Event Screen.

Create Event - Person Information
Event Information
Disease:
200 - Chlamydia

Add Person

Event Information		
Disease: 200 - C	hlamydia 🔻	
Add Person		
First Name:	Middle Name: Last Name:	
Jimmy	John	Add person
Suffoc		
Birth Date:	Social Security Number:	
MM/DD/YYYY		
Additional Demographics		
Name Type:		
Add New		Additional
Alternate Social Security N	lumber (SSN):	/ daicional
	Add New	
Estimated Age:		Demographics
	Add New	
Alternate Date of Birth:		
MM/DD/YYYY	lew	
eHARS Case ID:	TDCJ Number (SID):	
Ethnicity:		
Luniony.	▼	
Race:		
	Add New	
Sex at Birth:	Current Gender Identity:	
T	T	
Born in the US:	Country of Birth:	
T	<b>T</b>	
Date of Arrival in the US:		
MM/DD/YYYY		
English Speaking:	Preferred Language:	
T	T	
Email Type:		
▼ Ad	d New	
Electronic Contact Type:		
▼ Ad	d New	
Phone Number Type:		
<b>T</b> 4	kdd New	
Contact Information		
Address Type:	Street	
Home V		Contact
		Contact
City:	State: Zip Code:	Tue for which the set
	TX V	Information
County:	Country:	
<b>T</b>		
Home Phone:		
Residence Type:		
	¥	
Select Person	Clear	

Save	Cancel	Help

To create new event, select the Save button.

If the Potential Matches Screen Appears, research the existing records:

Evaluate existing events listed at the bottom of the page. If an event is the same person, the same disease, and the same time frame, the 'Use this event' link will take you to that event. This is the safe choice that does not create a new person or event.

Evaluate existing persons. Use the Choose Person button if an existing person matches the person information and you have a high degree of confidence that it is the same person. This will create a new event with the existing person information.

If the person information does not match, use the Create new case and person button. This will create a new person with a new event. This should only be done after evaluating existing persons and events

The diagram on the next page shows the different parts of the Potential Matches Screen to investigate.

Entered Information:	
Name:	Jimmy John
Birth Date:	05/05/1955
Social Security Number:	
Name Type	
Alternate Social Security Number (SSN)	
Estimated Age	
Alternate Date of Birth	
eHARS Case ID	
TDCJ Number (SID)	
Ethnicity	
Race	
Sex at Birth	
Current Gender Identity	
Born in the US	
Country of Birth	
Date of Arrival in the US	
English Speaking	
Preferred Language	
Email Type	
Electronic Contact Type	
Phone Number Type	
Address:	TX
County:	
Country:	USA
Phone:	



Mark as pending deduplication

#### Matches

Name:	Jimmy John [Details]		
External ID:	PBEXWNOKSBG		
Birth Date:	05/05/1955		
Social Security Number:			
Name Type			
Alternate Social Security Number (SSN)			
Estimated Age			
Alternate Date of Birth			
eHARS Case ID			
TDCJ Number (SID)			
Ethnicity			
Race			Choose Person (creates new event
Sex at Birth			
Current Gender Identity			Use entered information
Born in the US			
Country of Birth			
Date of Arrival in the US			
English Speaking			
Preferred Language			
Email Type			
Electronic Contact Type			
Phone Number Type			
Address:	TX		
County:			
Country:	USA	ß	
Phone:		0	

Evenus				
Event ID	Status	Disease	Create Date	Action
200001671	Open	200 - Chlamydia	02/21/2018	Use this event

If you selected "create an event" from the Potential Matches screen, or there were no potential matches, a new event will open on the screen in the Event Summary screen. Your event is now ready to enter information. You should record the new Event ID on the source document.

In the event, select the disease:

Create Event - Person Information					
Event Information	n				
Disease:	<b></b>				
Add Person	100 - Chancroid				
First Name:	200 - Chlamydia				
	300 - Gonorrhea				
0.00	700 - Syphilis				
Suffix:	900 - HIV				
	900 - HIV Case Report Form - Adult				
Birth Date:	900 - HIV Case Report Form - Pediatric				
MM/DD/YYYY	Coinfection				
	Facility				
	Provider				
Additional Demo	Tuberculosis				
Name Type:	Unknown				
Add N	Add N Unknown MIS Legacy				

Enter in the demographic information available from the lab result.

Maven Disease Su	rveillance Suite				
Create Event - Pers	on Information				
Event Information				-	
	nlamydia	¥			
Add Dorson					
Add Person First Name:	Middle Name:	Last Name:			
Mickey		Mouse			
Suffix:					
Birth Date:	Social Security Number:				
11/16/1964					
Additional Demographics					
Name Type:					
Add New					
Alternate Social Security Nu	imber (SSN):				
	Add New				
Estimated Age:					
	Add New				
Alternate Date of Birth:					
MM/DD/YYYY I Add Ne					
eHARS Case ID:	TDCJ Number (SID):	1			
Ethnicity:					
Hispanic	T				
Race:	•				
Black or African American	Add New				
Sex at Birth:	Current Gender Identity:				
Male V	Male	T			
Born in the US:	Country of Birth:				
Yes 🔻	USA	¥			
Date of Arrival in the US:					
MM/DD/YYYY					
English Speaking:	Preferred Language:				
Email Tupe:		•			
Email Type: Add	New				
Electronic Contact Type:	100				
▼ Add	New				
Phone Number Type:					
▼ Ac	dd New				
Contact Information					
Address Type:	Street:				
Home V	7433 Cayenne Lane				
				Notice the add	dress is
City:	State:	Zip Code:		validated in re	al timo ac i
austin	TX V	78741	Viewi (Apply)		
County:	Country:		19	s entered.	
<b>T</b>	USA	T			
Home Phone:					
Residence Type:					
	¥				
Select Person			Clear		
Save Cancel	Help				
Cancel	Theip				
$\langle \rangle$					

Select Save when complete.

When in the event click on "Lab Results" tab.

Event Data	Lab Results	oncerns	Persons Tasks
Labs Lab No.		Collectio	n Date
Add Lab Result	Update Lab Resu	lt D	elete Lab Result

Select "Add Lab Result" – this will take you to the lab screen.

Select "STD Lab Result"

Add Lab R	esult - Mickey	Mouse - 200 - Chlamydia
Lab Results		
Lab Results:	•	
Save Ca	STD Lab Result	

*Note: The Lab Result option will match the disease already entered. For example, for HIV it will say "HIV Lab Result" and "TB Lab Result" for TB.* 

Fill out all of the information available on the lab. Notice only the information on the test (lab, dates, type of test, result) are only required.

dd Lab Result - Mic	key M	ouse - 200 - Chla	amydia					
Lab Results Lab Results: STD Lab Res	ult 🔻							
Report Source								
Report Source*		Date Received at HD*	HD Name where Lab Rec	eived*				
Laboratory Report	•	06/06/2018 📷	Austin/Travis County	•				
Patient Information								
First Name			Middle Name		Last Name		Date of Birth	Sex
							MM/DD/YYYY	
Address1			Address2		City		State	Zip
Specimen Info								
Collection Date*	Accessio	on Number*	Specimen Type*	Specimen	Site Modifier	Specimen	Site	
06/01/2018	123		Blood v		•			
Specimen Type ID (Raw)	Specime	en Type Text (Raw)	Specimen Site ID (Raw)	Specimen	Site Text (Raw)			
	· · · · ·							
Resulted Test								
Test*		Result*	Rapid				Result Value*	
	•	<b>T</b>	T					
CHLAM - Culture								
CHLAM - DFA CHLAM - DNA Probe								
CHLAM - DNA Probe CHLAM - EIA								
CHLAM - IgA		Test Local Description	n Result Local Code				Result Local Description	_
CHLAM - IgG								
CHLAM - IgM		Test Description (raw)	Result Value (raw)					
CHLAM - NAAT(SDA, TMA,	PCR)							

Patient information is not required for STD lab results, but is for positive HIV results.

Lab Results Lab Result  HIV Lab Result					
Report Source* Date Reveived		eived*			
Patient Information First Name*	Middle Name	Last Name* Di	ate of Birth*	Bace	
Address	Address2		M/DD/YYYY Zip*	Country	
Specimen Info Collection Date* Accession Number	Specimen Type* Specimen Site	Modifier Specimen Site Date Received at La	b Specimen Type ID (Raw)	Specimen Type Text (Raw) Specimen Site	e ID (Raw) Spe
MM/DD/YYYY III					
Test LOINC Test Description	Test Test Local Code	Test Local Description			
Add Resulted Test					
Test*	Result* Rap		Modifier	Result Value*	Result Units

*Note: Patient information in the HIV lab result is required. This is not the case in an STD lab.* 

Add the lab.

Resulted Test	Deputet	Deputh Malwet
Test*	Result*	Result Value*
CHLAM - Culture		
CHLAM - DFA		
CHLAM - DNA Probe		
CHLAM - EIA	Test Local Desc	Result Local Description
CHLAM - IgA		Cite Cite
CHLAM - IgG	Test Description	
CHLAM - IgM CHLAM - NAAT(SDA, TMA, PCR)		

Save lab information.



Now, the lab is entered into the system. To create the field record Select Event Data tab. Then select the Case Assignment/Field Record question package.

	Event Data Lab Results Concerns					
à	Question Packages					
	Question Package					
	> Demographic					
	Reporting / Morbidity					
	Case Assignment / Field Record					
	Follow-up Activity					
	Risk Factors					
	Partners / Clusters					
	Clinical					
	Venues					
	Create new Venue Location					
	Coinfection Management					
	View Question Package					

Initial Status/Initial assignment outcome will only be created on ELR imports. Surveillance staff will have to make a determination on manually entered labs on whether or not follow-up is needed.

Initial jurisdiction	PHFU Austin	
* Initial date	05/01/2018	
* Initial assignment outcome		
Lock initial assignment block	Administrative Closure BFP - No Follow-up	
	Field Follow-up	
* Assignment type	Insufficient Information	
* Indicates required field	Record Search Closure Not Program Priority Surveillance Follow-up	
Save Cancel Help	Congenital Investigation Needed Other	

If field follow-up is needed, surveillance staff will need to select field followup and then open a new assignment type under the Case Assignment/Field Record Information.

### Staff will select:

Case Assignment / F	ield Record Information
* Assignment type	<b>•</b>
* Indicates required field Save Cancel Help	Congenital Investigation Field Record / Interview OOS Re-interview Surveillance Assignment

# Then select:

	Case Assignment / Field Record Information
Assignment type 🗉	Field Record / Interview  Add New
Assignment type lock	Yes V
* Created by	Mary VanWisse
Create date - syphilis	06/11/2018
* Is this a field record or interview only?	T
Assignment	
Jurisdiction assigned to	Field Record
* Person assigned to	Interview Only
* Assignment reason	T
Coinfection Information	
Iteration ID of existing block	1002321
Source case of the current block	200002402 - 700 - Syphilis - Mickey Mouse 🕸 🕯
* Prevents this answer block from being joined if the current case is joined	T
Indicates required field	
Save Cancel Help	

## Staff should be able to fill out the rest:

Case Assignment / Field Record - Mickey Mouse - 700 - Syphilis

			Current Status
Outcome			
			Initial Status
Initial jurisdiction	PHFU Austin		
Initial date	06/07/2018		
Initial assignment outcome Lock initial assignment block	Yes V		
LOCK Initial assignment block	Tes V		signment / Field Record Info
Assignment type 🗉		Field Record / Intervi	
Assignment type lock		Yes 🔻	
* Created by		Mary VanWisse	
Create date - syphilis		06/11/2018	
* Is this a field record or inter	view only?	Field Record V	
* Field Record ID		1002321	
Assignment			
Jurisdiction assigned to		PHFU Austin	T
* Person assigned to		Karen Surita	(k)
* Assignment reason		New Syphilis	T
Field Record			
* Referral basis (Syphilis)		P1 - Sex partner	•
* Date initiated (Syphilis)		06/11/2018	
* Initiating agency		PHFU Austin	3 1
* Investigating agency		PHFU Austin	۹) 💼
Notifications and	d Follow-ups		
* Is this patient notifiable?		Yes	¥
Is this patient notifiable by	internet ONLY?	Yes 🔻	
Initiate for Internet follow-u		Yes 🔻	
Internet notification cor		Ves	
* Notification plan for field fol Field Record Ad		Third Party 🔻	
Residence type Street address Street address 2 Home - Work Locating Inform Electronic contact type		<b>T</b>	
Locating information/Other Physical Attrib * Gender			· · · · · · · · · · · · · · · · · · ·
Height			
Visible identifiers		<ul> <li>Tattoos</li> <li>Scars</li> <li>Glasses</li> <li>Piercings</li> <li>Facial hair</li> <li>Other</li> </ul>	
Hair color		T	
Eye color		T	
Marital Status/	Exposure		
Spousal notification requi	ired?	T	
Current marital status			7
Exposure date (first)		MM/DD/YYYY	
Frequency of exposure -	general	T	
Expected in CI	inic		
Is the patient expected in	to the clinic	T	
Field Investiga	tion Outcome		
Syphilis disposition			•
Date this natient was not	ified of exposure to syphilis	MM/DD/YYYY	
Coinfection Inf		1002321	
Coinfection Inf Iteration ID of existing blo			
Coinfection Inf		200002402 - 700 - Syphilis	- Mickey Mouse 획 💼
Coinfection Inf Iteration ID of existing blo Source case of the current		200002402 - 700 - Syphilis	- Mickey Mouse 🞕 💼

Fields marked with a \* are required. Once the field record is created, it can be printed and saved.