



# Procedure to Enter RVCT Data

1. Click on Search Event or Create Event icon in toolbar
  - a. If you have a **New Patient**
    - i. Click create event icon 
    - ii. Select disease
    - iii. Click search person button
    - iv. Enter search criteria in the Search Party window that appears (e.g. DOB & first few letters of last name followed by asterisk). Click 'Search.' The following scenarios may occur:
      1. **New person (no potential matches found in search):** Select Create new in the Search Party window. Enter disease and basic demographics information in the Create Event – Person Information window. Click Save to open the new Event Dashboard.
      2. **Person already exists in THISIS:** Double click on the search result for the desired person. If the Potential Matches screen appears, review carefully (*pay attention to create date*).
        - a. **If Event Does not already exist (Existing person, new event):** In some instances, the Create Event—Person Information window will auto-fill with demographic information when you double-click on the search result. If this is the right person, click 'Save' to open to the Event Dashboard. In other instances, you will have to select 'Create New Event' in the Potential Matches screen to open to the new Event Dashboard.
          - i. Check Persons tab to make sure it's the correct party (birthday, SSN, address).
        - b. **If person and event already exist:** Click the 'Use this Event' link in the Potential Matches screen to open to the Event Dashboard.
          - i. Check Persons tab to make sure it's the correct party (birthday, SSN, address)

and check labs or Initial Assessment QP to make sure it is the correct event.

- b. If you are certain this particular **TB event already exists in THISIS** (e.g. you know ELRs were already entered or a colleague already began entering data for this event)
  - i. Click the search event icon 
  - ii. Enter search criteria (e.g. DOB & first few letters of last name followed by an asterisk) AND select disease
  - iii. Click Search
  - iv. Double click on the correct result to open to the event dashboard
  - v. Check the Persons tab to make sure you opened the record for the correct person and all information is correct
2. Check demographics in Persons tab
  - a. The following Person Information must be entered:
    - i. First Name
    - ii. Last Name
    - iii. Birth Date
    - iv. Death Date (if applicable)
    - v. Vital Status (answer to this field will influence what questions appear in Initial Assessment QP)
    - vi. Ethnicity
    - vii. Race
    - viii. Sex at birth (Female questions will only appear if Female is selected)
    - ix. Born in the US
    - x. Country of Birth (if applicable)
    - xi. Date of Arrival in the US (if applicable)
  - b. The following Address information must be entered:
    - i. Zip code INCLUDING THE LAST 4 NUMBERS
    - ii. County
    - iii. Country
    - iv. If person lives in a congregate facility, name of facility must be entered on second line of street field
    - v. Residence type if person lives in correctional, long-term care, or homeless facility
  - c. VERIFY ADDRESS
    - i. [Melissadata.com/Lookup/addressverify.asp](http://Melissadata.com/Lookup/addressverify.asp)
    - ii. [Usps.com](http://Usps.com)
3. Lab Results

- a. If sputum: Specimen Type must be selected.
  - b. If non-sputum: Specimen Type AND Specimen Site must be selected.
4. If available, add Attachments
5. Initial Assessment QP (*See Appendix for list of all required fields in this QP*)
6. TB Screening Test, X-Rays and Other Imaging
  - a. TST test results
  - b. X-Ray results
  - c. CT Scans and other imaging
7. TB Medications
  - a. Medication start date
  - b. Medication name
8. If suspects: Open Index Case Interview Question Package
  - a. Only complete Contact investigation indicated field.
9. Case Verification and Completion
  - a. Complete case verification section

[Continue data entry for suspects with non-TB or non-LTBI events](#)

[Continue data entry for LTBI Events or suspects who turn into LTBI](#)

[Continue data entry for suspects who turn into TB case](#)

[Continue data entry for immediately confirmed TB cases](#)

[Continue data entry for clinically diagnosed TB cases](#)

[Continue data entry for provider diagnosed TB cases](#)

[See Appendix \(Required fields for Initial Assessment QP\)](#)

Closing a Suspect Event for non-TB or LTBI events (only complete these steps if you are certain the event is NOT LTBI or a TB case)

10. Ensure all final lab results are entered in the Lab Results tab
11. In the TB Medications Question Package, update Medications with the stop dates AND reason treatment stopped
12. Go into Case Verification and Completion Question Package
  - i. Update case verification section
  - ii. Complete case completion section
    - Therapy recommended section
    - Type of outpatient health care provider
    - DOT
    - Number of weeks of DOT

**YOU'RE DONE!!!**

## Procedure to Enter LTBI Events (or suspects who turn into LTBI)

### 10. *FOR EVENTS WITH CHANGE IN ATS CLASSIFICATION*

- a. Go into Initial Assessment QP & update ATS classification
11. Go into Medications QP and make updates (add new medications and/or stop dates AND reason for stopping for previous medications if necessary)
12. Add and/or review labs in the Lab Results tab to make sure all labs are entered and information is correct
13. Once the management of the event has been completed and medication has been stopped, Complete the Case Completion Section of the Case Verification and Completion Question Package
  - a. Therapy recommended section
  - b. Type of outpatient health care provider
  - c. DOT
  - d. Number of weeks of DOT

**YOU'RE DONE!!!**

## Procedure to Enter Suspects who turn into TB cases

10. Go into Initial Assessment QP & update ATS classification
11. Go into Medications QP and make updates (add new medications and/or stop dates AND reason for stopping for previous medications if necessary)
12. Add and/or review labs in the Lab Results tab to make sure all labs are entered and information is correct (be sure to check labs entered by ELR)
  - a. Make sure susceptibility lab results are entered
13. **FOR CULTURE CONFIRMED CASES ONLY**, Go to the Genotyping Question Package in the Event Data tab
  - a. Select Yes or No for the question, 'Isolate submitted for genotyping'
    - i. choose Yes if it has been submitted to CDC)
    - ii. If selected Yes, enter the Genotyping accession number for episode if/when it becomes available
14. Review THISIS-generated RVCT
  - a. Click on the printer icon in the toolbar
  - b. Click on RVCT.xml to download the PDF
  - c. Open & review RVCT—if changes need to be made, go back into the appropriate question packages or tabs and make changes
15. Once RVCT has been reviewed and is confirmed accurate, submit to Central Office
  - a. Go into Case Verification and Completion Question Package and update the Case Verification field
  - b. Check the box for 'Case submitted to central office'. Once this page is saved, it will automatically be sent to Central Office
16. Closing the TB Case
  - a. In the lab results tab, *there must be a lab result entered that verifies the case is closed (and no more TB management is needed)*
    - i. The specimen type must be entered if the specimen is sputum & any specimen other than sputum must have specimen site entered
    - ii. Result must say NEGATIVE
    - iii. Collection date must be AFTER initial positive result
  - b. In the TB Medications QP, add stop date AND reason treatment stopped for ALL medications
  - c. Complete the case completion section of the Case Verification and Completion QP
    - i. Therapy recommended section

- ii. Type of outpatient health care provider
- iii. DOT
- iv. Number of weeks of DOT
- v. City/County Case number if applicable
- vi. \*\*\*Note: The fields labeled 'Sputum culture conversion documented' and 'Date specimen collected for first consistently negative sputum culture' are required, but will automatically populate based on lab result data. It will only change to say 'Yes' for Sputum culture conversion documented if a negative sputum culture is recorded in the lab results tab and the date of the test is AFTER the positive culture

**YOU'RE DONE!!!**

## Procedure to Enter Immediately diagnosed TB cases (event was never considered a suspect)

10. Add and/or review labs in the Lab Results tab to make sure all labs are entered and information is correct (be sure to check labs entered by ELR)
  - a. Must have lab confirmed positive culture or NAAT in Lab Results Tab
  - b. Make sure susceptibility lab results are entered
11. **FOR CULTURE CONFIRMED CASES ONLY**, Go to the Genotyping Question Package in the Event Data tab
  - a. Select Yes or No for the question, 'Isolate submitted for genotyping'
    - i. Choose Yes if it has been submitted to CDC
    - ii. If selected Yes, enter the Genotyping accession number for episode if/when it becomes available
12. Review THISIS-generated RVCT
  - a. Click on the printer icon in the toolbar
  - b. Click on RVCT.xml to download the PDF
  - c. Open & review RVCT—if changes need to be made, go back into the appropriate question packages or tabs and make changes
13. Once RVCT has been reviewed and is confirmed accurate, submit to Central Office
  - a. Go into Case Verification and Completion Question Package and update the Case Verification field
  - b. Check the box for 'Case submitted to central office'. Once this page is saved, it will automatically be sent to Central Office
14. Closing the TB Case
  - a. In the lab results tab, *there must be a lab result entered that verifies the case is closed (and no more TB management is needed)*
    - i. The specimen type must be entered if the specimen is sputum & any specimen other than sputum must have specimen site entered
    - ii. Result must say NEGATIVE
    - iii. Collection date must be AFTER initial positive result
  - b. In the TB Medications QP, add stop date AND reason treatment stopped for ALL medications
  - c. Complete the case completion section of the Case Verification and Completion QP
    - i. Therapy recommended section



- ii. Type of outpatient health care provider
- iii. DOT
- iv. Number of weeks of DOT
- v. City/County Case number if applicable
- vi. \*\*\*Note: The fields labeled 'Sputum culture conversion documented' and 'Date specimen collected for first consistently negative sputum culture' are required, but will automatically populate based on lab result data. It will only change to say 'Yes' for Sputum culture conversion documented if a negative sputum culture is recorded in the lab results tab and the date of the test is AFTER the positive culture

**YOU'RE DONE!!!**

## Procedure to Enter Clinically diagnosed TB cases

As a reminder, *Clinically Diagnosed cases must meet one or more of these criteria and documentation of these criteria MUST be entered in THISIS:*

1. *Positive skin test (initial assessment question package) or IGRA (lab results tab)*
  2. *Abnormal chest X-Ray or CT scan consistent with TB (TB Screening Test, X-Rays and Other Imaging Question Package)*
  3. *On at least 2 or more TB medications (TB Medications Question Package)*
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10. Add and/or review labs in the Lab Results tab to make sure all labs are entered and information is correct (be sure to check labs entered by ELR)
  11. Review THISIS-generated RVCT
    - a. Click on the printer icon in the toolbar
    - b. Click on RVCT.xml to download the PDF
    - c. Open & review RVCT—if changes need to be made, go back into the appropriate question packages or tabs and make changes
  12. Go to the Case Verification and Completion Question Package. In the case verification field, choose 'clinical case definition' as the response
    - a. In the next field, 'Criteria met for clinical case definition,' **BE SURE TO ALWAYS CHOOSE THE SECOND OPTION, 'POSITIVE TST/IGRA AND ABNORMAL CHEST X-RAY.'** This is the only option that will work for submission to CDC, other options will not be accepted
    - b. When you are certain the RVCT is entered correctly, Check the box for 'Case submitted to central office' and click Save
  13. Closing the Clinically Diagnosed TB Case
    - a. In the TB Medications QP, add stop date AND reason treatment stopped for ALL medications
    - b. Complete the case completion section of the Case Verification and Completion QP
      - i. Therapy recommended section
      - ii. Type of outpatient health care provider
      - iii. DOT
      - iv. Number of weeks of DOT
      - v. City/County Case number, if applicable

**YOU'RE DONE!!!**

## Procedure to Enter Provider diagnosed TB cases

10. For these cases, there should be a narrative from the provider providing support for why the event is a verified TB case
  - a. Go into Initial Assessment Question Package → Scroll to section called Site of Disease → In the Notes field in this section, enter the narrative from the provider explaining the diagnosis OR add the document with the doctor's note as an attachment
  - b. In the Notes Section found in the Event Summary section of an Event Dashboard (to the right of the Basic Information section), write the following message, "Provider Diagnosed Case. See details in Notes field located in the Site of Disease section of the Initial Assessment Question Package (OR see attachment saved as *[file name]*)"
11. Add and/or review labs in the Lab Results tab to make sure all labs are entered and information is correct (be sure to check labs entered by ELR)
12. Review THISIS-generated RVCT
  - a. Click on the printer icon in the toolbar
  - b. Click on RVCT.xml to download the PDF
  - c. Open & review RVCT—if changes need to be made, go back into the appropriate question packages or tabs and make changes
13. Go to the Case Verification and Completion Question Package. In the case verification field, choose 'verified by provider diagnosis,' then select the applicable criteria that was met
  - a. When you are certain the RVCT is entered correctly, Check the box for 'Case submitted to central office' and click Save
14. Closing the Provider Diagnosed TB Case
  - a. In the TB Medications QP, add stop date AND reason treatment stopped for ALL medications
  - b. Complete the case completion section of the Case Verification and Completion QP
    - i. Therapy recommended section
    - ii. Type of outpatient health care provider
    - iii. DOT
    - iv. Number of weeks of DOT
    - v. City/County Case number, if applicable

**YOU'RE DONE!!!**

## Appendix: Required fields for Initial Assessment Question Package

1. TB Name (name person uses for TB care)
2. ATS Classification
3. Date of Initial ATS Classification
4. Primary Reason evaluated for TB (other information in QP must be entered first AND SAVED, then return to this field to make sure it is entered correctly)
5. Case transferred from another area
6. Date of initial assessment (if available)
7. Date first reported to local HD (auto-populated from labs)
8. Vital Status at TB diagnosis
9. Select address at time of diagnosis (link at top of address section)
10. Within city limits (NOTE: this field does not auto-fill, must be entered manually)
11. Country of birth, date of arrival in US, race, ethnicity, born in US— these fields will auto-populate from info entered in Persons Tab
12. Immigration status at first entry in US
13. Residence or travel in country with high prevalence of TB in last 2 years (if available)
14. Recurrence or previous diagnosis of TB or TB infection
15. Known exposure to active TB case (if available)
16. Symptoms screening performed
17. Patient is symptomatic
18. Date of TB symptom assessment
19. Select 'Yes' and enter onset date for all applicable symptoms
  - a. Once finished entering, Click 'Save and Stay' at top of page.
20. Date of overall symptom onset will auto-populate after clicking save
21. Source of symptom information
22. Enter clinical information if available
23. Enter medical history information if available
24. HIV status MUST be entered
25. Inner-city resident & low income (if available)
26. History of homelessness
27. History of incarceration
28. Resident of correctional facility (if yes, type of correctional facility & under custody of immigration and customs enforcement)
29. Current resident of long-term care facility
30. Resident of long-term care facility at time of diagnosis
31. Resident of other congregate setting at time of diagnosis

32. Primary occupation in past year
33. ALL FIELDS in Medical Risks Section
34. Site of TB Disease