

Tip Sheet: Recording the 713 Gonorrhea Exam

This tip sheet has been developed to assist panel clinics conducting U.S. Visa health examinations for applicants who are required to undergo the **713 Gonorrhea exam**.

Once the health case is at **Exam in Progress** status, you can start recording these examinations.

Note: If your health case is ready to proceed to the examination state, it should be available in the **In progress** tab in your clinic's **inbox**.

Note: Throughout the examination a red asterisk * will display for mandatory fields.

Step 1. Search the health case using the Case search screen or locate the health case in the **In progress** tab of the clinic's **inbox**

Step 2. Select the check box next to the health case and press the **Manage Case** button



Case search

Search Using Health Case Identifier Using Applicant Details

Using Health Case Identifier

ID type

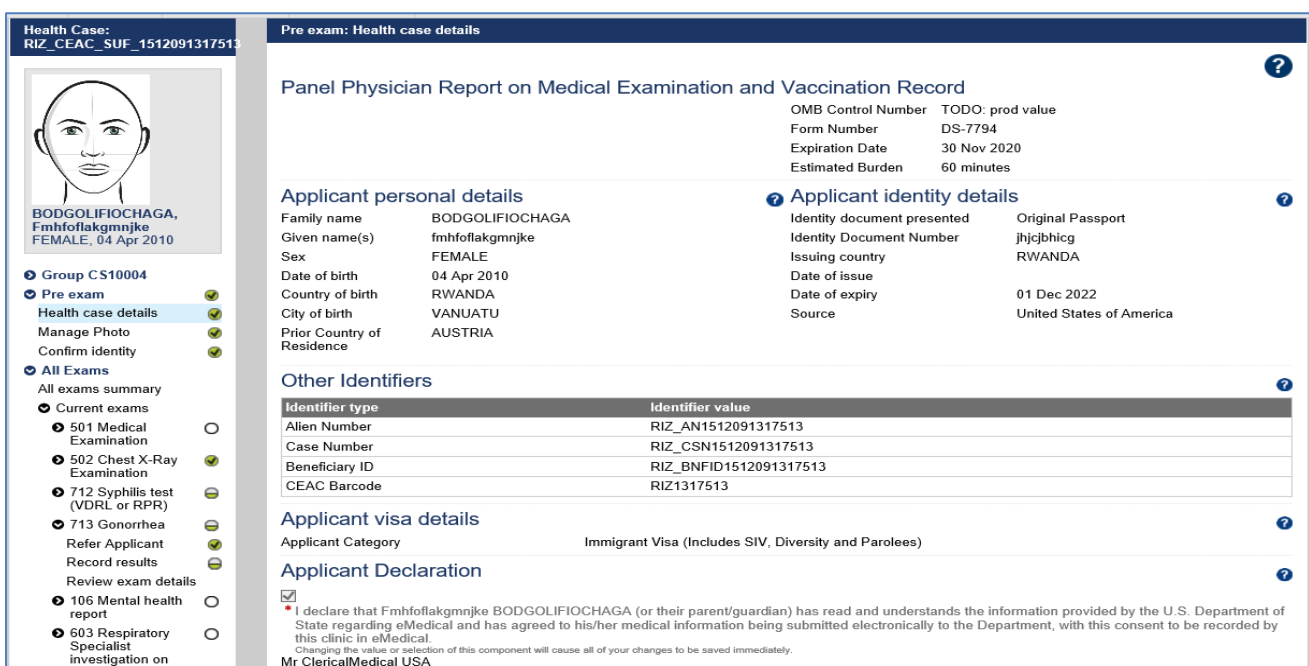
ID

[Set as my default screen](#)

Select: [All](#) [None](#)

ID	Applicant name	Date of birth	Doc. Num.	Visa	Type	Visit date	501	502	707	708	712	716	Other	Country	Action
<input checked="" type="checkbox"/> RIZ_CEAC_SUF_1512091317513	BODGOLIFIOCHAGA, Fmhfoflakgmjnke	04 Apr 2010	jhjcjbhcg	Immigrant Visa (Includes SIV, Diversity and Parolees)	-	01 Feb 2018	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	View Edit group

The **Health case details** screen displays.



Health Case: RIZ_CEAC_SUF_1512091317513

Pre exam: Health case details

Panel Physician Report on Medical Examination and Vaccination Record

OMB Control Number TODO: prod value
Form Number DS-7794
Expiration Date 30 Nov 2020
Estimated Burden 60 minutes

Applicant personal details

Family name BODGOLIFIOCHAGA
Given name(s) fmhfoflakgmjnke
Sex FEMALE
Date of birth 04 Apr 2010
Country of birth RWANDA
City of birth VANUATU
Prior Country of Residence AUSTRIA

Applicant identity details

Identity document presented Original Passport
Identity Document Number jhjcjbhcg
Issuing country RWANDA
Date of issue 01 Dec 2022
Date of expiry United States of America
Source

Other Identifiers

Identifier type	Identifier value
Alien Number	RIZ_AN1512091317513
Case Number	RIZ_CSN1512091317513
Beneficiary ID	RIZ_BNFID1512091317513
CEAC Barcode	RIZ1317513

Applicant visa details

Applicant Category Immigrant Visa (Includes SIV, Diversity and Parolees)

Applicant Declaration

I declare that Fmhfoflakgmjnke BODGOLIFIOCHAGA (or their parent/guardian) has read and understands the information provided by the U.S. Department of State regarding eMedical and has agreed to his/her medical information being submitted electronically to the Department, with this consent to be recorded by this clinic in eMedical.
Changing the value or selection of this component will cause all of your changes to be saved immediately.

Mr ClericalMedical USA

Step 3. Expand the **713 Gonorrhoea** in navigation pane

Step 4. Press the **Refer Applicant** button

Health Case: RIZ_CEAC_SUF_1512091317513

Pre exam: Health case details

Panel Physician Report on Medical Examination and Vaccination Record

OMB Control Number TODO: prod value
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Expiration Date 30 Nov 2020
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Applicant identity details

Identity document presented Original Passport
Identity Document Number jhjcjbhcg
Issuing country RWANDA
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Other Identifiers

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Beneficiary ID	RIZ_BNFID1512091317513
CEAC Barcode	RIZ1317513

Applicant visa details

Applicant Category Immigrant Visa (Includes SIV, Diversity and Parolees)

Applicant Declaration

The **713 Gonorrhoea: Refer Applicant** screen displays.

713 Gonorrhoea: Refer Applicant

Exam code	713
Exam name	Gonorrhoea
Exam description	Record testing and treatment for Gonorrhoea
Referred by	eMedical
Referred to	This clinic

Refer

Generate Referral letter

Back

Next

Note: If the required service to complete the **713 Gonorrhoea** is already present for your clinic then the exam will be automatically referred. You may however, refer the applicant (if required) to an externally linked specialist clinic.

To refer applicant to an external specialist clinic:

Step 5. Press the **Refer** button

Step 6. In the **Refer Applicant** window, select the name of the referring doctor from the **Referred by** drop down list

Step 7. Select the radio button for the clinic you want to refer the applicant to and press the **Save** button

Refer Applicant

Referred by Mr Doctor USA

You can choose to refer the selected exams to any of these clinics.

Refer to ?	Services offered at the clinic ?
<input type="radio"/> This clinic	Psychiatry Radiology Pathology Medical Endocrinology
<input checked="" type="radio"/> Avengers Clinic 123 Sesame ST UNITED STATES	Pathology Radiology Tuberculosis specialist Medical

Cancel Save

Note: The Referred by will default to the doctor themselves if user is a panel doctor/radiologist.

Refer Applicant

Referred by Mr Doctor USA

You can choose to refer the selected exams to any of these clinics.

The Refer Applicant screen displays with a success message.

713 Gonorrhoea: Refer Applicant

✔ Success

The exam has been successfully referred to the selected clinic. Please print the referral letter and instruct the applicant that they need to see the specialist. Record the results and attach the reports once they are received.

Exam code	713
Exam name	Gonorrhoea
Exam description	Record testing and treatment for Gonorrhoea
Referred by	Mr Doctor USA
Referred to	Avengers Clinic 123 Sesame ST UNITED STATES

Refer
Generate Referral letter

Back Next

Step 8. Press the **Generate Referral letter** button to print the Referral letter and provide to the applicant to provide to the specialist

Upon receiving the results and test reports, proceed to record the results.

Step 9. To record the results select the **Record results** button in the navigation pane

The **713 Gonorrhoea: Record results** screen displays.

713 Gonorrhoea: Record results

Confirm identity ?
 Was the applicant's identity confirmed? Not selected Yes No ?

Record results
 Exam date: * 16 Oct 2017 ?
 Exam description: Record testing and treatment for Gonorrhoea
 Was laboratory testing performed: Not selected No Yes

Attachments
 Link to existing ? Add New ?
 No documents have been attached

Delete	Document Type	Details	Attachment type	Sending method	File name	Edit
General supporting comments						

Back Close Save Next

Step 10. Select the **Yes** or **No** button for **Was the applicant's identity confirmed?**

Step 11. Edit the **Exam date**, if required (will default to today's date)

Step 12. Select the **No** or **Yes** button for **Was laboratory testing performed**

Note: For a **No** response record the reason under **General supporting comments**

For a **Yes**, the **Screening** section displays.

713 Gonorrhoea: Record results

Confirm identity ?
 Was the applicant's identity confirmed? Not selected Yes No ?

Record results
 Exam date: * 16 Oct 2017 ?
 Exam description: Record testing and treatment for Gonorrhoea
 Was laboratory testing performed: Not selected No Yes

Screening
 Date specimen reported: * ?
 Test name: * Required
 Gonorrhoea test result: Not selected Positive Negative

Step 13. Enter a date for **Date specimen reported**

Step 14. Enter the **Test name**

Step 15. Select the Positive or Negative button for **Gonorrhoea test result**

Step 16. Select the **No** or **Yes** button for **Applicant elects to undergo treatment?**

For a **Yes**, the **Treatment** section displays.

713 Gonorrhoea: Record results

Confirm identity
 Was the applicant's identity confirmed? Not selected Yes No

Record results
 Exam date: 18 Oct 2017
 Exam description: Record testing and treatment for Gonorrhoea
 Was laboratory testing performed? Not selected No Yes

Screening
 Date specimen reported:
 Test name: Required
 Gonorrhoea test result: Not selected Negative Positive
 Applicant elects to undergo treatment? Not selected No Yes

Treatment

Treatment details for Gonorrhoea must be recorded.

Treatment	Medication	Start	End	Dose	Frequency	Side effects
<input type="checkbox"/> Recording of treatment is complete						

Step 17. Press  icon to open **Add/Edit Treatment** window

Add/Edit Treatment

Treatment:

Medication:

Start:

Duration: Not selected Fixed term On-going

Dose:

Frequency:

Side effects: Not selected Yes No

The **Treatment** drop down list is defaulted to **Gonorrhoea**.

Step 18. Select the **Medication** from the drop down list

Step 19. Enter the **Start** date

Step 20. Select the **Fixed term** or **On-going** button for Duration

Step 21. For **Fixed term**, enter **End** date

Step 22. Enter a **Dose**

Step 23. Select **Frequency** from the drop down list

Step 24. Select the **Yes** or **No** button for **Side effects**


Step 25. For a **Yes** enter the Details of side effects

Step 26. Press the **Ok** button

Recorded treatment details are displayed under the **Treatment** section.

Treatment	Medication	Start	End	Dose	Frequency	Side effects
Gonorrhoea	Ceftriaxone	02 May 2018	-	Once	Once a day	Dizzy

* Recording of treatment is complete

Step 27. Press the  icon to record more treatment

Step 28. Select check box for **Recording of treatment is complete**

Note: At least **one** record of treatment must be recorded.

Note: The check box for **Recording of Treatment is complete** is **mandatory** if a **Treatment** is recorded.

Step 29. Press the **Add New** button in the **Attachments** section

Attachments

Link to existing Add New ?

The **Add New Attachment** window displays.

Add New Attachment + ×

Attachment type: * ▼

Document type: * ▼

Browse: * Browse...

Details

[Link to another exam](#)

Step 30. Select a test report from the **Document type** drop down list



Step 31. Press the **Browse** button to locate and upload the attachment file

Step 32. Press the **Save** button

The uploaded files are listed in the **Attachments** section.

Attachments

Link to existing Add New ?

Delete	Document Type	Details	Attachment type	Sending method	File name	Edit
	Gonorrhoea laboratory test report	-	Uploaded	-	Gonorrhoea test report.docx	

General supporting comments

Back Close Save

Note: To **Link to existing** refer to Understanding attachments tip sheet

Step 33. Record comments in **General Supporting Comments** text box, if required

Step 34. Press the **Next** button

The **713 Gonorrhoea: Review exam details** screen displays.

713 Gonorrhoea: Review exam details

Exam details

Exam code	713
Exam description	Record testing and treatment for Gonorrhoea
Exam added by	DOCCOLA3, USA - UAT Clinic
Reason requested	Required under policy
Exam date	16 Oct 2017
Exam status	Incomplete
Referred to	Avengers Clinic 123 Sesame ST UNITED STATES

Confirm identity

Was the applicant's identity confirmed?	Yes
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Record results

Exam date	16 Oct 2017
Exam description	Record testing and treatment for Gonorrhoea
Was laboratory testing performed	Yes

Screening

Date specimen reported	16 Oct 2017
Test name	NAAT
Gonorrhoea test result	Not selected
Applicant elects to undergo treatment?	Yes

Step 35. Thoroughly review the information that has been recorded

Note: All details in **713 Gonorrhoea: Review exam details** screen are view only and cannot be edited. To edit, return to the **713 Gonorrhoea: Record results** screen where the information was entered.

Step 36. Press the **Submit Exam** button

General Supporting Comments

Back Submit Exam

Note: Clerical (Medical) users will need to provide a declaration and select the name of the panel physician on behalf of whom they are submitting the exam.

Declaration

I have completed this examination report on behalf of * Select an Option

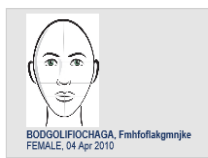
Back Submit Exam

This submits the exam, and returns you to The **713 Gonorrhoea: Review exam details** screen with a success message being displayed on the top of the screen.

Success

713 Gonorrhoea has been successfully submitted.

Health Case: RIZ_CEAC_SUF_1512691317313



BODGOLIFIOCHAGA, Fmhfofalkgmjnke
FEMALE, 04 Apr 2010

- Group CS10004
- Pre exam
- Health case details
- Manage Photo

713 Gonorrhoea: Review exam details

Exam details

Exam code	713
Exam description	Record testing and treatment for Gonorrhoea
Exam added by	CMCOLA3, USA - UAT Clinic
Reason requested	test
Exam date	06 Jun 2018
Exam status	Finalized
Exam expiry date	07 Dec 2018
Referred to	This clinic

Confirm identity

Was the applicant's identity confirmed?	<input checked="" type="radio"/> Not selected <input checked="" type="radio"/> Yes <input type="radio"/> No
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Note: The **713 Gonorrhoea** exam will be added to the health case if the existing **713 Gonorrhoea** exam has expired at the time of 501 Classification.