Appendix RPT I

Surveillance Reports

Introduction

TIMS provides the user with twelve canned reports under **<u>Reports</u>** that present information in either detailed or summarized format. The purpose of these reports is to assist the user with extracting information that will be useful in completing client medical records, making decisions about client care and treatment and to establish interventions aimed at combating the spread of TB disease. In addition to the eleven reports found here, there are two user configurable reports, Ad Hoc Query and Frequency, found in the **<u>Systems</u>** module under **<u>D</u>ata Management.** These reports are covered in detail in the TIMS User Guide in the Systems module section.

To review the pick-list of reports available in the Surveillance module....

- 1. Open the **Surveillance** menu by clicking its symbol **W** on main menu tool bar.
- 2. Click Reports or use (ctrl-r)
- 3. Scroll down pick-list and highlight desired report, then press [ENTER] key



Report Specification Window and Specifying Subset Criteria

A standard format window is used to specify the options available to the user when generating a report in TIMS. This window is used for all surveillance canned reports with the exception of the Facsimile, Updated-in-Session reports and the MUNK Report. The TIMS report specification window allows the user to optionally specify a subset criterion, which filters the data for inclusion in the report. A subset (search) criteria is a condition that is specified by the user to limit the type of records to be used when a report is generated. In general, a greater number of subset criteria results in a fewer number of records eligible for inclusion in the report results. For example, if no subset criteria are selected for the Case Verification Report, then the entire database for all Month-Year Reported dates will be included. However, if subset criteria are specified to include only records for which Month-Year Reported is January 1993 through August 1993 and the reporting area is "Oregon", then only those records which meet the specified criteria will be included in the report.

NOTE: The sample reports presented in this document were created with a TIMS training database. These sample reports are for instructional purposes only and do not reflect any areas' actual surveillance data. The report specification screen for the Case Verification Report is shown below.



- 1. **Report Name** The title of the selected report is displayed at the top of the screen.
- 2. **Select Date Range** The user may enter a date or a range of dates to be used when searching the databases. For reports which generate frequencies the date range directly affects the denominator used in all calculations:
 - □ If no date is specified, all records in the database will be searched.
 - □ If only <Beginning> date is specified, the search will begin inclusively at the date specified and end on the latest date found in the databases.
 - □ If only <Ending> date is specified, the search will begin with the earliest date found in the databases and end inclusively at the dates specified.
 - □ If both <Beginning> and <Ending> date is specified, the search will begin and end inclusively at the dates specified.
- 3. **Date Criteria** The user may limit or filter the selection of records based upon the date chosen according to the following:
 - Month-Year Reported With the exception of the Case Verification Report, all verified cases of TB are considered for inclusion in the report. Suspect records and records which are classified as Not a Verified Case of TB are excluded except when the canned report being generated is the Case Verification Report.

- Month-Year Counted All verified and counted cases of TB are considered for inclusion in the report. The cases are classified as Counted when the Reporting Area answers <YES> to the Case Verification screen question: "Do you want to count this patient at CDC as a verified case of TB?" and enters a date for Month -Year Counted.
- Month-Year Submitted Includes all records that have RVCT's with date submitted recorded regardless of verification status. Note: selection of "include unknown date" will include all records with an unknown date submitted.
- 4. **Report Type –** The two types of formats available allow users to obtain aggregate or individual reporting information.
 - A. Summary format does not contain patient identifiers and is used to generate frequencies or monthly totals of all records which meet the chosen report criteria. Although no explicit patient identifiers are displayed, summary reports could reveal confidential patient information in low morbidity areas. Refer to pages xiii and xiv (Dissemination of Surveillance Data) in the *Confidentiality, Data Security Data Integrity, and Dissemination of Data section* for recommendations concerning the presentation of data and cell size.
 - **B.** Detail format contains patient identifiers and generates a line listing of the date selected, Patient Name, State, City/County Case Numbers, Verification Classification and Site ID, for all records which meet the search criteria. In many instances, detail reports can be used to resolve any data discrepancies between anticipated results and the output generated by summary reports.
- 5. Select Sites No is the default option for this selection and the report will include all Site IDs associated with the reporting area. The user may restrict the search criteria to a particular list of Site IDs by clicking the <Yes> option. A Comprehensive Site ID listing will only be available at reporting area level and will not appear on screen at the local site. This list will include all local Site IDs that have successfully transferred data into the reporting area's database.

To review pick-list for Site IDs

- □ Select <YES> option in Select Sites box.
- □ Click the <OK> button

Date criteria: Month-Year Reported	Report type: O Detail © Summary	▲Select sites: ○ Yes ⓒ No
 Month-Year Counted Month-Year Submitted Include Unknown Date 	Sort by: Patient Name O State Case Number	Select counties: – C Yes © No
0	K <u>C</u> ancel	

Site ID Listing

- □ To select "one" site, scroll down list and highlight requested site.
- □ For each additional site, hold down <Ctrl> button while highlighting additional Sites
- □ After all selections are made, click <OK> button.

OR

- To select "all" sites, click box labeled "Includes All Levels". The entire list will be highlighted.
- □ Click <OK> button.

Site List	
Sites	
OREGON REPORTING AREA	OR0000
SKDJF	OR0100
MULTNOMAH COUNTY	OR2600
L	
Include All Levels	
	Site List Sites OREGON REPORTING AREA SKDJF MULTNOMAH COUNTY Include <u>A</u> ll Levels

6. Select Counties - No is the default option for this selection and the report will include all Counties associated with the reporting area. The user may restrict the search criteria to a particular list of Counties by clicking the <Yes> option. The County option is available at both the reporting area and local levels. Note: There is a selection for <No County Specified>. Choosing this selection will exclude all records, except records with missing a county value for the Address for Case Counting Question .

To review pick-list for Counties

- □ Select <YES> option in Select counties box.
- □ Click the <OK> button

User may filter search by highlighting county name(s) as described in previous section for selecting sites.



- Sort by This feature affects the order that data is presented. Selection options include sorting by patient identifiers <Patient Name> or < State Case Number>. If the sort feature is inactive, Report type establishes the default sort order.
 - For Detail report type, multiple records are sorted by Patient's last name or State Case Number.
 - For **Summary** report type, records are sorted in chronological order.

Printer Setup

The printer setup option is used to select a printer and make changes to the current print settings (i.e. letter, legal, portrait, landscape, etc.).

To change the printer setup...

- 1. Open the Client menu and select **Print Setup**.
- **2.** Select the printer to print the report.
- 3. Click the **Setup** button to change the paper size, orientation, etc.
- 4. Click the **OK** button on two screens.

Report Preview Screen

After you have selected a report, it will be displayed on the screen. You can use the scroll bar on the side and bottom to move the area that is being viewed. You can also use the buttons at the bottom of the screen to display the report in a different setting or to print the report or exit the screen.

To use the navigation buttons on the bottom of the report preview screen...

- 1. Click the first button from the left (the arrow button with a line, pointing to the left) to display the first page of the report.
- 2. Click the second button from the left (the arrow button pointing to the left) to display the previous page.
- **3.** Click the third button from the left (the arrow button pointing to the right) to display the next page.
- **4.** Click the fourth button from the left (the arrow button with a line, pointing to the right) to display the last page of the report.
- **5.** Click the button with a magnifying glass to display the print preview screen. The Print Preview screen allows you to change the percentage of the view. You can also choose to display rulers on the top and side of the report screen.
- 6. Click the print button to send the current report displayed on the screen to the appointed printer.
- 7. Click the button with an arrow pointing to a door to close the report preview screen.





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Report Comparison

When generating reports, it is important that the user recognize the effect that a subset criteria has on the selection of records to be included. When generating each report listed in the table below, the date criteria selected may invoke a subset feature which reduces the number of records included in the report results. Subset techniques must be applied appropriately to obtain valid report results.

	RECORDS INCLUDED			
REPORT NAME	All	Verified Cases		
	Records	Both Counted and Not Counted records	Not Counted records O <u>nly</u>	Counted Records <u>Only</u>
Case Verification	Yes	No	No	No
Counted Cases	No	No	No	Yes, for any of the date criteria selected
Not Counted Cases	No	No	Yes, for any of the date criteria selected	No
Demographic	No	Yes, when the Month- Year Reported date range is selected	No	Yes, when the Month- Year Counted date criteria is selected
Clinical Data	No	Yes, when the Month- Year Reported date range is selected	No	Yes, when the Month-Year Counted date criteria is selected
Case Follow -Up	No	Yes, when the Month- Year Reported date range is selected	No	Yes, when the Month-Year Counted date criteria is selected
Complete & Incomplete Records	Yes, when the Month- Year Reported date range is selected.	No	No	Yes, when the Month- Year Counted date criteria is selected

Report Formats and Uses

The following table summaries the uses of and formats available for each of the eleven reports. Samples of these reports along with detailed explanations are provided later in the document.

REPORT NAME	Uses of Report	Format Available
Case Verification	Data Analysis	Summary
Counted Cases	Data Analysis	Summary / Detail
Not Counted Cases	Data Analysis	Summary / Detail
Demographics	Data Analysis	Summary
Clinical Data	Data Analysis	Summary
Case Follow-up	Data Analysis	Summary
Complete Rvct Records	Data Management	Detail
Incomplete Rvct Records	Data Management	Detail
Facsimile	Data Management	Detail
Updated-in-Session	Data Management	Detail
Deleted Records	Data Management	Detail
MUNK Report	Data Management	Summary / Detail

Case Verification Report

Description: The Case Verification report includes Verified Cases and Non-Verified Records (i.e., Suspect and Not a Verified Case) and generates a frequency table according to the case verification classification (i.e. Positive Culture, Positive Smear/Tissue, Clinical Case Definition, Provider Diagnosis, Suspect, and Not a Verified Case). The total number of records and the percentage for each classification category is included. The report may be subset by a Month-Year Reported date range and by using the Site ID and County List inclusion criteria. All records in the database will be included in the search unless a subset criteria is specified.

Display: *The Case Verification Report selection criteria screen*

Case Verification Report		
Ca	ase Verification Report	
Please	e Enter the Desired Date Range	
E	eginning: 00/0000 📳	
	Ending: 00/0000 🖪	
Date criteria:	- Report type:	Select sites:
	C Datail C Cumman	
Month-Year Benorted	O Detail 🙂 Sullillary	OYes • No
Month-Year Reported Month-Year Counted	Sort by:	O Yes O No
 Month-Year Reported Month-Year Counted Month-Year Submitted 	Sort by: Patient Name	Select counties:

- Date Range select dates as required for query
- Date Criteria Month-Year Reported option is fixed for this report format
- **Report Type** Summary option is fixed for this report format.
- **Select sites** Yes or No (for the reporting area only)
- Select Counties Yes or No
- Sort by Selection buttons are inactive on this report. Default for this report is Summary which sorts records in chronological order.

Sample Report: Case Verification Report



- 1. The title of the report.
- 2. The Month-Year Reported date range is displayed. If no subset date range criteria is specified by the user, the report header defaults to the earliest and latest dates found in the database.
- 3. The reporting area is displayed.
- 4. The report includes both Verified Cases and Non-Verified Records
- 5. The total number of records included in the report is displayed.
- 6. The verification categories, number and percentage of records is displayed according to verification status.
- 7. The date and time that report was created is displayed at bottom of results page.

Counted Cases Report

Description: The Counted Cases report creates a monthly total (Summary Report) or an itemized line listing (Detail Report) of verified and counted cases of TB. Cases are classified as Counted by choosing <Yes> when answering question: "Do you want to count this patient at CDC as a verified case of TB?" on the Case Verification screen and entering a count date.

Display:

The Counted Cases Report selection criteria screen

Counted Cases Report		_ 🗆 ×
C Please E	Counted Cases Report Enter the Desired Date Range Leginning: 100/0000 용 Ending: 100/0000 음	
Date criteria: © Month-Year Reported © Month-Year Counted © Month-Year Submitted	Report type: O Detail Image: Construction of the second	Select sites: C Yes O No Select counties: - C Yes O No

- Date Range Select dates as required for query
- Date Criteria Select either Month-Year Reported, Month-Year Counted or Month-Year Submitted. Format for each of these reports will be similar regardless of the date chosen
- Report Type Select either Detail or Summary format. Summary generates a total by month of the number of counted cases for all records which meet the subset criteria. Detail generates a line listing of the date selected, client name, State and City/County case numbers, Verification status and Site ID for all records which meet the subset criteria.
- Select sites Yes or No (for the reporting area only)
- Select Counties Yes or No
- Sort by Selection buttons are inactive on this report. Order is established by report type (e.g., detail or summary).



Sample Report: Counted Cases Summary Report:



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- 2. The number of counted cases for each Month-Year is listed.
- 3. The total number of counted cases is displayed.

Sample Report: Counted Cases Detail Report



- The report is sorted by the date option selected. If multiple records are found for a
 particular Month-Year, they are sorted by the Patient's last name. Note that the records
 listed correspond to the beginning and ending date specified in the heading of this
 sample report.
- 2. The number of counted cases for each Month-Year is listed.
- 3. The total number of counted cases for the selection criteria is displayed.

Not Counted Cases Report

Description: The **Not Counted Cases** report creates a monthly total (Summary Report) or an itemized line listing (Detail Report) of the records that are not counted. This includes records that are verified cases but not counted (i.e. the reporting area answers **No** to the question: "Do you want to count this patient at CDC as a verified case of TB?" on the Case Verification screen), cases pending a count decision and records which are not verified cases of TB (i.e. suspect records, and records that are classified as Not a Verified Case).

Display:

The Not Counted Cases Report selection criteria screen.

Not Counted Cases Repo	t	
No Please B	t Counted Cases Report Enter the Desired Date Range Inginning: 00/0000 S Ending: 00/0000 S	
Date criteria: Month-Year Reported Month-Year Counted Month-Year Submitted	Sort by: © Patient Name © State Case Number	Select sites: Yes No Select counties: Yes No
	OK <u>C</u> ancel	

- Date Range Select dates as required for query.
- Date Criteria Select Month-Year Reported or Month-Year Submitted
- □ **Report Type** Select either **Detail or Summary** format. Summary format is the default setting.
- Select sites Yes or No (for the reporting areas only)
- □ Select Counties Yes or No
- □ Sort by Selection buttons are inactive on this report. Order is established by selection of report type (e.g., detail or summary).



Sample Report: Not Counted Cases Summary Report

- 1. The value for dates selected (i.e., Month-Year Reported, Month-Year Submitted or the default time interval) are listed in chronological order. These values match the date range specified on selection criteria screen. Should the criteria date range be left blank, the system automatically includes all records in the database.
- 2. The number of counted cases for each Month-Year is listed.
- 3. The total number of counted cases is displayed.

Sample Report: Not Counted Cases Detail Report

	**** Confidential Patient Information **** SURVEILLANCE NOT COUNTED CASES DETAIL REPORT For the Month - Year Reported BEGINNING 02/1995 AND ENDING 12/1999 Sorted by Month-Year Reported and Patient Name					
	Reporting Ar Site Name: A	ea: OREGON REPORTING ARE 11 Sites	À			
	County Name: A	all Counties				
	Month-Year Reported	Patient Name	<u>Case Number</u> State City/County	<u>Verifi-</u>	<u>Count</u> Status	<u>Site</u> ID
$+ \leq$	02/1995	ARDVARK, ANDY K	260092095 071750017 02/1995	Provider 1 Record	No	OR2600
	01/1999	WASHINGTON, CASE	000987968 01/1999	Suspect 1 Record		OR0000
	03/1999 03/1999	APPOINTMENT, CLIENT DATA, TEST B	000000333 WA2398492	Suspect Suspect 2 Records		OR0000 OR0000
	10/1999	FORBES, AL	ONEWYORK1 10/1999	Culture	Pending	OR0000
	12/1999	PUBLIC, JOHN C	EWR342534 12/1999	Suspect 1 Record		OR0000
+		→ Total Number	r of Records:	6		

- 1. The report is sorted by the date option selected. If multiple records are found for a particular Month-Year, they are sorted by the Patient's last name. Note that a beginning and ending date range has been specified for this sample report.
- 2. The number of counted cases for each Month-Year is listed.
- 3. The total number of counted cases for the selection criteria is displayed.

Demographics Report

Description: The **Demographics** report generates frequency tables that display both the number of occurrences and percentages for various RVCT data items pertaining to patient demographic information.

Display:

The Demographics Report selection criteria screen.

Demographics Report		_ 🗆 🗵
E Please E	Demographics Report e Enter the Desired Date Range Beginning: 00/0000 🔮 Ending: 00/0000 🔮	
Date criteria: Month-Year Reported Month-Year Counted Month-Year Submitted	Report type: C Detail Summary Sort by: Patient Name C State Case Number OK Cancel	Select sites: C Yes O No Select counties: C Yes O No

- Date Range Select dates as required for query.
- Date Criteria Select Month-Year Reported or Month-Year Counted. If Month-Year Reported is selected, then all verified cases of TB are considered for inclusion in the report (i.e., suspect records and records which are classified as Not TB are excluded). If Month-Year Counted is selected, then the scope of records considered for inclusion in the report is narrowed to only verified cases of TB which are counted (i.e., the reporting area answers <Yes> to the question: "Do you want to count this patient at CDC as a verified case of TB?") and have a count date.
- Report Type Summary format is fixed for this report format.
- **Select sites** Yes or No (for the reporting areas only)
- Select Counties Yes or No
- Sort by Selection buttons are inactive on this report. Order is established by selection of report type. The Summary report status sort records in chronological order.

Sample Report: Demographics Report: Page 1 of 4

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SURVEILLANCE DEMOGRAPHICS REPORT

For the Month-Year Reported

BEGINNING 07/1992 AND ENDING 12/2002

Reporting Area: KANSAS TB CONTROL Site Name: All Sites

County Name: All Counties

IICITY	Number of		
Classification	Records	Percent	
Hispanic or Latino	188	24.61 %	
Not Hispanic or Latino	561	73.43 %	
Unknown	15	1.96 %	
Missing	0	0.00 %	
Total	764	100.00 %	
<u>Ca</u> lculated)	Number of		
Classification	Records	Percent	
Single Race:			
🛪 American Indian or Alaska Native	6	0.79 %	
Asian	182	23.82 %	
Black or African American	109	14.27 %	
Native Hawaiian or Other Pacific Islander	0	0.00 %	
White	434	56.81 *	
Multiple Races	1	0.13 %	
Unknown	32	4.19 %	
Missing	1	0.13 %	
Total	764	100.00 %	

SEX

2

Classification	Records	Percent	
Male	465	60.86 %	
Female	299	39.14 %	
Unknown	0	0.00 %	
Missing	0	0.00 %	•
Total	764	100.00 %	

COUNTRY OF ORIGIN

Classification	Number of Records	Percent
U.S.	415	54.32 %
Non-U.S.	245	32.07 %
Unknown	18	2.36 %
Missing	86	11.26 %
Total	764	100.00 %

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04/03/2003 at 10:15:32

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- The RVCT data item for the frequency table. Some of these data items are obtained from direct input to the RVCT form (e.g., Question 8, Sex; Question 24, Homeless Within Past Year; etc.) while others are calculated variables (e.g., Multiple Race, Age Groups, etc). A complete list of the data items input from the RVCT form and the calculations, can be found in Appendices SUR I - RVCT Form Completion Instructions and SUR II – RVCT Forms with Field Names of the TIMS User Guide.
- 2. Classifications for valid responses for the RVCT data with single race, multiple race and ethnicity selections is displayed.
- 3. The total number of records included in the report for the RVCT data is displayed. This number is the denominator that is used in the percentage calculations.
- 4. The number and percent of records for each classification of valid responses are displayed. The percentage for each classification is calculated by dividing the total number of records for the classification (numerator) by the total number of records for the RVCT data item (denominator) and multiplying by 100. The total percentage for each RVCT data item will always equal 100%.

Sample Report: Demographics Report: Page 2 of 4

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SURVEILLANCE DEMOGRAPHICS REPORT

For the Month-Year Reported

BEGINNING 07/1992 AND ENDING 12/2002

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Reporting Area: KANSAS TB CONTROL Site Name: All Sites

County Name: All Counties

lassification	Number of Records	Percent
0 - 4	48	6.28 %
5 - 9	20	2.62 \$
10 - 14		0.39 %
15 - 19	17	2.23 %
20 - 24	76	9.95 %
25 - 29	65	8.51 %
30 - 34	70	9.16 %
35 - 39	53	6.94 %
40 - 44	66	8.64 %
45 - 49	52	6.81 %
50 - 54	43	5.63 %
55 - 59	38	4.97 %
60 - 64	24	3.14 %
65 - 69	32	4.19 %
70 - 74	40	5.24 %
75 - 79	49	6.41 %
80 - 84	31	4.06 %
85 and Older	36	4.71 %
Unknown	1	0.13 %
Total	764	100.00 %

10 YEAR AGE GROUP (Calculated)

ILAR AGE GROUP (Calculated)	Number of		
Classification	Records	Percent	
0 - 9	68	8.90 %	
10 - 19	20	2.62 %	
20 - 29	141	18.46 %	
30 - 39	123	16.10 %	
40 - 49	118	15.45 %	
50 - 59	81	10.60 %	
60 - 69	56	7.33 %	
70 - 79	89	11.65 %	
80 and Older	67	8.77 %	
Unknown	1	0.13 %	
Total	764	100.00 %	

HOMELESS WITHIN PAST YEAR

Classification	Records	Percent
No	677	88.61 %
Yes	44	5.76 %
Unknown	39	5.10 %
Missing	4	0.52 %
Total	764	100.00 %

*** Confidential Patient Information ***

04/03/2003 at 10:15:32

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Sample Report: Demographics Report: Page 3 of 4

*** Confidential Patient Information ***

SURVEILLANCE DEMOGRAPHICS REPORT

For the Month-Year Reported

BEGINNING 07/1992 AND ENDING 12/2002

Reporting Area: KANSAS TB CONTROL Site Name: All Sites

County Name: All Counties

RESIDENT OF CORRECTIONAL FACILITY AT TIME OF DIAGNOSIS

Classification	Number of Records	Percent
No	735	96.20 %
Yes	12	1.57 %
Unknown	14	1.83 %
Missing	3	0.39 %
Total	764	100.00 %

RESIDENT OF LONG-TERM CARE FACILITY AT TIME OF DIAGNOSIS

Classification	Number of Records	Percent
No	707	92.54 %
Yes	40	5.24 %
Unknown	13	1.70 %
Missing	4	0.52 %
Total	764	100.00 %

INJECTED DRUG USE WITHIN PAST YEAR

Classification	Number of Records	Percent
No	597	78.14 %
Үев	21	2.75 %
Unknown	136	17.80 %
Missing	10	1.31 %
Total	764	100.00 %

NON-INJECTED DRUG USE WITHIN PAST YEAR

Classification	Number of Records	Percent
No	570	74.61 %
Yes	53	6.94 %
Unknown	130	17.02 🕯
Missing	11	1.44 %
Total	764	100.00 %

*** Confidential Patient Information ***

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Sample Report: Demographics Report: Page 4 of 4

*** Confidential Patient Information ***

SURVEILLANCE DEMOGRAPHICS REPORT

For the Month-Year Reported

BEGINNING 07/1992 AND ENDING 12/2002

Reporting Area: KANSAS TB CONTROL Site Name: All Sites

County Name: All Counties

EXCESS ALCOHOL USE WITHIN PAST YEAR

Classification	Number of Records	Percent
No	528	69.11 %
Yes	95	12.43 %
Unknown	130	17.02 %
Missing	11	1.44 %
Total	764	100.00 %

OCCUPATION (Calculated)

Classification	Number of Records	Percent
Health Care Worker	25	3.27 %
Correctional Employee	0	0.00 %
Migratory Agricultural Worker	5	0.65 %
Other Occupation	277	36.26 %
Multiple Occupations	0	0.00 %
Not Employed Within Past 24 Months	331 ·	43.32 %
Unknown	120	15.71 %
Missing	6	0.79 %
Total	764	100.00 %

*** Confidential Patient Information ***

04/03/2003 at 10:15:33

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Clinical Data Report

Description: The **Clinical Data** report generates tables that display both the number of occurrences and percentages for various items pertaining to clinical data on the RVCT. The selection criteria screen will allow the user to specify the report date range, site ID, and county list. The date criteria or report type is fixed in summary format.

The Clinical Data Report selection criteria screen.

Clinical Data Report		_ 🗆 🗵
Please	Clinical Data Report Enter the Desired Date Range Beginning: 00/0000 🔮 Ending: 00/0000 🚭	
Date criteria: Month-Year Reported Month-Year Counted Month-Year Submitted	Beport type: O Detail Summary Sort by: Patient Name O State Case Number OK Cancel	Select sites: C Yes C No Select counties: C Yes C No

Subset Criteria:

Display:

- Date Range Select dates as required for query.
- Date Criteria Select Month-Year Reported or Month-Year Counted. If Month-Year Reported is selected, then all verified cases of TB are considered for inclusion in the report (i.e., suspect records and records which are classified as Not TB are excluded). If Month-Year Counted is selected, then the scope of records considered for inclusion in the report is narrowed to only verified cases of TB which are counted (i.e., the reporting area answers <Yes> to the question: "Do you want to count this patient at CDC as a verified case of TB?").
- **Report Type** Summary format is fixed for this report.
- Select sites Yes or No (for the reporting areas only)
- Select Counties– Yes or No
- Sort by Selection buttons are inactive on this report. Order is determined by selection of report type. The Summary report status will prompt sorting records in chronological order

Sample Report: Clinical Data Report: Page 1 of 3

ceporting Area: OREGON REFORTING AREA Site Name: All Sites			
County Name: All Counties			
Number of Records	Percent		
52	88.14 %		
1	1.69%		
0			
6	10.17%		
59	100.00 %		
Number of			
Records	Percent		
52	88.14 %		
2	3.39%		
5	8.47%		
59	100.00%		
Number of	Percent		
Records	rercent		
37	62.71%		
14	23.73%		
/ 0	11.86%		
1	1.69%		
59	100.00%		
Number of Records	Percent		
19	32.20%		
27	45.76%		
9	15.25 %		
1	1.69%		
	5.08%		
57	100.00%		
Number of			
Records	Percent		
35	59 32%		
11			
11	18.64%		
11 9	18.64%		
11 9 2	18.64% 15.25% 3.39%		
11 9 2 2	18.64% 15.25% 3.39% 3.39%		
	Number of Records 52 1 0 6 59 Number of 8 59 Number of 8 59 Number of 7 59 Number of 8 59 Number of 8 59 Number of 1 1 59 Number of 8 59 59 Number of 8 59 Number of 59 59 Number of 59 59		

Sample Report: Clinical Date Report Page 2 of 3

ty Name: All Counties		
COPIC EXAM OF TISSUE AND OTHER BODY FLUIDS		
	Number of	
Classification	Records	Percent
Positive	3	5.08 %
Negative	19	32.20 %
Not Done	28	47.46 %
Unknown Minning	1	1.69 %
Missing	8	13.56%
Total	59	100.00 %
TURE OF TISSUE AND OTHER	BODY FLUIDS	
Classification	Number of Records	Percent
Positive	20	33 90 %
Negative	20	3 39 %
Not Done	28	47.46 %
Unknown	3	5.08 %
Missing	6	10.17 %
Total	59	100.00 %
ST X-RAY	N	
Classification	Number of Records	Percent
Normal	7	11.86 %
Abnormal	44	74.58 %
Not Done	2	3.39 %
Unknown	2	3.39 %
Missing	4	6.78 %
Total	59	100.00 %
ERCULIN (MANTOUX) SKIN TE	ST AT DIAGNOSIS	
ERCULIN (MANTOUX) SKIN TE	ST AT DIAGNOSIS Number of Records	Parcan+
ERCULIN (MANTOUX) SKIN TE Classification	ST AT DIAGNOSIS Number of Records	Percent
ERCULIN (MANTOUX) SKIN TE Classification Positive	ST AT DIAGNOSIS Number of Records	Percent
ERCULIN (MANTOUX) SKIN TE Classification Positive Negative	ST AT DIAGNOSIS Number of Records	Percent 54.24% 11.86%
ERCULIN (MANTOUX) SKIN TE Classification Positive Negative Not Done	ST AT DIAGNOSIS Number of Records 32 7 12	Percent 54.24% 11.86% 20.34%
ERCULIN (MANTOUX) SKIN TE Classification Positive Negative Not Done Unknown Missing	ST AT DIAGNOSIS Number of Records 7 12 2 6	Percent 54.24% 11.86% 20.34% 3.39% 10.12%
ERCULIN (MANTOUX) SKIN TE Classification Positive Negative Not Done Unknown Missing	ST AT DIAGNOSIS Number of Records 7 12 2 6	Percent 54.24% 11.86% 20.34% 3.39% 10.17%

Sam	ple	Re	port:	Clinical	Data	Repo	ort Pa	ge 3	d of a	3
oun	0.0			onnou	Bata			900		•

***** Confidential Information ***** SURVEILLANCE CLINICAL DATA For the Month-Year Reported BEGINNING 01/1993 AND ENDING 01/2001

Reporting Area: OREGON REPORTING AREA Site Name: All Sites

County Name: All Counties

HIV STATUS	Number of
Classification	Records
Negative	34
Positive	3
Indeterminate	0
Refused	1
Not Offered	14
	-

Test Done, Results Unknown 1 1.69% Unknown 0 0.00% Missing 6 10.17% Total 59 100.00%

INITIAL DRUG REGIMEN (Calculated)

	Classification	Records	Percent
_	No Drugs	0	0.00%
	One Drug	0	0.00%
	INH, RIF, PZA, and EMB or SM	30	50.85%
	Isoniazid, Rifampin and Pyrazinamide	15	25.42%
	Isoniazid and Rifampin	5	8.47%
	Any other multiple drug combination	5	8.47%
	Unknown	4	6.78%
	Total	59	100 00%

*** Confidential Patient Information ***

Number of

5/21/2002 at 13:41:22

Page 3 of 3

Percent 57.63% 5.08% 0.00% 1.69% 23.73%

Case Follow-Up Report

Description: The **Case Follow-up** report generates tables that display both the number of occurrences and percentages for various data items pertaining to:

Initial Drug Susceptibility (Follow Up Report-1)

Was Drug Susceptibility Testing Done – Question 33

Case Completion Report (Follow Up Report - 2)

- □ Sputum Culture Conversion Documented Question 35
- Reason Therapy Stopped Question 37
- □ Type of Health Care Provider Question 38
- Directly Observed Therapy Question 39
- □ Was Follow-Up Drug Susceptibility Testing Done Question 40

Display: The Case Follow-Up Report selection criteria screen.

💸 Case Follow-Up Report		_ 🗆 🗵
C Please B	ase Follow-Up Report Enter the Desired Date Range eginning: 100/0000 📑 Ending: 100/0000 📑	
Date criteria: Month-Year Reported Month-Year Counted	Report type: C Detail Sort by: C Patient Name	Select sites:
C Month-Year Submitted	C State Case Number OK <u>C</u> ancel	C Yes © No

- Date Range Select dates as required for query.
- Date Criteria Select Month-Year Reported or Month-Year Counted . If Month-Year Reported is selected, then all verified cases of TB are considered for inclusion in the report (i.e., suspect records and records which are classified as Not TB are excluded). If Month-Year Counted is selected, then the scope of records considered for inclusion in the report is narrowed to only verified cases of TB which are counted (i.e., the reporting area answers <Yes> to the question: "Do you want to count this patient at CDC as a verified case of TB?") and have a count date.
- **Report Type** Summary format is fixed report criteria.
- □ Select sites Yes or No (for the reporting areas only)
- Select Counties Yes or No
- Sort by Selection buttons are inactive on this report. Order is determined by selection of report type. The Summary report status will sort records in chronological order.

Sample Report: Case Follow-up Report page 1 of 2

	*** Confidential Patient Informat SURVEILLANCE CASE FOLLOW-UP RE For the Month-Year Reported DEGIMENTE 01/0000 DEFINITION	ion *** PORT /2000	
anothing Americ KANGAG MD CONTROL	BEGINNING 01/2000 AND ENDING 12	/2000	
porting Area: KANSAS TE CONTROL			
te Mane. All Sites			
unty Name: All Counties			•
DRUG SUSCEPTIBILITY TESTING DONE			
<u>Classification</u>	<u>Number of</u> <u>Records</u>	Percent	
No	15	22.06 %	
Үез	49	72.06 %	
Unknown	0	0.00 %	
Missing	4	5.88 %	
Total	68	100.00 %	
UM CULTURE CONVERSION DOCUMENTED			
	Number of		
Classification	Records	Percent	
No	5	6.67 %	
Yes	26	34.67 %	
Unknown	0	0.00 %	
Missing	44	58.67 %	
Total	75	100.00 %	
N THERAPY STOPPED			
<u>Classification</u>	<u>Number of</u> <u>Records</u>	Percent	
Completed Therapy	61	81.33 %	
Moved	4	5.33 %	
Lost	0	0.00 %	
Uncooperative or Refused	1	1.33 %	
Not TB	0	0.00 %	
Died	4	5.33 %	
Other	1	1.33 %	
Unknown	0	0.00 %	
Missing	4	5.33 %	
Total	75	100.00 %	
E - There are 68 Initial Drug Sus Completion Reports included in	Ceptibility Reports and 75 Case In this subset criteria.		
	*** Confidential Patient Informat	ion ***	
04/03/2003 at 10:31:02			

Note: Denominators may vary within the Case Follow-Up Report, because data items from two separate forms (i.e., the Initial Drug Susceptibility and Case Completion Reports) are included in this report. In most cases, the number of Initial Drug Susceptibility Reports will be less than the number of Case Completion Reports. The footnote indicates the number of Initial Drug Susceptibility Reports and the number of Case Completion Reports.

Sample Report: Case Follow-up Page 2 of 2

*** Confide: SURVEILL	ntial Patient Informa ANCE CASE FOLLOW-UP R	tion ***
For t	the Month-Year Report	ad
BEGINNING	01/2000 AND ENDING 1	2/2000
Reporting Area: KANSAS TB CONTROL		
Site Name: All Sites		
County Name: All Counties		
E OF HEALTH CARE PROVIDER		4
	Number of	
<u>Classification</u>	Records	Percent
Health Department	55	73.33 🕯
Private/Other	20	26.67 %
Both Health Department and Private/Other	0	0.00 1
Missing	0	0.00 1
Total	75	100.00 %
ECTLY OBSERVED THERAPY		
	Number of	
<u>Classification</u>	Records	Percent
No, Totally Self-Administered	9	12.00 \$
Yes, Totally Directly Observed	64	85.33
Yes, Both Directly Observed and Self	0	0.00 \$
Unknown	0	0.00 %
Missing	2	2.67 1
Total	75	100.00 %
FOLLOW-OF DRUG BUSCRPIIBILITY TESTING DONE		
	Number of	

<u>Classification</u>	Records	Percent
No	61	81.33 %
Yes	3	4.00 %
Unknown	0	0.00 %
Missing	11	14.67 %
Total	75	100.00 %

NOTE - There are 68 Initial Drug Susceptibility Reports and 75 Case Completion Reports included in this subset criteria.

*** Confidential Patient Information ***

04/03/2003 at 10:31:02

Page 2 of 2

Completed RVCT Records Report

Description The Completed RVCT Records report generates a line listing (Detail Report) of all Surveillance records (i.e. verified cases, suspect records, and all records which are classified as Not a Verified Case) for which the RVCT form is determined to be complete. The report also indicates the Form Completion Status Codes (i.e. Complete, Incomplete, or Not Applicable) for the Initial Drug Susceptibility Report {1}, Case Completion Report {2}, Patient Data {P}, and Case Verification Data {C} in the record. A complete list of algorithms used to calculate completeness can be found in Appendix SUR XIV – Records Completeness Algorithms.

Detail

The Completed RVCT Records Report selection criteria screen

Sompleted RVCT Records	;	
Coi Please B	mpleted RVCT Records Enter the Desired Date Range leginning: 00/0000 (S Ending: 00/0000 (S	
Date criteria: Month-Year Reported Month-Year Counted Month-Year Submitted	Beport type: © Detail C Summary Sort by: C Patient Name © State Case Number OK Cancel	Select sites: C Yes C No Select counties: - C Yes C No

- Date Range Select dates as required for query
- Date Criteria Select either Month-Year Reported or Month-Year Counted
- **Report Type Detail** format is fixed for this report.
- □ Select sites Yes or No (for the reporting area only)
- □ Select Counties Yes or No
- Sort by Selection buttons are inactive on this report. Order is determined by selection of report type. The Detail report status will prompt sorting records by patient's last name and State Case Number.

Sample Report: Completed RVCT Records Report

**** Confidential Patient Information **** SURVEILLANCE COMPLETE RVCT RECORDS REPORT For the Month-Year Reported BEGINNING 01/2000 AND ENDING 06/2000 Sorted by Month-Year Reported and Patient Name

Reporting Area: KANSAS TB CONTROL Site Name: All Sites

County Name: All Counties

Month-Year		Case	Number	Site		F	orm S	statu	18
Reported	Patient Name	State	City/County	ID	Verification	_	1 2	P	<u>c</u>
01/2000	KS000001000000R,	KS00000100200064087		KS0000	Clinical	С	С	С	С
01/2000	KS000001000000X,	KS00000100200070105		KS0000	Culture	С	С	С	С
01/2000	KS00009900000028,	KS00009900200001087		KS0000	Culture	С	С	С	С
01/2000	KS0000990000038,	KS00009900200036054		KS0000	Clinical	С	С	С	С
		01/2000	:	4 Records					
02/2000	KS000001000000K,	KS00000100200057046		KS0000	Clinical	С	C	С	С
02/2000	KS0000010000012,	KS00000100200075105		KS0000	Clinical	С	С	С	С
02/2000	KS0000990000002A,	KS00009900200003030		KS0000	Culture	С	с	С	С
02/2000	KS0000990000002B,	KS00009900200004105		KS0000	Culture	С	С	C,	C
02/2000	KS0000990000002C,	KS00009900200005018		KS0000	Culture	С	С	С	С
		02/2000	:	5 Records					
03/2000	KS000001000000G,	KS00000100200053031		KS0000	Clinical	С	с	с	С
03/2000	KS0000990000002E,	KS00009900200007046		KS0000	Culture	С	с	С	С
03/2000	KS0000990000002F,	KS00009900200008046		KS0000	Culture	с	с	С	С
03/2000	KS0000990000002G,	KS00009900200009087		KS0000	Culture	С	С	С	С
03/2000	KS0000990000002H,	KS00009900200010087		KS0000	Culture	С	С	С	С
03/2000	KS00009900000021,	KS00009900200011087		KS0000	Culture	С	с	С	С
		03/2000	:	6 Records					
04/2000	KS0000010000005,	KS00000100200042088		KS0000	Provider	N	С	С	С
04/2000	KS0000010000009,	KS00000100200046088		KS0000	Provider	N	С	С	С
04/2000	KS0000990000002J,	KS00009900200012075		KS0000	Provider	С	С	С	С
04/2000	KS0000990000002K,	KS00009900200013028		KS0000	Clinical	С	С	С	С
04/2000	KS000099000002L,	KS00009900200014046		KS0000	Culture	С	С	С	С
04/2000	KS0000990000002M,	KS00009900200015046		KS0000	Culture	С	С	С	С
		04/2000	:	6 Records					
05/2000	KS000001000000T,	KS00000100200066019		KS0000	Clinical	N	С	С	С
05/2000	KS0000990000002N,	KS00009900200016087		KS0000	Culture	С	С	С	С
05/2000	KS00009900000020,	KS00009900200017087		KS0000	Clinical	С	С	С	С
05/2000	KS0000990000002P,	KS00009900200018087		KS0000	Culture	С	С	С	С
05/2000	KS00009900000039,	KS00009900200037087		KS0000	Clinical	С	С	С	С
		05/2000	: .	5 Records					
06/2000	KS0000990000002R,	KS00009900200020008		KS0000	Culture	С	С	С	С
06/2000	KS0000990000002T,	KS00009900200022105		KS0000	Culture	С	С	с	С
		06/2000	:	2 Records					

< Total Number of Records = 28 >

 $\label{eq:CODES: 1 = Follow-Up 1, 2 = Follow-Up 2, P = Patient Data, C = Case Verification C = Complete, I = Incomplete, N = Not Applicable$

**** Confidential Patient Information ****

03/25/2003 at 13:45:43

Page 1 of 1

Incomplete RVCT Records Report

Description: The Incomplete RVCT Records report generates an itemized listing (Detail Report) of all Surveillance records (i.e. verified cases, suspect records, and records which are classified as Not TB) for which the RVCT form has been determined to be incomplete (i.e. with missing, invalid, or incomplete RVCT data). This line listing includes all Surveillance records that are not included in the Completed RVCT Records report. The report also indicates the Form Completion Status Codes (i.e. Complete, Incomplete, or Not Applicable) for the Initial Drug Susceptibility Report {1}, Case Completion Report {2}, Patient Data {P}, and Case Verification Data {C} in the record. A complete list of algorithms used to calculate completeness can be found in Appendix SUR XIV – Records Completeness Algorithms.

Detail: The Incomplete RVCT Records Report selection criteria screen is displayed below.

lncomplete RVCT Records	\$	
Inco Please B	omplete RVCT Records Enter the Desired Date Range eginning: 100/0000 (S Ending: 100/0000 (S)	
Date criteria: Month-Year Reported Month-Year Counted Month-Year Submitted	Report type: Image: Constraint of the system Sort by: Image: Constraint of the system Image: Constraty of the system<	Select sites: Yes No Select counties: – Yes R No

- Date Range Select dates as required for query.
- Date Criteria Select either Month-Year Reported or Month-Year Counted
- **Report Type Detail** format is fixed for this report.
- Select sites Yes or No
- Select Counties Yes or No
- Sort by Selection buttons are inactive on this report. Order is determined by selection of report type. The Detail report status will prompt sorting records by patient's last name and State Case Number.

Sample Report: Incomplete RVCT Records Report: Page 1 0f 2

**** Confidential Patient Information **** SURVEILLANCE INCOMPLETE RVCT RECORDS REPORT For the Month-Year Reported BEGINNING 02/2002 AND ENDING 12/2002 Sorted by Month-Year Reported and Patient Name

Reporting Area: KANSAS TB CONTROL Site Name: All Sites

County Name: All Counties

Image:	Reported Patient Name State City/County ID Verification I I Z P C 02/2002 KS000020000000W, KS000020020014 KS0000 Culture I I C 02/2002 KS00003000000U, KS000030002002015 KS0000 Culture I I C 02/2002 KS000030000000, KS000030020020033 KS0000 Culture I I C 02/2002 KS000030000000, KS000030020020033 KS0000 Provider I I C 02/2002 KS000020000000, KS0000200200203 KS0000 Provider I I C 02/2002 KS00002000001X, KS00002002002020 KS0000 Culture I I C 03/2002 KS000030000000, KS0000200200202 KS0000 Culture I I C 03/2002 KS000030000000, KS000030020202003 KS0000 Provider I I C 03/2002 KS000030000000, KS000030020202003 KS0000 Culture I I </th <th><u> </u></th>	<u> </u>
01/2002 K80000020002000101 K800000 Culture I I C C 02/2002 K800000300000001, K8000030022020013 K80000 Culture I I C C 02/2002 K80000030000000, K8000030022002033 K80000 Provider I I C C 02/2002 K80000030000000, K8000030022002033 K80000 Culture I I C C 03/2002 K80000020000001, K8000002002020132 K80000 Culture I I C C 03/2002 K80000030000000, K8000030020202033 K80000 Provider I I C C 03/2002 K80000300020020202030 K80000 Culture I I C C 03/2002 K8000030000000, K80000300200200203 K80000 Culture I I C C 04/2002 K8000030000000, K800003000200200203 K80000 Culture I I C C 04/2002 K8000030000000, K80000300020020020 K80000 Culture I I C C	02/2002 KS00002000001W, KS0000200200101 KS0000 Culture I I C 02/2002 KS000030000000L, KS000030020020012 KS0000 Culture I I C 02/2002 KS000030000000, KS000030020020012 KS0000 Culture I I C 02/2002 KS000030000000, KS000030020020033 KS0000 Provider I I C 02/2002 KS000020000001X, KS00002002002013 KS0000 Culture I I C 03/2002 KS000030000000P, KS000030002002032 KS0000 Culture I I C 03/2002 KS00003000000P, KS000030002002032 KS0000 Provider I I C 03/2002 KS000030000000P, KS000030002002032 KS0000 Provider I I C 03/2002 KS000030000000P, KS000030020020039 KS0000 Provider I I C 03/2002 KS000030000000P, KS0000300200200203 KS0000 Culture I I C 03/2002 KS000030000000P, KS0000300200200203 KS0000 Culture I I	-
02/2002 KS000030000000, KS0000030002020012 KS00000 Culture I I C C 02/2002 KS0000030000000, KS000030020200033 KS00000 Provider I I C C 02/2002 KS0000030000000, KS000030020200033 KS00000 Provider I I C C 02/2002 KS0000020000000, KS000020020020032 KS00000 Culture I I C C 03/2002 KS0000030000000, KS000020020020032 KS00000 Provider I I C C 03/2002 KS0000030000000, KS000030020200034 KS0000 Provider I I C C 03/2002 KS0000030000000, KS000030020200203 KS00000 Culture I I C C 03/2002 KS0000030000000, KS00003002020203 KS00000 Culture I I C C 04/2002 KS0000030000000, KS000030020202035 KS0000 Culture I I C C 04/2002 KS0000030000000, KS000030020202035 KS0000 Culture I I C	02/2002 KS000030000000, KS00003002020015 KS0000 Culture I I C 02/2002 KS000030000000, KS00003002020033 KS0000 Culture I I C 02/2002 KS000030000000, KS00003002020033 KS0000 Provider I I C 02/2002 KS000030000000, KS000030020020033 KS0000 Provider I I C 02/2002 KS00002000001X, KS00002002002002 SKS0000 Provider I I C 03/2002 KS000030000000, KS0000200200202 KS0000 Culture I I C 03/2002 KS0000300000000, KS0000300202002032 KS0000 Culture I I C 03/2002 KS0000300000000, KS000030020020034 KS0000 Provider I I C 03/2002 KS0000300000000, KS000030020202039 KS0000 Culture I I C 04/2002 KS0000300000007, KS000030020202023 KS0000 Culture I I C 04/2002 KS0000300000007, KS00003002020202036 KS0000 Culture I I <td>С</td>	С
02/2002 K8000030000000, K800003002020033 K80000 Provider I I C C 02/2002 K8000030000000, K8000030020200303 K80000 Provider I I C C 02/2002 K80000030000000, K8000030020200203 K80000 Culture I I C C 03/2002 K80000030000000, K80000300202002032 K80000 Culture I I C C 03/2002 K8000030000000, K800003002020034 K80000 Provider I I C C 03/2002 K8000030000000, K800003002020034 K80000 Culture I I C C 03/2002 K8000030000000, K8000030020200203 K80000 Culture I I C C 03/2002 K80000300000000, K8000030020200203 K80000 Culture I I C C 04/2002 K80000300000000, K8000030020202023 K80000 Culture I I C C 04/2002 K8000030000000, K800003002020203 K80000 Culture I I C C	02/2002 KS00003000000N, KS0000300202012 KS0000 Culture I I C 02/2002 KS000030000000, KS00003002020033 KS0000 Provider I I C 02/2002 KS000030000000, KS00003002020058 KS0000 Provider I I C 02/2002 i 5 Records I I C 03/2002 KS00002000001X, KS00002002002022 KS0000 Culture I I C 03/2002 KS0000300000007, KS0000300200200202 KS0000 Culture I I C 03/2002 KS0000300000007, KS00003000200200202 KS0000 Provider I I C 03/2002 KS0000300000007, KS0000300020020034 KS0000 Provider I I C 03/2002 KS0000300000007, KS000030020202035 KS0000 Culture I I C 03/2002 KS0000300000007, KS0000300200200203 KS0000 Culture I I C 04/2002 KS0000300000007, KS0000300200200203 KS0000 Culture I I C <td< td=""><td>С</td></td<>	С
02/202 KS000030000000, KS00003002020033 KS0000 Provider I I C C 02/200 KS000030000000, KS000030020202033 KS0000 Culture I I C C 03/2002 KS0000020000000, KS000020020202031 KS0000 Culture I I C C 03/2002 KS000030000000, KS00002002020032 KS0000 Provider I I C C 03/2002 KS000030000000, KS00003002020034 KS0000 Provider I I C C 03/2002 KS000030000000, KS000030020202045 KS0000 Culture I I C C 04/2002 KS000030000000, KS000030020202023 KS0000 Culture I I C C 04/2002 KS000030000000, KS0000300202020203 KS0000 Culture I I C C 04/2002 KS000030000000, KS0000300202020203 KS0000 Culture I I C C 04/2002 KS000030000000, K	02/2002 KS000030000000, KS000030020020033 KS0000 Provider I I C 02/2002 KS000030000000, KS000030020020058 KS0000 Provider I I C 03/2002 KS00002000001X, KS00002002002013 KS0000 Culture I I C 03/2002 KS0000300000001X, KS000020020020020 KS0000 Culture I I C 03/2002 KS0000300000000, KS00002002002020 KS0000 Culture I I C 03/2002 KS0000300000000, KS000030020020032 KS0000 Provider I I C 03/2002 KS0000300000000, KS000030020020034 KS0000 Provider I I C 03/2002 KS0000300000000, KS000030020020039 KS0000 Culture I I C 03/2002 KS0000300000007, KS0000300200200202 KS0000 Culture I I C 04/2002 KS0000300000007, KS0000300200200202 KS0000 Culture I I C 04/2002 KS0000300000007, KS0000300200200202 KS00000 Culture I	С
02/2002 KS0000300000000, KS00003002020036 KS0000 Provider I I C C C 03/2002 KS000020000000, KS00002002002002 SRecords I I C C 03/2002 KS000020000000, KS0000200200202 KS0000 Culture I I C C 03/2002 KS000030000000, KS000030020020032 KS0000 Provider I I C C 03/2002 KS0000300000000, KS00003002020033 KS0000 Culture I I C C 03/2002 KS0000300000000, KS00003002020033 KS0000 Culture I I C C 04/2002 KS0000300000000, KS000030020202034 KS0000 Culture I I C C 04/2002 KS0000300000000, KS000030020202024 KS0000 Culture I I C C 04/2002 KS0000300000000, KS000030020202033 KS0000 Culture I I C C 04/2002 KS0000300000000, KS0	02/2002 KS00000300000000, KS0000300020020058 KS0000 Provider I I C 03/2002 KS000002000001X, KS000020020020013 KS0000 Culture I I C 03/2002 KS000002000001X, KS000020020020022 KS0000 Culture I I C 03/2002 KS000030000000, KS000030020020022 KS0000 Culture I I C 03/2002 KS000030000000, KS000030020020032 KS0000 Provider I I C 03/2002 KS000030000000, KS000030020020034 KS0000 Provider I I C 03/2002 KS000030000000, KS000030020020045 KS0000 Provider I I C 03/2002 KS000030000000, KS000030020020020 KS0000 Culture I I C 04/2002 KS000030000000, KS000030020020020 KS0000 Culture I I C 04/2002 KS000030000000, KS000030020020020 KS0000 Culture I I C 04/2002 KS000030000000, KS00003002002002044 KS0000 Culture I	С
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05/2002 KS000030000016, KS0000300202030 KS000 Culture I I C C 06/2002 KS000030000017, KS00003002020030 KS0000 Culture I I C C 06/2002 KS000030000017, KS00003002020047 KS0000 Culture I I C C 06/2002 KS000030000019, KS000030020202047 KS0000 Culture I I C C 06/2002 KS000030000019, KS000030020202047 KS0000 Culture I I C C 06/2002 KS000030000019, KS000030020202020 KS0000 Culture I I C C 06/2002 KS000030000019, KS000030020202004 KS0000 Culture I I C C 06/2002 KS000030000019, KS000030020020020 KS0000 Culture I I C C 06/2002 KS000030000019, KS000030020020020 KS0000 Culture I I C C 06/2002 KS0000300000019, KS0000300202020053 KS0000 Culture I I C C <td>05/2002 KS00000300000015, KS00000300020020041 KS0000 Culture I I C</td> <td>С</td>	05/2002 KS00000300000015, KS00000300020020041 KS0000 Culture I I C	С
Obj Obj< Obj< <td>05/2002 KS0000300000016, KS00000300020035 KS0000 Culture I I C</td> <td>С</td>	05/2002 KS0000300000016, KS00000300020035 KS0000 Culture I I C	С
06/2002 KS000030000017, KS000030020200030 KS0000 Culture I I C C 06/2002 KS000030000018, KS000030020202047 KS0000 Provider I I C C 06/2002 KS000030000019, KS000030020202027 KS0000 Culture I I C C 06/2002 KS000030000011, KS000030020202020 KS0000 Culture I I C C 06/2002 KS000030000011, KS000030020202020 KS0000 Culture I I C C 06/2002 KS000030000011, KS000030020202020 KS0000 Culture I I C C 06/2002 KS000030000011, KS000030020202020 KS0000 Culture I I C C 06/2002 KS000030000011, KS0000300202020031 KS0000 Culture I I C C 07/2002 KS00003000001F, KS00003000202020053 KS0000 Provider I I C C 07/2002 KS00003000001	05/2002 : 4 Records	
06/2002 KS000030000018, KS00003002020047 KS0000 Provider I I C C 06/2002 KS000030000019, KS00003002020027 KS0000 Culture I I C C 06/2002 KS000030000019, KS00003002020020 KS0000 Culture I I C C 06/2002 KS000030000018, KS00003002020029 KS0000 Culture I I C C 06/2002 KS000030000011, KS000030020020024 KS0000 Culture I I C C 06/2002 KS000030000011, KS000030020020023 KS0000 Culture I I C C 06/2002 KS000030000011, KS000030020020023 KS0000 Culture I I C C 07/2002 KS000030000011, KS000030020202053 KS0000 Provider I I C C 07/2002 KS000030000011, KS000030020202043 KS0000 Culture I I C C 07/2002 KS000030000011, KS00	06/2002 KS0000300000017, KS00000300020020030 KS0000 Culture I I C	С
06/2002 KS000030000019, KS000030020202027 KS0000 Culture I I C C 06/2002 KS00003000001A, KS000030020202040 KS0000 Culture I I C C 06/2002 KS00003000001B, KS000030020202029 KS0000 Culture I I C C 06/2002 KS00003000001B, KS000030020202029 KS0000 Culture I I C C 06/2002 KS00003000001D, KS000030020202028 KS0000 Culture I I C C 06/2002 KS00003000001D, KS000030020202031 KS0000 Culture I I C C 07/2002 KS00003000001F, KS000030020202053 KS0000 Provider I I C C 07/2002 KS00003000001F, KS000030002020050 KS0000 Culture I I C C 07/2002 KS00003000001F, KS0000300020202055 KS0000 Culture I I C C 07/2002 KS00003000001F,	06/2002 KS000030000018, KS0000300020020047 KS0000 Provider I I C	С
06/2002 KS00003000001A, KS000030020202040 KS0000 Culture I I C C 06/2002 KS00003000001B, KS000030020202029 KS0000 Culture I I C C 06/2002 KS00003000001C, KS000030020202029 KS0000 Culture I I C C 06/2002 KS00003000001D, KS000030020202028 KS0000 Culture I I C C 06/2002 KS00003000001D, KS000030020202028 KS0000 Culture I I C C 06/2002 KS00003000001E, KS000030020202031 KS0000 Culture I I C C 07/2002 KS00003000001F, KS0000300020200505 KS0000 Provider I I C C 07/2002 KS00003000001F, KS0000300020200505 KS0000 Culture I I C C 07/2002 KS00003000001F, KS000030002020043 KS0000 Culture I I C C 07/2002 KS00003000001F,	06/2002 KS00000300000019, KS000003000200270 KS0000 Culture I I C	С
06/2002 KS00003000001B, KS0000300202020029 KS0000 Culture I I C C 06/2002 KS00003000001C, KS0000300202020044 KS0000 Culture I I C C 06/2002 KS00003000001D, KS0000300202020028 KS0000 Culture I I C C 06/2002 KS00003000001E, KS0000300202020031 KS0000 Culture I I C C 06/2002 KS00003000001E, KS0000300202020031 KS0000 Culture I I C C 07/2002 KS00003000001F, KS0000300202020053 KS0000 Provider I I C C 07/2002 KS00003000001F, KS0000300202020053 KS0000 Culture I I C C 07/2002 KS00003000001F, KS00003000202020053 KS0000 Culture I I C C 07/2002 KS00003000001F, KS0000300020202043 KS0000 Culture I I C C 07/2002 KS00003	06/2002 KS00003000001A, KS0000300020020040 KS0000 Culture I I C	С
06/2002 KS00003000001C, KS000030020020044 KS0000 Culture I I C C 06/2002 KS00003000001D, KS0000300200200208 KS0000 Culture I I C C 06/2002 KS00003000001E, KS00003002002002031 KS0000 Culture I I C C 07/2002 KS00003000001F, KS0000300200200303 KS0000 Provider I I C C 07/2002 KS00003000001F, KS0000300020020053 KS0000 Provider I I C C 07/2002 KS000030000001F, KS0000300020020053 KS0000 Culture I I C C 07/2002 KS000030000001F, KS00003000200200053 KS0000 Culture I I C C 07/2002 KS00003000001F, KS00003000200200043 KS0000 Culture I I C C 07/2002 KS00003000001F, KS000030002002000043 KS0000 Culture I I C C	06/2002 KS00003000001B, KS00003000200290 KS0000 Culture I I C	С
06/2002 KS00003000001D, KS000030020202028 KS0000 Culture I I C C 06/2002 KS00003000001E, KS000030020202031 KS0000 Culture I I C C 06/2002 KS00003000001E, KS000030020202031 KS0000 Culture I I C C 07/2002 KS00003000001F, KS000030020202053 KS0000 Provider I I C C 07/2002 KS00003000001F, KS000030020202050 KS0000 Culture I I C C 07/2002 KS00003000001F, KS0000300020202043 KS0000 Culture I I C C 07/2002 KS00003000001F, KS0000300020202043 KS0000 Culture I I C C 07/2002 KS00003000001F, KS0000300020202043 KS0000 Forvider I I C C	06/2002 KS00003000001C, KS0000300020020044 KS0000 Culture I I C	С
06/2002 KS00003000001E, KS000030020202031 KS0000 Culture I I C C 07/2002 KS00003000001F, KS000030020202053 8 Records I I C C 07/2002 KS000030000001F, KS000030020202053 KS0000 Provider I I C C 07/2002 KS00003000001F, KS000030020202050 KS0000 Culture I I C C 07/2002 KS00003000001H, KS000030020202043 KS0000 Culture I I C C 07/2002 KS00003000001H, KS0000300020202043 KS0000 Culture I I C C 07/2002 KS000030000001H, KS0000300020202043 KS0000 Forvider I I C C	06/2002 KS00003000001D, KS000030002002028 KS0000 Culture I I C	С
06/2002 8 Records 07/2002 KS00003000001F, KS000030020202053 KS0000 Provider I I C C 07/2002 KS00003000001G, KS000030020202050 KS0000 Culture I I C C 07/2002 KS00003000001H, KS0000300020202043 KS0000 Culture I I C C 07/2002 KS00003000001H, KS0000300020202043 KS0000 Culture I I C C 07/2002 KS00003000001H, KS0000300020202067 KS0000 Provider I I C C	06/2002 KS00003000001E, KS0000300020020031 KS0000 Culture I I C	С
07/2002 KS00003000001F, KS000030020202053 KS0000 Provider I I C C 07/2002 KS00003000001G, KS000030020202050 KS0000 Culture I I C C 07/2002 KS00003000001H, KS0000300202020050 KS0000 Culture I I C C 07/2002 KS00003000001H, KS0000300202020043 KS0000 Culture I I C C 07/2002 KS000030000001I, KS0000300020020067 KS0000 Provider I I C C	06/2002 : 8 Records	
07/2002 KS00003000001G, KS000030020020050 KS0000 Culture I I C C 07/2002 KS00003000001H, KS0000300020020043 KS0000 Culture I I C C 07/2002 KS00003000001H, KS0000300020020043 KS0000 Culture I I C C 07/2002 KS000030000001I, KS0000300020020067 KS0000 Provider I I C C	07/2002 KS000030000001F, KS00000300020053 KS0000 Provider I I C	С
07/2002 KS000003000001H, KS0000300020020043 KS0000 Culture I I C C 07/2002 KS000030000001I, KS0000300020020067 KS0000 Provider I I C C	07/2002 KS0000030000001G, KS00000300020050 KS0000 Culture I I C	С
07/2002 KS00000300000011, KS00000300020020067 KS0000 Provider I I C C	07/2002 KS000030000001H, KS0000300020020043 KS0000 Culture I I C	С
	07/2002 KS00000300000011, KS00000300020067 KS0000 Provider I I C	С
07/2002 KS000030000001J, KS000030020020046 KS0000 Culture I I C C	07/2002 KS000030000001J, KS0000300020020046 KS0000 Culture I I C	С
07/2002 KS0000030000001K_KS00000300020020056 KS0000 Culture I I C C	07/2002 KS000003000001K, KS00000300020056 KS0000 Culture I I C	С

CODES: 1 = Follow-Up 1, 2 = Follow-Up 2, P = Patient Data, C = Case Verification

C = Complete, I = Incomplete, N = Not Applicable

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Sample Report: Incomplete RVCT Records Report: Page 2 of 2:

**** Confidential Patient Information **** SURVEILLANCE INCOMPLETE RVCT RECORDS REPORT For the Month-Year Reported BEGINNING 02/2002 AND ENDING 12/2002 Sorted by Month-Year Reported and Patient Name

Reporting Area: KANSAS TB CONTROL Site Name: All Sites

County Name: All Counties

Month-Year		Cas	e Number	Site		F	orm s	Statu	s
Reported	Patient Name	State	City/County	ID	Verification	_	1 2	P	c
07/2002	KS000003000001L,	KS00000300020020060		KS0000	Provider	I	I	C	С
07/2002	KS000003000001M,	KS00000300020020063		KS0000	Culture	I	I	C	С
07/2002	KS000003000001N,	KS00000300020020052		KS0000	Culture	I	I	С	С
07/2002	KS0000030000010,	KS00000300020020057		KS0000	Culture	I	I	С	С
07/2002	KS000003000001P,	KS00000300020020065		KS0000	Culture	I	I	С	С
07/2002	KS000003000001Q,	KS00000300020020059		KS0000	Culture	I	I	С	С
		07/2002	: 1:	2 Records					
08/2002	KS000003000001R,	KS00000300020020078		KS0000	Provider	I	I	C	с
08/2002	KS0000030000015,	KS00000300020020054		KS0000	Culture	I	I	С,	С
08/2002	KS000003000001T,	KS00000300020020062		KS0000	Culture	I	I	С	С
08/2002	KS000003000001U,	KS00000300020020061		KS0000	Culture	I	I	С	С
08/2002	KS000003000001V,	KS00000300020020064		KS0000	Provider	I	I	С	С
08/2002	KS000003000001W,	KS00000300020020066		KS0000	Culture	I	I	С	С
08/2002	KS000003000001X,	KS00000300020020072		KS0000	Culture	I	I	С	С
08/2002	KS000003000002A,	KS00000300020020077		KS0000	Clinical	I	I	С	С
		08/2002	:	8 Records					
09/2002	KS000003000001Y,	KS00000300020020079		KS0000	Provider	I	I	С	с
09/2002	KS000003000001Z,	KS00000300020020085		KS0000	Provider	I	I	С	С
09/2002	KS0000030000020,	KS00000300020020073		KS0000	Culture	I	I	С	С
09/2002	KS0000030000021,	KS00000300020020083		KS0000	Provider	I	I	С	С
09/2002	KS0000030000022,	KS00000300020020084		KS0000	Provider	I	I	С	С
09/2002	KS0000030000023,	KS00000300020020069		KS0000	Culture	I	I	С	С
09/2002	KS0000030000024,	KS00000300020020068		KS0000	Culture	I	I	с	С
09/2002	KS0000030000025,	KS00000300020020086		KS0000	Provider	I	I	С	С
09/2002	KS0000030000026,	KS00000300020020070		KS0000	Culture	I	I	С	С
		09/2002		9 Records					
10/2002	KS0000030000027,	KS00000300020020074		KS0000	Provider	I	I	С	С
10/2002	KS0000030000028,	KS00000300020020075		KS0000	Culture	I	I	С	С
10/2002	KS0000030000029,	KS00000300020020076		KS0000	Culture	I	I	С	С
		10/2002	•	3 Records					
11/2002	KS000003000002B,	KS00000300020020081		KS0000	Culture	I	I	С	С
11/2002	KS000003000002C,	KS00000300020020080		KS0000	Culture	I	I	С	С
		11/2002	:	2 Records					
12/2002	KS000003000002D,	KS00000300020020082		KS0000	Provider	I	I	С	С
12/2002	KS0000030000002E,	KS00000300020020087		KS0000	Culture	I	I	с	С
		12/2002	:	2 Records					

< Total Number of Records = 68 >

CODES: 1 = Follow-Up 1, 2 = Follow-Up 2, P = Patient Data, C = Case Verification C = Complete, I = Incomplete, N = Not Applicable

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Facsimile Report

Description: The **Facsimile** report generates a simulation of the RVCT, Initial Drug Susceptibility Report, and Case Completion Report forms for an individual client record, and additionally, includes the values for the calculated variables, the Patient Data, Case Verification data, and the Comments data for the record. Incomplete, invalid, and missing data items that are determined by the form completion algorithm are indicated with an asterisk (*) next to the corresponding data item. Only the forms that have been entered for a particular record will be generated. For example, if no Case Completion Report has been entered for an individual, then a Case Completion Report for that record will not be generated in the Facsimile Report. Missing reports (e.g., Initial Drug Susceptibility Report) will be noted on the bottom of the Facsimile report.

Display:

The facsimile report client selection screen is shown below.

Last Name	First Name	DOB	State Case 1	# City/Cnty I	Case
DRESS	TEST	09/10/1999	000009870		
NTEATER	ANNIE	01/01/1962	260065795	102762197	
APPOINTMENT	CLIENT	05/26/1933	000000333		_
ARDVARK	ANDY	01/01/1950	260092095	071750017	
BABBETTE	BODACIOUS	01/01/1964	010364064		
BEAUTIFUL	SLEEPING	01/01/1924	102524060		
BELL	TINKER	01/01/1992	230065393		
BRADY	PETER	02/17/1950	000185522		
BRUTUS	ETU	01/01/1961	ONEWYORK1		
BUNNY	BUGS	01/01/1951	090151140		-

- Report Type: A Detail report will be run for the currently selected clients. Note that multiple clients may be selected by using the <ctrl> key while selecting clients.
- Inclusion Criteria: Five data categories/ column headings can be used to select records from the client list (i.e. patient last name, patient first name, state case number, date of birth and city/county case numbers).

Sample Report: Facsimile Report:

REPORT OF VERI	FIED CASE OF TUBERCULOSIS	
Pablent Dans: KS000000000000000000000000000000000000	NGGIGGGGGGGI . Positive Culture (S) Counte SITU	d 180900
SOUNDEX 1.State Reporting: C436 KS	2.State Case Number: City/County Case Number:	200038063
3.Date Submitted: 09/15/2000	4.Address for Case Counting:	
5.Month-Year Reported: 09/2000	City: Within City Limits:	COFFEYVILLE Yes
6.Month-Year Counted: 09/2000	County: Zip Code:	MONTGOMERY 67337
7.Birthdate: 02/04/1947	8.Sex: Male	
9.Ethnicity: Not Hispanic or Latino		· · · · · · · · · · · · · · · · · · ·
10.Race:	· · · · · · · · · · · · · · · · · · ·	
American Indian or Alaska Native:	No	
Asian:	No	
Black or African American:	No	
Native Hawaiian or Other Pacific Islander:	No	
	Yes	
UIKIOWI :	NO	
11.Country of Origin, U.S.?: Yes		
12 Abatus at Diamagis (TD - 23)		
13.Status at Diagnosis of TB: Alive		
14.Previous D:	iagnosis of Tuberculosis: No	
Yes Move ti	ar or Frevious Diagnosis:	
MOLE LI		
15. Major Site of Disease: PULMONARY		
15. Major Site of Disease: FULMONARY If site is "Other", enter anatomic code	b :	.*
<pre>15. Major Site of Disease: FULMONARY If site is "Other", enter anatomic code 16. Additional Site(s) of Disease: Other - More than one additional site:</pre>		
<pre>15. Major Site of Disease: PULMONARY If site is "Other", enter anatomic code 16. Additional Site(s) of Disease: Other - More than one additional site: 17. Sputum Smear: Positive</pre>	18. Sputum Culture:	Positive
<pre>15. Major Site of Disease: PULMONARY If site is "Other", enter anatomic code 16. Additional Site(s) of Disease: Other - More than one additional site: 17. Sputum Smear: Positive 19. Microscopic Exam of Tissue and Other Body Fluids: If Positive, Anatomic Code(s):</pre>	18. Sputum Culture: Not Done	Positive
<pre>15. Major Site of Disease: PULMONARY If site is "Other", enter anatomic code 16. Additional Site(s) of Disease: Other - More than one additional site: 17. Sputum Smear: Positive 19. Microscopic Exam of Tissue and Other Body Fluids: If Positive, Anatomic Code(s): 20. Culture of Tissue and Other Body Fluids: Net December 2015 Net December</pre>	18. Sputum Culture: Not Done	Positive
<pre>15. Major Site of Disease: FULMONARY If site is "Other", enter anatomic code 16. Additional Site(s) of Disease: Other - More than one additional site: 17. Sputum Smear: Positive 19. Microscopic Exam of Tissue and Other Body Fluids: If Positive, Anatomic Code(s): 20. Culture of Tissue and Other Body Fluids: Not Don If Positive, Anatomic Code(s):</pre>	18. Sputum Culture: Not Done	Positive
<pre>15. Major Site of Disease: FULMONARY If site is "Other", enter anatomic code 16. Additional Site(s) of Disease: Other - More than one additional site: 17. Sputum Smear: Positive 19. Microscopic Exam of Tissue and Other Body Fluids: If Positive, Anatomic Code(s): 20. Culture of Tissue and Other Body Fluids: Not Don If Positive, Anatomic Code(s): e - An asterisk(*) indicates an incomplete, i</pre>	18. Sputum Culture: Not Done we	Positive
<pre>15. Major Site of Disease: FULMONARY If site is "Other", enter anatomic code 16. Additional Site(s) of Disease: Other - More than one additional site: 17. Sputum Smear: Positive 19. Microscopic Exam of Tissue and Other Body Fluids: If Positive, Anatomic Code(s): 20. Culture of Tissue and Other Body Fluids: Not Don If Positive, Anatomic Code(s): e - An asterisk(*) indicates an incomplete, i #### Confidential *### Confidential *## Confidential *## Confidential *## Confidential *## Confidential *## Confidential *## Confidential *## Confidential *# Confidential *# Confidential *# Confidential *# Confidential *# Confidential</pre>	18. Sputum Culture: Not Done Not Done	Positive

Patient Mann; Case Verificet Address: 133 Address: 133 Ad	ESVEDODÍCODO Los Anigments 3 Justrery (Ppor RYVILS, RE-2133 MTT: 20001 10 Future:	0001, #\$00000100 Post1 #PR -3 1063 (#81	000gg1 ve Culture	Counters STTE: EB0900	
21. Chest X-ray: If Abnormal Stability:	Abnormal , Status: Stable	Noncavitary, Cor	isistent with TB		
22. Tuberculin (M	Mantoux) Skin Test Millimeter If Negative, w	at Diagnosis: s (mm) of Indura as patient anerg	tion: ic?:	Positive 30	
23. HIV Status: If Positive If Positive	Not Offered e, Based on: e, List: CDC,	AIDS Patient Nu State City/County	mber: HIV/AIDS Patient HIV/AIDS Patient	Number: Number:	
24. Homeless With	hin Past Year:	No			
25. Resident of (Type of Co	Correctional Faci rrectional Facili	lity at Time of ty:	Diagnosis:]	No
26. Resident of I Type of Los	Long-Term Care Facil	cility at Time o lity:	f Diagnosis:		No
27. Initial Drug	Regimen:				
Isoniazid:	Yes	Ethionamide:	No	Amikacin:	No
Rifampin:	Yes	Kanamycin:	No	Rifabutin:	No
Ethambutol	No	Cycloserine:	NO	Offeragin:	NO
Streptomycin:	No	PAS:	NO	Other:	NO
28. Date Thera	pv Started:	10/12/2000			
29. Injecting I	Drug Use Within Pa	at Year:	No		
30. Non-injecti	ing Drug Use With:	In Past Year:	No		
31. Excess Alco	ohol Use Within Pa	ast Year:	Уев		
32. Occupation 'Not Employed with	(All that apply thin Past 24 Mont	within the past hs'	24 months):		
Rece (Colevieted)					
Taibial Calculated	/				
Initial Drug Reg	imen: INH,	RIF and PZA			
NETSS Reporting MMWR Week: We	Date: 09/	15/2000			
omments:					

04/01/2003 at 11:01:18

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**** Confidential Patient Information ****

04/01/2003 at 11:01:18

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	REPORT OF VERIFIEI	CASE OF TUBERCULOSIS	
Patient Tanta	00010000001 FRAAA	Contraction of the second s	
Chas Varification Laste	Post	the Collevia	
Address: 1333 JKGEJB	PH' PPODER		
ABBYVILLE,	CS 23331-3		
State Core Suber: CLEY/Cousty Case Suber	2000 38063 (KS) ²	Counted	0006
35. Sputum Culture Convers	ion Documented:	Yes	
If Yes, Date Specimen Coll	ected on Initial Posit:	ive Sputum Culture:	08/25/2000
If Yes, Date Specimen Coll	ected on First Consiste	ently Negative Culture:	10/31/2000
36. Date Therapy Stopped:	04/12/2001		
37. Reason Therapy Stopped	Completed T	herapy	
38. Type of Health Care Pr	ovider: Pr:	ivate/Other	<u></u>
39. Directly Observed Ther	apy: Yes, T	otally Directly Observed	
Sites of Directly Obs	erved Therapy:	In Clinic or Other Facili	ty
No. of Weeks:	26		
40. Final Drug Susceptibil:	ity Results		
Was Follow-up Drug Su	- sceptibility Testing D	one: No	
Date Final Isolate Co	llected:		
41. Final Susceptibility Re	sults:		
Isoniazid:		Capreomycin:	
Rifampin:		PAS:	
Pyrazinamide:		Amikacin:	
Ethambutol:		Rifabutin:	
Streptomycin:		Ciprofloxacin:	
Ethionamide:		Ofloxacin:	
Kanamycin:		Other:	
Cycloserine:			
omments:			
<pre>ce - An asterisk(*) indicate</pre>	s an incomplete, inval	id or missing data value.	
	**** //	and and the formula is the set	

Updated-In-Session Report

Description: The **Updated-in-Session** report provides the user with a method of tracking all changes made to surveillance records during a given time-frame. The report produces an itemized listing of the clients which have been modified. Included in the listing are the State and City/County Case numbers, client names, and site ID numbers.

💸 U	🍪 Update-In-Session Report					
	Date From: 08/	/05/1997 层				
	Time From: 08:21:20 AM 🚆					
	Select Sites:	Select Counties:				
	C Yes 💿 No	O Yes 💿 No				
	ОК	Cancel				

- Date Range Default date is the date of the current TIMS session. Select dates as required for query. For example, to determine what records were modified during a specific date, enter that date.
- □ **Time Frame** Default time is the time that the current session was begun in TIMS. Enter a time that reflects the beginning of the session queried.
- Select Sites Yes or No (for reporting area only)
- □ Select Counties Yes or No

Sample Report: Updated in Session Report:

	***	Confide	ntial Informat	ion ***			
	SURVEILLAN	CE RECOR	DS UPDATED-IN	SESSION	REPORT		
	Report	of Ver Sorted 1	ified Case of ' By State Case :	Tubercul Number	osis		
Reporting Area: K	ANSAS TE CONTROL						
Site Name: All Si	ces						
County Name: All :	Counties						
Report of All Upd	ate Activity	From	Jan 25,2003	at	C1:41 PM		
		То	Mar 25,2003	at	01:46 PM		
Case	Numbers					Site	Update
State	<u>City/County</u>		Patient Nam	e		ID	Status
200024019		KSC(000990000002V,	KSC000S	9000000	KSOOCC	Updated Record

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03/25/2003 at 13:46:08

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Deleted Records Report

Description: The **Deleted Records** report generates a line listing (Detail Report) for all clients with deleted Surveillance records. Included in the listing are the client name, date reported, site ID, and the status code explanations are on the bottom of the report.

Note: Once a client's Surveillance record is purged, the client's name will not appear on the report.

Display: The Deleted Records Report selection criteria screen is displayed below.

🚷 Deleted Records Report								
Deleted Records Report								
00/0000 🚑 00/0000 💂								
Date criteria: O Month-Year Reported O Month-Year Counted O Month-Year Submitted	Report type: O Detail O Summary Sort by: O Patient Name O	Select sites:						
	OK <u>C</u> ancel							

- Date Range Select dates as required for query.
- □ Select Sites Yes or No (for reporting area only)
- □ Select Counties Yes or No

Sample Report: Deleted Records Report

*** Confidential Patient Information *** SURVEILLANCE TB DELETED RECORDS REPORT Sorted by Patient Name

Reporting Area: KANSAS TB CONTROL Site Name: All Sites

County Name: All Counties

	DATE	SITE	CASE NUMBERS		DATE	STATUS
PATIENT NAME	REPORTED	ID	STATE	CITY/COUNTY	DELETED	CODE
KS0000010000004,	KS000001 09/01/2000	KS0000	200041046		03/25/2003	DYQ
KS000001000000B,	KS000001 10/01/2000	KS0000	200048087		03/25/2003	DYQ

STATUS CODE:	
XYQ Can be Undeleted, Can be Purged	Entered, Never transferred, Deleted.
DYK Can be Undeleted by Initiating site. Can not be Undeleted by Non-Initiating site. Can not be Purged by either site.	Record transferred, Acknowledgment not assimilated. Deleted post transfer.
DYQ Can be Undeleted by Initiating site. Can not be Undeleted by Non-Initiating site. Can not be Purged by either site.	Record transferred, Acknowledgment assimilated. Deleted (pre or post Acknowledgment assimilated).
DNK Can not be Undeleted, Can not be Purged	Deletion record transferred. Acknowledgment not assimilated.
DNQ Can not be Undeleted, Must be Purged	Deletion record transferred. Acknowledgment assimilated.
DYL Can not be Undeleted, Can not be Purged. Incomplete transfer file must be finished.	Transfer process terminated prior to creating the data transfer file.
*** Confidential Patient Inf	formation ***
03/25/2003 at 13:46:57	Page 1 of 1

MUNK Report (Missing and Unknown values Report)

Description: The **Munk** report generates a Detailed or Summary Report for all clients with missing or unknown data values within the RVCT fields. Users may subset within one Count Year or within several.

Display: The Munk Records Report selection criteria screen is displayed below.

Client	Surveill	ance	Data Ge		n D	ata ' 27 [Transfe	er F	Reports	Wind	iow R	Help	⊃ EÈ⊇	1	Q D #
- Please	e enter t	he desi	red date	range		F	Please :	selec	t Questi	ons —	_	_	_		
Beg	ginning ding	20	03 💽				Q07 Q08 Q09 Q10 Q11 Q11	Age Sex Ethi Rac Cou	e nicity e Calc ntry of C)rigin					
- Repor	t type: - Detail t sites: -		💿 Sumr	nary			Q13 Q14 Q14b Q15 Q15	Pati Prev Prev Majo	ent Alive /ious Ca /ious Yr or Site o	e or De ise of T TB f Disea	ad B ise				
•	Yes - Patient	:flame	• No		jtate I	Cape	Q18	Spu	tum Cull	ture	lepor	rt Dai	ie	~	
					OK]	<u>C</u> ano	el 🛛						

- Date Range Select dates as required for query, based on Count Date
- **Select Detail or Summary** Desired type of report
- **Sort By** Available for Detailed report.
- □ Select Sites Yes or No (for reporting area only)
- **Select Questions** Windows Control and Shift selection options available.

Sample Report: Munk Report

**** Confidential Patient Information **** SUBVEILLANCE COMPLETENESS REPORT EEGINNING 01/2003 AND ENDING 12/2003 SORTED BY STATE CASE NUMBER

Reporting Area: OKLAHOHA TE CONTROL Site Name: All Sites

Records for State: OKLAHOMA

Question No:	estion No: QOS No		1	Percentage :	99.22
First Name		Last Name	SteaseNo	Birth Date	Report Date
NMTUIL		SCVARENTCUA: UVANAS	OK00C2519	10/5/1977	5/1/2003

In the above example, a detailed report was run on question 08. SEX and sorted by State Case Number. This client has a missing or unknown value in the RVCT question 08. Values displayed on the report are for location and correction purposes.

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