

Orpheus User Feedback Meeting

Date: June 14th

Time: 1:30-2:30 **Place:** PSOB AOC

ALL DATA FROM SCREEN SHOTS SHOWN IN THESE MINUTES ARE FAKE

Counties: Baker; **Benton** (Gerald); Clackamas (); Clatsop (); **Columbia** (Heather); Coos (); **Crook** (Karen); **Curry** (Michelle); **Deschutes** (Jill); **Douglas** (Bailey); Grant (); Harney (); Hood-River; **Jackson** (Stacey, Patty, Jeanelle, Andrea, Al); **Jefferson** (Joy); Josephine (); **Klamath** (Sharon); Lake; **Lane** (Lisa, Alice, Sarah, Cindy, Sidney); Lincoln (); **Linn** (Debby); Malheur (); **Marion** (Yuritz); **Morrow** (Shelley); **Multnomah** (Marta, Russ); **NCPHD** (Jeremy); **Polk** (Kirk, Martha); **Tillamook** (Christina); Umatilla (); Union (); Wallowa; Warm Springs (); **Washington** (Gladys, Sunghye, Jennifer, Mercy, Erin); Wheeler; **Yamhill** (Dominique)

State: Julie, June, Kiley, Renee, Lexie, Lisa, Maureen, Missy, Nasreen, Rob, Stephen, Tasha, Tom, David, Heather
Developer: Matt Navarre

Purpose: To share new features, user issues and gather feedback on development priorities for Orpheus, Outbreaks and Case log applications

Outcome: Users are kept informed about development projects and their needs are identified and prioritized.

| AGENDA / BACKGROUND | Presenter(s) |
|--|--|
| <p>Introductions -- 5 min</p> <p>Filemaker has identified a bug which is the issue with finds, should be fixed when we upgrade to FM 17</p> <p>Jennifer, processing labs, jumps to the end of the list. This occurs when there are multiple labs. Three TB labs, using the arrow navigations, when click the navigation buttons it jumps to the end. When this happens go back to the main screen. Does not do it every time. Only occurs when someone has multiple labs, skips when you go to the next lab for this person. Not consistently but will jump to a different person on the list. You need to go back to the ELR tab to go back to the other labs for this person. This happens when using the green navigation buttons.</p> <p>This has been going on for the last month or so. Lisa in Lane also reports this issue.</p> <p>Pertussis interviews, when working through tabs, Orpheus Freezes for a moment, need to wait. Then use the form and enter the data later, some folks have to log off. Tillamook also having this problem.</p> | <p>Action Items</p> <p>June to follow up and create an issue to address the ELR navigation issues.</p> <p>When you are having issues with ELR please email either the tech team or the ELR.Project email – we are trolling these email boxes on a regular basis</p> |

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Electronic Laboratory Reporting updates/issues—all– 5 min

There was a delay in getting St Charles labs, they are working through their new system upgrade, Samaritan had a lab delay of one day. Debby asked how long to wait if not getting an ELR from a faxed lab? Next day. Some labs send continuously some do once a day, so it is facility dependent. Missing CRE ELR from St Charles, couple of days St Charles did not come through for a couple days.

Per Lisa in Lane County, there has been a delay in Legacy labs, Michelle is aware.

Animal bites in new view of Orpheus do not have the provoked or unprovoked questions

New Orpheus beta screens rolling out: TB, Enteric, Animal bites, Animal rabies – 5 min

We have been rolling out the Royal Orpheus, we have tried to keep the tabs consistent as possible. Hepatitis is working on their royal Orpheus overhaul. Tasha, Lisa and Courtney are the Hepatitis Epidemiologists at the state. Royal Orpheus allows for some additional customization for each disease.

Hepatitis Royal Orpheus – Lisa/Tasha – 15 min

There is a beta hepatitis screen in the Royal Orpheus. Now is the time to provide feedback.

Specific questions:

Lab tab – do users use the summary results on the bottom part of the page. Manual results entered into Orpheus and create a summary view of all the results. Considering removing it, most users voted Yes to keep it. Historically when you created a manual lab – could fill out the individual test result. Fill out for as many labs as had. The summary screen is to get a snap shot of the serologies in one place.

LABS

| | | |
|----------|----------------|-----|
| A | IgM anti HAV | Neg |
| | total anti HAV | |
| D | IgM anti HDV | |
| | Total anti HDV | |
| E | IgM anti HEV | |
| | IgG anti HEV | |

| | | |
|----------|----------------|-----|
| B | HBsAg | Pos |
| | IgM anti HBc | Pos |
| | total anti HBc | |
| | HBeAg | |
| | HBV DNA PCR | |
| | anti HBs | |

| | | |
|----------|------------------|-----|
| C | anti HCV | Neg |
| | signal to cutoff | .8 |
| | s/co confirm | |
| | HCV RNA PCR | |
| | Genotype | |

Email us if you have not received an ELR on a manual lab by the next day.

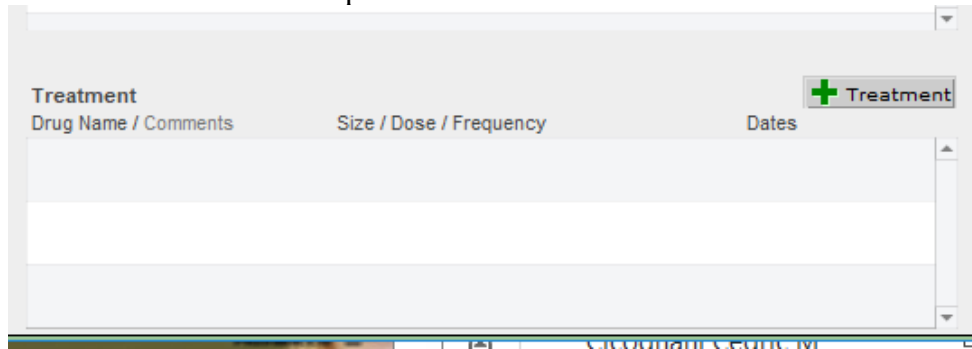
Follow up on freezing panes

These will be added back for animal bites

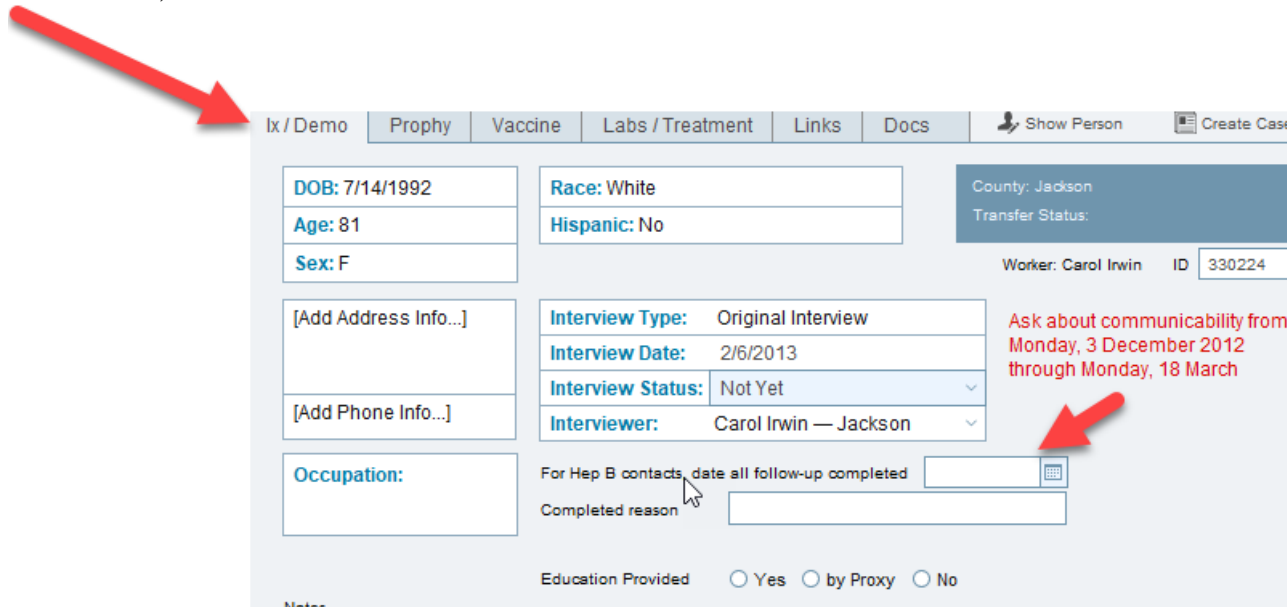
Keep summary on lab tab

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Clinical tab – are users entering treatment area. What data are put in the treatment tab? Most users are not using this for hepatitis. Do use it for other diseases. Jackson county uses it for alternative treatments – this could be put in the note field. Most do not use it.



Contact tab – For Hep B contacts – date all follow up completed. Only for perinatal hep b. Not a lot of feedback, on contact labs box there are the same few fields.



Marta fills it in the lab tabs, populates the other. Completed drop down? Yes, this is being used especially for perinatal hep b. Are the current dropdown options appropriate? Might be from the STD world. Use this after testing or vaccination. Do also use this to transfer. Situations where

Remove treatment

Remove duplicate information on the follow up date and drop down. Keep the fields

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contact is transferred and not the case. Tasha emphasized that we are happy to keep fields when we migrate. Would like to get rid of fields that people are not using. On the contact prophylaxis tab, there are different options – not Abx but not for hepatitis – prophylaxis yes/no/refused and not indicated as options. Date recommended. Prophylaxis status field could be removed. Add a new field that is type of prophylaxis – Vaccine, HBIG, etc. Also could enter a date administered if LHDs are interested. Currently HBIG is put in the prophylaxis field. Might be able to get rid of this tab. Could combine with vaccine tab. Contact providers – only used for perinatal hepatitis B. Do you use the case records for the person? Users were mixed in response. If we keep it will put it on the first tab. Some users did not know it was there.

Summary tab – thinking what would be useful. So far notes, labs, comorbidity, labs which include some results. Adding clinical information, all the yes risk questions. Users mentioned adding vaccines.

Summary 374873
Athena L Eastridge
Disease: HepB (acute)
Status: Confirmed
Onset: 2/1/2013
Deceased: [Not Answered]
Reason for testing: Symptoms of acute hepatitis
DOB: 1/5/1950
Age: 42
Sex: F
Pregnancy:
Race: White
Hispanic: No
Language:
Born:
Worksite: disabled
Occupation:
04542 Any St.
Medford OR 97504
Jackson
Home: 541-330-4825
Provider: McCall, Michael

SUMMARY No exposure questions asked, No exposure questions answered

LABS:
IgM anti HAV.....Neg
HBsAg.....Pos
IgM anti HBC.....Pos
Anti HCV.....Neg
Signal to cutoff.....8

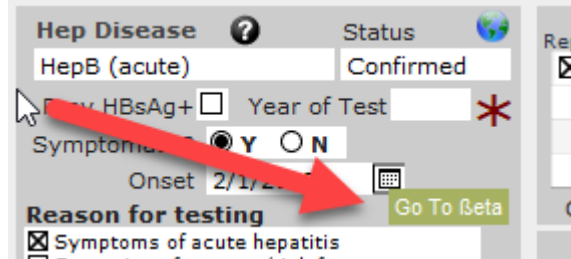
There is a lot of screen real estate here. Provide ideas on what you would like to see

Marta and Lisa willing to work with us to design Hep layouts. Make sure we include Lee for perinatal hepatitis B. Now is the time to provide feedback. We are trying to remove fields that are not being used.

Please try out the new beta screens as you have time and provide feedback to us – use the tech team email to do this.

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Users can now look at the beta screens for hepatitis. There is a button.



The screenshot shows a clinical data entry form for Hepatitis B (acute). The form includes the following fields and controls:

- Hep Disease:** HepB (acute)
- Status:** Confirmed
- Year of Test:** A date field with a calendar icon and a red asterisk indicating a required field.
- Symptoms:** Radio buttons for 'Y' (Yes) and 'N' (No).
- Onset:** 2/1/2012
- Reason for testing:** A checkbox labeled 'Symptoms of acute hepatitis' which is checked.
- Go To Beta:** A green button with white text, highlighted by a red arrow.

If you are on the clinical view, if you exit to home screen, find another hepatitis case – it will take you back to the clinical view, not the basics. Should it instead go summary tab. This has been fixed by Tom, it goes to the summary tab.

A smaller workgroup will form, include folks who work on perinatal hep b should be covered so as to make sure all the data are collected. Tasha and Lisa are working with Lee on the redesign. Please let Tasha know if you have feedback. Will be adding comorbidity tab – Hepatitis has a lot of labs to manage. You add another lab but go to another tab to make a note about it. For chronic cases, if you have repeat positive tests- positive RNA, can either attach it or ignore. In order to create a note you have to go to a different tab to enter this. Can not scroll through notes on the summary tab. This is not something that can be done, you have to open the notes tab. Marta and Sidney are willing to provide additional feedback to Tasha and Lisa on the hepatitis module. Email us if you are interested. Roll out will be over the next couple of months

This migration to Royal Orpheus needs user input. The reason we are doing this is to use some features of Filemaker and improve the overall performance and user interaction. Some fields have moved around, we did conditionally format fields that need to be entered.

Enterics – Julie

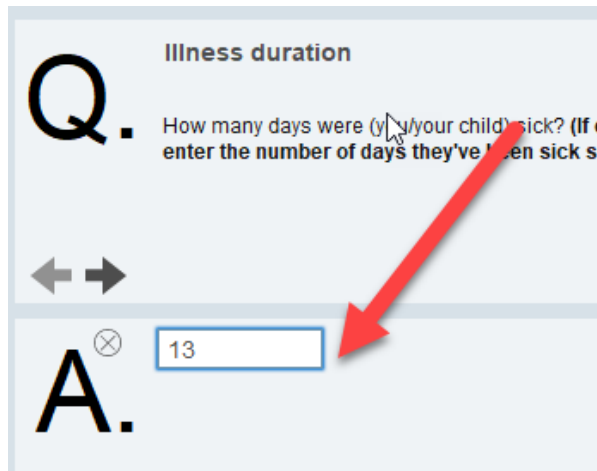
Clinical tab – illness duration should just be a number – the number of days – do not add test – days, if they are still sick, put in the number of days until you interviewed them.

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Q. **Illness duration**
How many days were (y)our child sick? (If c
enter the number of days they've been sick s

↔

A.



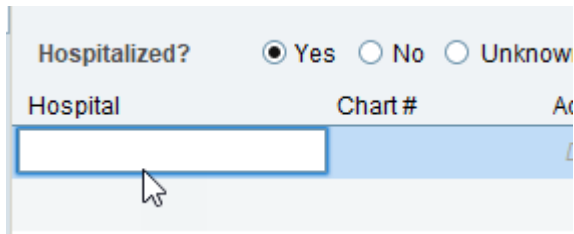
Suggestion to see if we can make it a number field where can not enter text. Antibiotic use – you now have to go through and select the antibiotics. Please make sure you scroll down the list using the scroll bar.

| | |
|-------------------------|-------------|
| Amoxicillin | Cefixime |
| Amoxicillin/Clavulanate | Ceftriaxone |
| Ampicillin | Cefuroxime |
| Augmentin | Cefzil |
| Azithromycin | Cefprozil |
| Bactrim | Cephalexin |
| Biaxin | |
| Ceclor | |
| Cefaclor | |
| Ceftin | |

Notes

If you know the name and are not seeing it, put it in the notes and we will figure it out. If a case is hospitalized please enter the information, and chose the hospital from the list. All Oregon hospitals are on that list. If they are transferred, create another hospitalization.

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Hospitalized? Yes No Unknown

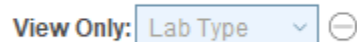
| Hospital | Chart # | At |
|----------|---------|----|
| | | |

How do you define probiotics and why do we ask? It is a grant requirement. Probiotics can affect your gut flora and there is concern if there are risks associated with antibiotic resistance. We are sending these isolates onto CDC for antibiotic resistance testing and they cross back to the exposure information.

Enteric module- in the lab section some fields were overlapping – test type and result. This is resolved.

Request - On E coli and Salmonella is there someone to note that the shotgun is done and whether they are eligible. Would like to have these fields.

On the top of the lab tab there is a drop down – you can choose just to see enteric manual entered labs or ELRs as well.



View Only: Lab Type ▾

Julie manually creates a summary lab. Julie enters much of the state OSPHL information and reviews the labs to see if they make a case definition. She showed the information button that will take you to the guidelines, data entry help, and the case definitions. As before, you need to highlight the lab before the details display in the window below.

Feedback on new Web-based case log data entry–all 0 did not have time to cover, provide feedback via Orpheus email.

REAL-D data field update- June – 5 min

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Mentioned on the last call was that the Office of Equity and Inclusion was going to create a training video for phone interviews, but they have asked us to do this. June and a workgroup will be working on this in the coming months.

June Training summary– TB by Kiley – 5 min

June did record this training and can share with users if they would like. You will see a dialogue box when you login telling you that they are switching over. There is a button to switch back.

The screenshot shows a patient record for case 515499, titled 'May TestCase'. The interface is organized into a sidebar on the left with categories like Summary, Admin, Labs, ELRs, Clinical, Treatment, Drug Suscept., Risks, Followup, Contacts, Notes, Docs, Log, and eCR. The main content area displays patient details: Disease: TB, Status: Confirmed, Verification: Positive Culture, DOB: 7/7/1974, Age: 43 years, Deceased: [Not Answered], Sex: F, Pregnancy: No, Race: Unknown, Sub: , Hispanic: Declined, Birth Country: United States, and Language: English. At the bottom, there is a 'STATE USE ONLY' section with fields for Count Date (5/5/18), TB Case Number (260004414), and Count Status. A blue 'End Beta' button is located in the bottom left corner, with a red arrow pointing to it. A 'Contact us' link is also visible at the bottom left.

Feedback on the Royal Orpheus for TB has been positive. There is a button on the bottom left to send an email to Kiley and David. Kiley is also creating some short training videos on the new TB layout. Suggestion to shut off the warning every time you login. Once you accept it then have it not show up. There will be an in person July 26 or 27th for TB. There are travel funds available. Would encourage TB nurses to attend this training in July.

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| | |
|---|--|
| <p>Training topics (first Wednesdays 10:30-11:30) – 5 min July 11th – Anti microbial stewardship August 1st – Rickettsial illnesses? Other ideas? Stephen would prefer after August. Any need for a new user training? Intermediate? Other topics – one person interested in new user training.</p> | |
| <p>July 12th 1:30-2:30 Aug 9st 1:30-2:30 Sept 13th 1:30-2:30</p> | |
| | |