

Appendix 2. Orpheus Cross-jurisdictional Data-sharing Agreement

Jurisdiction Granting Other Jurisdictions Access to Orpheus case reports

I, _____ (ORP Name) (ORP of _____ (Granting Jurisdiction)), agree to grant

Orpheus case record access to Approved Orpheus Users from the following jurisdictions

- _____ Health Department,
(Receiving Jurisdiction)
- _____ Health Department,
(Receiving Jurisdiction)
- _____ Health Department,
(Receiving Jurisdiction)
- _____ Health Department,
(Receiving Jurisdiction)
- _____ Health Department
(Receiving Jurisdiction)

These users must be in compliance with the Orpheus Security Policies and Procedures, and will have the same disease-group access to Orpheus cases associated with my jurisdiction*.

Signed _____ Date _____

*Users will have access to all the disease groups already established for their jurisdiction.