

## ORPHEUS PERINATAL HEPATITIS B PREVENTION DATA ENTRY INSTRUCTIONS

These instructions are intended to aid data entry and management in Orpheus of infants being case managed to prevent perinatal hepatitis B infection. Please refer to the [Perinatal Hepatitis B Investigative Guidelines](#) for detailed information on case management activities.

### Case Identification

When the case [aka mother] is initially identified as a hepatitis B case, the **Pregnancy** field in the Basics Panel should be completed (red boxes below). This field is intended to reflect the case's pregnancy status when identified, and **should not be changed to reflect the case's current pregnancy status**. When a case becomes pregnant, it is tracked by adding a pregnancy in the Pregnancy History section.

### Pregnancy Identification

**Once you find out a hepatitis B case is pregnant, you will need to add a pregnancy to the case's record.** To add a pregnancy:

1. Click the "**Pregnancy**" field in the Basics Panel to open the Pregnancy History pop-up window.
2. Click on the blue "**+ Pregnancy**" button at the top right of the pop-up window to add a new pregnancy to the Pregnancy History for the case.
3. A number for the current pregnancy (**Preg#**) will populate. If it is not correct, make the necessary changes.
4. Enter the estimated delivery date (**Est. Due Dt**), **Trimester** screened (drop-down), **Delivery Hospital** (drop-down) and **Insurance Status - Mom** (drop-down choices are: public, private, self-pay/no insurance). After the baby is born you'll have to come back to this pop-up window to add the type of insurance for the infant, **Child**. The choices are the same as those for the mother.

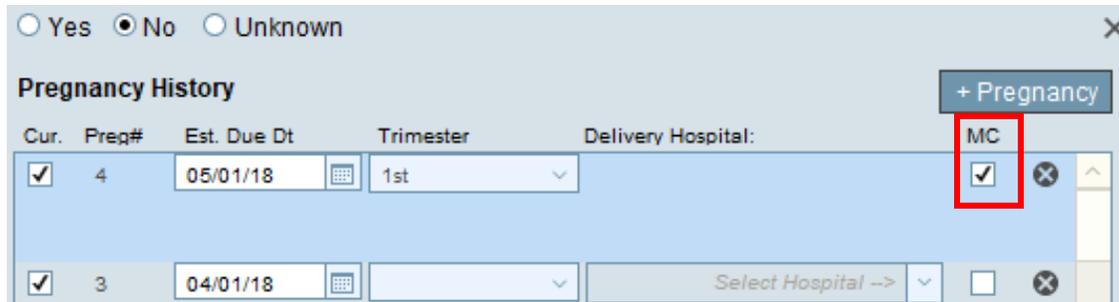
**Important Note:** Each pregnancy must have a pregnancy number (**Preg#**). The same number will be used for the infant contact when the child is born. This number links the mother and infant for reports.

The screenshot displays two parts of the Orpheus system interface. On the left is the 'Basics Panel' with the following fields: 'Reason for testing:', 'DOB: 11/11/1984', 'Age: 32', 'Sex: F', 'Race: Asian, Black', 'Hispanic: No', 'Language:', and 'Born: Canada'. A red box highlights the 'Pregnancy: No' field. On the right is the 'Pregnancy History' pop-up window. At the top, there are radio buttons for 'Yes', 'No' (selected), and 'Unknown'. Below this is a table with columns: 'Cur.', 'Preg#', 'Est. Due Dt', 'Trimester', 'Delivery Hospital:', and 'MC'. The table contains two rows of pregnancy data. The first row has a checked 'Cur.' box, 'Preg# 4', 'Est. Due Dt 05/01/18', 'Trimester 1st', and 'MC' box. Below the table are fields for 'Insurance status - Mom' (set to 'public') and 'Child: public'. The second row has a checked 'Cur.' box, 'Preg# 3', 'Est. Due Dt 04/01/18', and 'MC' box. Below it are fields for 'Insurance status - Mom' and 'Child:'. A '+ Pregnancy' button is located at the top right of the pop-up window.

### **Additional Features in the Pregnancy History Pop-up**

If an infant is transferred to Oregon to complete case management from another state, a pregnancy needs to be created to track information required when reporting to the CDC. To indicate the infant was transferred from another state, select the option "Transferred In" from the **Trimester** drop-down list.

If a case's pregnancy is found to not go to term due to miscarriage, still birth, or abortion, click the box below "MC" in the Pregnancy History pop-up for the associated pregnancy (in red below). This ensures the pregnancy is reported, but removes it from reports. It also hides delivery hospital and insurance fields, which are only needed for live births.



## Infant Case Management

### **A. Creating an infant contact** (screenshot on page 3)

After an infant is born, you will need to add an infant contact. **To add an infant contact:**

1. On the Contacts tab, click on the grey "+ Contact" button. A pop-up should come up asking if this contact is the case's newborn infant. Click **YES**. In the list of the contacts at the top of the screen, the "Newborn Baby" should appear along with the mother's last name.
2. Select the new infant contact from the list. The info for the infant contact should appear on the bottom of the screen.
3. On the **Ix/Demo tab**, DOB, sex, and race/ethnicity information can be entered directly into the fields. This info can also be added by clicking on the "Show Person" button (in red on page 3) to the right of the tabs.
4. To add a name, navigate to the **Person Record** by clicking on the "Show Person" button.
5. On the Ix/Demo tab, select the **Pregnancy#** from the drop-down that is associated with the pregnancy in the Pregnancy History pop-up. (This is an important step since it links the pregnancy information with the mother's and child's information)
6. Add the county that will be doing infant case management in the **Follow up County** box. This is also important to ensure infants are tied to the correct counties in reports.
7. Add the infant's **Birth Weight** [in grams] in the appropriate box.
8. In the Pregnancy History pop-up, select the child's insurance status from the drop-down.
9. If a pediatrician is identified for the infant, contact information can be added at the bottom of the **Labs/Provider** tab. Click the "+ Provider" button. Search for the provider or clinic from the list.

**Note:** A notes section is available at the bottom of contact **Ix/Demo** tabs. This functions the same as the notes section for cases but offer another place to track activities specific to a contact. Using the contact notes section is optional.

**Important note:** All fields highlighted in **yellow** should be completed. This also includes DOB.

The screenshot displays the CONTACTS application interface. At the top, there is a header with the title 'CONTACTS' and navigation options like 'None Elicited', 'Contact List', 'Summary', '+ Contact', and 'Contact Dupe'. Below this is a table with columns for Name, Age, Sex, Ref, and Done. The first row shows 'Solich, Newborn Baby' with 'Infant' as the reference. Below the table, there is a detailed view for the selected contact, 'Solich, Newborn Baby'. This view includes a 'Sick' checkbox, a checkbox for 'Contact has compatible signs/symptoms (or seroconverted)', and an 'Onset' date field. There are tabs for 'Ix / Demo', 'Prophy / Tx', 'Vaccine', 'Labs / Provider', 'Links', and 'Docs'. A 'Show Person' button is highlighted with a red box. The 'Prophy / Tx' tab is active, showing various data entry fields. Fields for 'DOB', 'Age', and 'Sex' are on the left. 'Race' is 'Hispanic', 'Occupation' is 'Occupation / Grade', and 'Relation' is 'Infant'. 'Pregnancy #' and 'Birth Weight' are highlighted in yellow. There are also fields for 'Interview Type', 'Interview Date', 'Interview Status', 'Interviewer', and 'Education Provided'. A 'Notes' section is at the bottom with a 'QuickNote' field.

**B. Adding hepatitis B immune globulin (HBIG) information** (example available on page 4)

1. Select the contact from the list and click on the **Prophy/Tx** tab.
2. On the Prophy/Tx tab, click on the grey **+ HBIG** button on the right-hand side of the window.
3. Click on the **Enter Drug** field and choose “HBIG” from the drop-down list.
4. Enter the date HBIG was given in the **Start Date** field. The date can be typed in or selected from the calendar. Once a date has been added, the **End Date** should auto-populate with the same date. A field for age at administration will also auto-populate at the bottom of the window.
5. In the **Prophy Status** box there is a drop-down list, click on administered.
6. Any additional comments can be recorded on the Ix/Demo tab in the Notes section.

**Note:** Orpheus will auto-populate a note at the bottom of the Prophy/Tx tab indicating that both HBIG and the birth dose were administered within 1 day.

Solich, Newborn Baby Sick  Contact has compatible signs/symptoms (or seroconverted) Onset

Ix / Demo Prophy / Tx Vaccine Labs / Provider Links Docs Show Person Create Case

Prophylaxis Recommended  Yes  No Date  Prophy Status Administered

+ HBIG

| Drug Name / Comment | Supportive Care / Tx Course | Start / End Date |
|---------------------|-----------------------------|------------------|
| HBIG                | Dosage                      | 5/1/2018         |
| Comments            | Notes Treatment Notes       | 5/1/2018         |

Age at administration: 0 days  
HBIG and BirthDose administered within 1 day

### C. Adding vaccines (example on page 5)

There are two different options for adding vaccine information to an infant contact's Vaccine tab.

#### 1. Manually adding vaccine information

- For each vaccine, on the **Vaccine tab** click the grey **"+Vaccine"** button.
- Add the administration date. The date can be typed in or selected from the calendar.
- Click on the area under "Age" and the age at time of vaccination will be calculated.
- Click on the drop-down under "Valid Vax.". Choose the type of hepatitis B vaccine that was administered. Valid options for an infant contact are:
  - "Hep B, adolescent or pediatric" – CVX 08, for any dose or
  - "DTaP-Hep B-IPV" – CVX 110, for doses after 6 weeks of age
- If you know the vaccine lot number, it can be typed in the area under "Lot No."

#### 2. Directly query ALERT Immunization Information System (IIS) for infant's vaccine record.

- Click the **"Query ALERT"** button at the top right of the Vaccine tab.
- It may take a few moments for the query to complete.
- If the query is able to find a record matching the infant contact, it will pull ALL immunizations in the ALERT IIS record (not just hepatitis B) into Orpheus. You can filter doses to show just hepatitis B vaccine by clicking 'Filter for HepB (chronic)' (in red below). You can also delete doses unrelated to hepatitis B if you wish for cleaner data.

ix / Demo    Prophy / Tx    Vaccine    Labs / Provider    Links    Docs    Show Person    Create Case

History of Previous Disease  Yes  No  Unknown    Valid Doses

Up to Date  Yes  No  Unknown    [Query ALERT](#)

| Date     | Age | Valid Vax | Any Vax | Vaccine Name                   | Lot no.  |   |
|----------|-----|-----------|---------|--------------------------------|----------|---|
| 05/01/18 | 00  | 08        | 08      | Hep B, adolescent or pediatric | lot #... | ✘ |
| 07/12/18 | 0.2 | 110       | 110     | DTaP-Hep B-IPV                 | lot #... | ✘ |
| 12/01/18 | 0.6 | 110       | 110     | DTaP-Hep B-IPV                 | lot #... | ✘ |
| 05/01/19 | 01  | 111       | 111     | influenza, live, intranasal    | lot #... | ✘ |

[+ Vaccine](#)

|                     |           |  |
|---------------------|-----------|--|
| Find Birth Dose     | 5/1/2018  | These fields evaluate correct spacing between vaccines administered to protect this infant from acquiring hep b. |
| Find 2nd Valid Dose | 7/12/2018 |  |
| Find 3rd Valid Dose | 12/1/2018 |  |

[Filter for HepB \(chronic\)](#)

Vaccine series completed within 8 months

Immunization Count  
(1 for HepB (chronic))

Three doses valid

### Infant vaccine validation

Vaccine doses can be validated by clicking the appropriate button below the area where vaccine information is entered (in grey). Clicking the button will identify the vaccine entered meeting the criteria for each dose in the series. Vaccine validation is based on timing between doses, the infant's age at vaccination, and the type of vaccine used. The spacing criteria for a valid dose are as follows:

- Birth dose: administered within 1 day of delivery
- Second dose: administered at least 28 days after the birth dose
- Third dose: administered when the infant is at least 24 weeks of age, at least 16 weeks after dose 1, and at least 8 weeks after dose 2

In addition, a dose is not considered valid if an inappropriate type of vaccine is administered. For example, Hepatitis B adult vaccine would not be appropriate for an infant or DTaP-Hep B-IPV (Pediarix™) is not indicated for infants less than six weeks of age.

As doses are validated, you will see a count of valid doses in the bottom right corner of the Vaccine tab. Once three doses have been validated, a message will auto-populate if the vaccine series was completed within 8 or 12 months.

### D. Adding Infant serology (example available on page 6)

1. On the **Labs/Provider** tab, click on **" + Specimen."**
2. Enter specimen collection date in the **Collection Date** field, and the laboratory where the test was done under **Lab Name**. There is a drop-down.
3. In the **Test Type** field type 'H', and the test drop-down should take you to 'Hep Serology.'

4. In **Anti-HBs Quant** enter the value from the drop-down or type in the value from the lab results you received.
5. In the **HBsAg** and **anti-HBs** fields enter the test results. The drop-down has choices for positive, negative, etc.

**Note:** Anti-HBc testing typically should not be completed for infants. See the Perinatal Hepatitis B Investigative Guidelines for more information.

| Ix / Demo                    |            | Prophy / Tx  |               | Vaccine |                | Labs / Provider |  | Links |  | Docs |  | Show Person |  | Create Case |  |
|------------------------------|------------|--------------|---------------|---------|----------------|-----------------|--|-------|--|------|--|-------------|--|-------------|--|
| <b>LABS</b>                  |            |              |               |         |                |                 |  |       |  |      |  | + Specimen  |  |             |  |
| Collection Date              | Lab Name   | Test Type    | AntiHBs Quant | HBsAg   | Anti-HBc total | Anti-HBs        |  |       |  |      |  |             |  |             |  |
| 4/12/19                      | Bay Clinic | Hep Serology | >12           | Neg     |                | Pos             |  |       |  |      |  |             |  |             |  |
| <b>PROVIDER DETAILS</b>      |            |              |               |         |                |                 |  |       |  |      |  | + Provider  |  |             |  |
| Name                         | Phone      | Fax          | Type          |         |                |                 |  |       |  |      |  |             |  |             |  |
| Psu Hlth Serv-Pt/Ins Billing |            |              |               |         |                |                 |  |       |  |      |  |             |  |             |  |

#### E. Infant contact closure (example available on page 7)

When you are ready to close an infant to case management, go to the **Ix/Demo tab**.

1. The fields for closing case management are located on the right side of the window next to the interview information and above the notes section (red box on page 7). Enter the closure date in the **Follow-up completed** box by typing the date or selecting it from the calendar.
2. The **Completed reason** field has a drop-down with various reasons for closing a case, choose the most appropriate. Reasons for closing case management and when to use them include:
  - *Services completed*: all case management completed, and infant is not a hepatitis B case
  - *County Lost to follow up/unable to locate*: unable to locate infant to continue case management. Only use if at least 3 attempts to contact the family have been made. Contact attempts can be documented in the Notes section of the Interview Tab. This option closes the active case management of the county and enters the child into an "inactive" case management at the state. During "inactive" case management, the state coordinator will continue to monitor ALERT IIS for information on the infant. DO NOT check the box when entering a child into "inactive case management"
  - *State Lost to follow up/unable to locate*: FOR STATE USE. If a child is monitored until 24 months of age and no new information becomes available, the state coordinator will close all case management activities using this reason.
  - *Moved out of state*: infant is known to have moved out of state, but the state is unknown
  - *Moved out of country*: infant no longer resides in the US
  - *Refused services*: parents refuse part or all of perinatal hepatitis B case management
  - *Transferred out of state*: infant moves to another state, that state is known, and that state is notified to continue case management
  - *Infant died*: infant passes away
  - *Household – chronic carrier*: infant found to be a hepatitis B case. If the infant is identified as a hepatitis B case, click the **'Create Case'** button (yellow oval on page 7) to create a hepatitis B

case for the infant. This will automatically check the box next to 'Sick' and turn the infant's name red in the contact list to indicate seroconversion.

3. Also, check the **Case Management Completed** box. Once the box is checked, an "X" appears in the **Done** box on the contacts list. The completion date and check box will be used to determine reimbursement.

The screenshot shows the CONTACTS interface. At the top, there are tabs for 'None Elicited', 'Contact List', and 'Summary'. A '+ Contact' button and a 'Contact Dupe' button are also visible. Below this is a table with columns for Name, Age, Sex, Ref, and Done. The first row is for 'Solich, Newborn Baby' with Age 'Infant' and a 'Done' box containing an 'X'. The second row is for 'Contact, Adult' with Age '32' and Sex 'M', and an empty 'Done' box. Below the table is a detailed view for 'Solich, Newborn Baby'. It includes a 'Sick' checkbox (circled in yellow) and an 'Onset' field. There are tabs for 'Ix / Demo', 'Prophy / Tx', 'Vaccine', 'Labs / Provider', 'Links', and 'Docs'. A 'Show Person' button and a 'Create Case' button (circled in yellow) are also present. The detailed view includes fields for DOB (5/1/2018), Age, Sex, Race (Hispanic), Occupation, Relation (Infant), Pregnancy # (4), Birth Weight (5420), Address (66129 Any St, Sutherlin, OR 97479), Interview Type, Interview Date, Interview Status (Not Yet), Follow-up completed (5/1/2019), services completed, and Case Management Completed (checked). A red box highlights the 'Follow-up completed', 'services completed', and 'Case Management Completed' fields.

### Other contact data entry (household, sexual, etc.)

#### **A. Adding other contact information**

Older children of the case, who were not case management as infants in Oregon, should be entered as household contacts. Husbands and other sexual partners should be added as sexual contacts.

1. On the Contacts tab, click on the grey "+ Contact" button. A pop-up should come up asking if this contact is the case's newborn infant. Click **NO**.
2. In the pop-up window, add the available information for the contact.
3. Click on the "Create Contact" button.
4. Additional information (race/ethnicity, language, alias, etc.) for the contact can be added on the **Ix/Demo** tab or by clicking on the "Show Person" button.
5. Add the county that will be doing contact follow up in the **Follow up County** box.

#### **B. Adding other contact prophy and vaccines**

The steps are the same as those for adding prophy and vaccines for infants. Please note that vaccines for other contacts cannot be validated.

### C. Adding other contact serology

The steps are the same as those for adding serologic testing for infants. Other contacts may have anti-HBc or other test results, which infants typically do not have.

### D. Closing other contacts

The steps for closing other contacts to case management are the same as for infants.

### Transferring a chronic hepatitis B case between counties

Due to the need to track chronic cases on an ongoing basis, chronic hepatitis B cases should be transferred differently than other cases. If *during the initial investigation* of a case you find they are residing in a different county (i.e. the labs are reported to your county, but the individual actually lives in a different county), the transfer can be completed as with other diseases, by changing the address on the case's Basics Panel. If, however, the change of address occurs *after the initial investigation* (i.e. case was identified while residing in your county but now resides in a different county), the steps below should be taken to transfer a case. This difference allows for an accurate historical count of where cases were initially identified.

1. Click on the Grey  "Person" button to the right of the case's name.
2. In the Person Entry window, click the "Current Address" field. A pop-up will appear.
3. Click 'Clear Form' and enter the new address.
4. Click 'Save Changes.' The new address should be visible in the "Current Address" field and the previous address should move into the list below of previous addresses.
5. Close the Person Entry window.  
**Note:** This change can also be done by clicking on the address field in the case's Basics Panel. Click "Person" in the pop-up window and you will be navigated to a window to edit the case's address.
6. Back in the Basics Panel, remove your name as the **Local Epi** towards the bottom of the screen.
7. Continue to leave the **Keep Active** box checked. This is necessary for the next county to locate the case.
8. Navigate to the Manage Case pop-up by clicking on the file icon. 
9. Click on the grey "+ County" button in the County History section.
10. Select the new county from the drop-down menu. And check the box next to 'Current.' Click 'Save'. On the manage case window, make sure the current box for your county has been unchecked.
11. Notify the new county of residences that you are transferring a case to them, either via note in Orpheus if you know who will be covering the case or via a phone call to the county's communicable disease phone number.

As the receiving county of a case transfer, be sure to add yourself as the Local Epi in the Basics Panel.

## USEFUL TOOLS/REPORTS IN ORPHEUS

### Pinning Notes

On the Notes tab, you can pin notes with important information to the top of the page. Examples of when this can be helpful include:

- A case of hepatitis B in a woman of childbearing age (15-44) and you know she cannot get pregnant (tubal ligation, hysterectomy, etc.) or is on long-term birth control (IUD, etc.). Pinning this information may help save staff from having to check pregnancy status when new labs are added.
- When a case does not want to be contacted or only wants to be contacted a specific way (for example: texts, at specific times, etc.).

The screenshot shows the Orpheus interface for a case entry. The top navigation bar includes Home, List, Prev, Next, and Print. The main header displays "All-view enabled" and "HepB (chronic) Case Entry". The left sidebar shows a summary for case ID 515174, managed by Dino C Solich, with 1 lab, 0 eCR, and 2 comorbs. The main content area is the "NOTES" tab, which contains a table of notes. A note from 08/22/17 at 3:12 PM is pinned to the top. The note text is "Merged details from this case to Case ID: 515174 and marked this case for deletion". Other notes include an onset date of 6/14/2018, a deceased status, and an auto-notification from 05/01/19.

| Done                                | Date                 | Assigned To | Created By               | Note   |
|-------------------------------------|----------------------|-------------|--------------------------|--|
| <input checked="" type="checkbox"/> | 08/22/17<br>3:12 PM  |             | Matt Navarre<br>AppWorks | Merged details from this case to Case ID: 515174 and marked this case for deletion |
| <input type="checkbox"/>            | 05/01/19<br>10:47 AM |             | Lee Peters<br>OPHD       | Auto Notification: Person with Chronic Hep B moved to Douglas county.              |

### Pregnancies

If you want to find cases that have an estimated delivery date (EDD) entered, regardless of delivery status:

1. Click on “**Pregnancies**” in the Search box on the HOME page (red box below).
2. Enter the date range in the **Due Date** field, Hep B (chronic) in the **Disease Name** field and your county name in the **County** field. You should get the list of cases with chronic hepatitis B and an EDD in the chosen time frame.

The screenshot shows the Orpheus interface for a search. The top navigation bar includes the Orpheus logo, LHD Menu, and user information (Lee Peters - OPHD). The main content area shows a search box with the "Pregnancies" filter highlighted in a red box. The search results are displayed in a table with columns for Disease, Case, Patient, Age, Sex, Onset, Reported, County, and Status. The search criteria are: Active by Epi (checked), by Disease, Days (30), County (Out of State), Assigned to (Lee Peters - OPHD), Incomplete (unchecked), and All Counties (checked).

### Reports

From the HOME screen click on **Reports** (yellow box above). Then click on the **Disease-specific** tab followed by the **Peri Hep B** sub-tab. Here, you will find different report options for perinatal hepatitis B (example on page 10). For each, you will need to enter the birth cohort dates and your **County** name in the box. Below is a description of each report available to you:

1. **Mom/Baby Pairs:** This report will provide you with a list of the mother-infant pairs for your county born during the selected time frame. The screen you are initially taken to provides a summary of the mother-infant pair. For more information on the infant’s case management, you can click on the headings in the grey bar/white text (Vaccination, Prophy, Serologies, CDC List) at the top of the page. See below for more information.

In addition, clicking the “Other contacts of these cases” button will produce a list of other contacts (sexual, household, etc.) of the cases listed in the mom/baby list. You may need to scroll right to find this button on your screen.

| CaseID | Case County | Name           | DOB        | Baby (#): Name         | DOB    | Sex | Closed  | Relation | Valid Doses |
|--------|-------------|----------------|------------|------------------------|--------|-----|---|----------|-------------|
| 515174 | Clatsop     | Solich, Dino C | 11/11/1984 | 4 Solich, Newborn Baby | 5/1/18 |     | <input checked="" type="checkbox"/> 5/1/19 services completed | Infant   | Three       |
| 447086 | Multnomah   | Star, Shining  | 5/4/1982   | Star, Newborn Baby     | 1/1/18 |     | <input type="checkbox"/>                                      | Infant   |             |
| 515612 | Washington  | Test, Person   | 1/1/1980   | 1 Test, Newborn Baby   | 9/5/18 |     | <input type="checkbox"/>                                      | Infant   | One dose    |

Clicking on **Vaccinations** (at top of screen) gives you a vaccination history for each infant in the selected birth cohort. You will also see *Valid Doses*, which reflects the number of doses that have been validated on the Infant’s Vaccine tab.

Clicking on **Prophy** (at top of screen) gives you a list of the selected birth cohort and the date HBIG was administered. If a date is in red, the child did not get HBIG within a day of birth or there is something about the date that does not make sense. If there is no date, HBIG was not administered or not recorded in Orpheus.

Clicking on **Serologies** (at top of screen) gives you a list of names and serology results for the selected cohort year.

2. **Pregnant Cases:** This report will provide you with a list of mothers that have an EDD, that haven't been linked to an infant contact in the database (i.e. not born, no preg# selected). Enter a timeframe (in the past and/or into the future) of the EDD in the birth cohort fields on the report page and click on the "**Pregnant Cases**" button.
3. **2<sup>nd</sup> Dose Needed:** This report will provide you with a list of infants with only 1 or no valid doses on record and therefore due for their first or second hepatitis B dose. When the report is run, it will check for valid doses for the birth cohort you have entered. In addition, doses that have not yet been validated will be validated. **Tip:** This report is not able to calculate time between doses; therefore, it may be more helpful to run this for infants who are at least 1 month of age. This will help to prevent capturing infants not yet due for a second dose (ex: A report run for a cohort through today will capture an infant born last week).
4. **3<sup>rd</sup> Dose Needed:** This report will provide you with a list of infants with only 2 valid doses and therefore due for the third dose in the hepatitis B series. This report will also validate doses that have not yet been validated on the Infant Vaccine tab. **Tip:** Run this report for infants who are at least 5 months of age (to help see who will be due and is past due for vaccine).
5. **Serology:** This report provides a list of infants that are due for post vaccine serologic testing. For a baby to be included, it must have 3 valid doses on the Infant Vaccine tab, be at least 9 months of age and not closed to case management. Therefore, infants requiring a second vaccine series or with only partial test result will be visible in this report. Infants not fully closed to case management (date, reason for closure, and box checked) will also appear in this list.
6. **CDC List:** This report combines some of the information from the mom-baby list into one report screen. In addition, it displays other information that typically needs to be completed during case management so that the state epidemiologist can report to the CDC. You may find this report useful to see an overview of case information needing to be completed.
7. **Closed to Case Management:** This report looks like the CDC List, but provides a list of infants closed to case management during the dates specified, instead of infants born during the dates.

### Navigation

There is a "**Back to Reports**" button so you can go back to the reports page to make another date selection or choose another report.

### Contact Information

If you have questions call Lee Peters at 971-673-0310 or email at [lee.r.peters@state.or.us](mailto:lee.r.peters@state.or.us).

### Edit Log

5/9/2013 – Added follow up county information

1/6/2015 – Updated document to reflect new features in Orpheus. Reformatted instructions to numbered lists.

1/12/2017 – Updated documented to reflect new features added to Orpheus in 2016. Added information on transferring cases between counties. Added explanation for different reasons for case management closure.

5/7/19 – Updated to ensure instructions align with the Beta version of Orpheus.