
How To Submit Online Morbidity Reports for COVID-19

Updated April 20, 2020



COVID-19 Emergency Rule: Effective March 30, 2020

On March 9, 2020 the Oregon Health Authority (OHA), Public Health Division, adopted temporary rule OAR 333-018-0900, in which it required healthcare providers, licensed laboratories and healthcare facilities to report COVID-19 cases; and laboratories additionally to report negative results of COVID-19 testing. Unless a permanent rule is adopted, this temporary rule is effective through September 4, 2020.

On March 30, the OHA Public Health Division amended this rule to require, in addition to the above, the reporting, within 24 hours, of individuals with COVID-19 who are **hospitalized** and of **deaths from COVID-19**.

Healthcare providers must submit reports through OHA's Online Morbidity Report, www.healthoregon.org/howtoreport.

Use the Confidential Online Morbidity Report to do the following:

- Request testing at OSPHL
- Report test results to OHA
- Report hospitalization of a COVID-19 case
- Report death of a COVID-19 case





STAY HOME. SAVE LIVES.

OHA COVID-19 Updates: Visit our COVID-19 page for Oregon updates and community resources, or visit our healthcare partner resources page.

How and Where to Report

- Disease Reporting
- Case Report Forms
- Investigative Guidelines
- What and When to Report
- How and Where to Report**
- Reporting Rules
- REAL D Data Collection Toolkit
- Electronic Laboratory Reporting (ELR)
- Orpheus
- Oregon HIV Reporting

CONTACT US
Acute and Communicable Disease Prevention Section

Reports on Oregon and Out-of-state Residents

Confidential Oregon Morbidity Report

Health care providers are encouraged to use our secure, web-based confidential reporting system. Case reports are automatically routed to the appropriate local health department, provided the patient's resident address is correctly submitted.

[Online Morbidity Report](#)

Our reporting form is also available as a fillable PDF form if you prefer to traditionally report to your Local Public Health Authority.

Questions? When in doubt, feel free to contact us by telephone or FAX.

971-673-1111

FAX 971-673-1100

Note: HIPAA requires physicians and covered entities to keep an accounting of disclosures of protected health information, including to public health authorities.



Step 1: About the patient

Note the required fields.

These are essential for identifying patients and assigning them to their county of residence.

File Edit View Favorites Tools Help

Oregon Health Authority Confidential Oregon Morbidity Report

About The Patient

Patient Name * First Last

Parent/Guardian First Last

Sex * M F Language English

MRN

Date of Birth * MM/DD/YYYY unknown

Street

City State ZIP OR *

Phone ###-###-####

Cancel Continue →

Oregon clinicians are required by law to report confirmed or suspect diagnoses of many specified diseases and conditions.* This secure, electronic report will either be automatically routed to the local health department associated with the patient's county of residence, or to the Oregon Health Authority if the patient is not an Oregon resident, or if the patient's county of residence cannot be determined. You are welcome to call 971-673-1111 and discuss a report, or you can simply use this form.

The padlock icon in your browser indicates secure transmission. Do NOT submit information unless you see the padlock icon. No information can be retrieved through this interface; it can only be submitted.

*<https://secure.sos.state.or.us/oard/displayDivisionRules.action?selectedDivision=1233>

Step 2: Pick the disease

This will take you to disease-specific modules.



Oregon Health Authority Confidential Oregon Morbidity Report

About The Disease/Condition

Disease or Condition * Chlamydia Gonorrhea Hepatitis C Lead Test Animal Bite
 COVID-19 Hepatitis B HIV Pesticide poisoning Other

Date of Symptom Onset * unknown

Notes
Enter details here...

Diagnosis is (choose best option) * confirmed by lab results
 supported by lab results
 clinical or only suspect at this time
 negative lab result

For most reportable diseases, local public health officials are required to interview cases. Should health department staff contact the clinician before attempting to interview the patient? * Yes No

Step 3: Pick your COVID-19 module

You can request testing at OSPHL and report a positive test, hospitalization of a case, or death of a case. Sections in this guide are color-coded by module.

Requesting testing

Submitting test results

Notifying OHA of a hospitalized case

Notifying OHA of a death

The screenshot shows the Oregon Health Authority's Confidential Oregon Morbidity Report interface. The header features the Oregon Health Authority logo and the title "Confidential Oregon Morbidity Report". Below the header, there are four buttons for reporting different types of COVID-19 events: "Report COVID-19 Testing", "Report COVID-19 Results", "Report COVID-19 Hospitalization", and "Report COVID-19 Death".

Requesting testing

Slides 8–13 are for requesting testing.

The screenshot shows the Oregon Health Authority's Confidential Oregon Morbidity Report interface. The header includes the Oregon Health Authority logo and the title 'Confidential Oregon Morbidity Report'. Below the header, there are four buttons: 'Report COVID-19 Testing' (highlighted with a red border), 'Report COVID-19 Results', 'Report COVID-19 Hospitalization', and 'Report COVID-19 Death'.

Requesting testing

Use this to request testing for COVID-19 at OSPHL.

Please answer ALL questions.

The screenshot shows the 'Confidential Oregon Morbidity Report' form. At the top, there are navigation tabs: 'Report COVID-19 Testing', 'Report COVID-19 Results', 'Report COVID-19 Hospitalization', and 'Report COVID-19 Death'. The 'Report COVID-19 Results' tab is active. Below the tabs, the title 'Confidential Oregon Morbidity Report' is displayed. A red banner reads 'Please answer ALL questions'. The form contains several questions with radio button options for 'Yes' and 'No':

- Is the patient a tribal member? Yes No
- Has the patient been admitted to the hospital for suspected COVID-19? Yes No
- Did the patient die from suspected COVID-19? Yes No
- Evidence of viral lower respiratory infection? Yes No
- Is this patient a close contact of a known case? Yes No
- Does the patient work or live in a congregate setting? (e.g, LTCF, correctional facility, shelter) Yes No

Below the questions is a text input field labeled 'Enter additional comments here...'. At the bottom right of the form is a blue 'Continue →' button.

Requesting testing

Answering “Yes” to some questions will prompt additional information.

Oregon Health Authority Confidential Oregon Morbidity Report

Report COVID-19 Testing | Report COVID-19 Results | **COVID-19 clinical questions** | Report COVID-19 Hospitalization | Report COVID-19 Death

Please answer ALL questions

Is the patient a tribal member? Yes No

Has the patient been admitted to the hospital for suspected COVID-19? Yes No

Did the patient die from suspected COVID-19? Yes No

Evidence of viral lower respiratory infection? Yes No

Is this patient a close contact of a known case? Yes No

Does the patient work or live in a congregate setting? (e.g, LTCF, correctional facility, shelter) Yes No
 Live Work

[Continue →](#)

Requesting testing

Depending on your answers, you will get one of two messages

If testing **is** recommended at OSPHL, proceed to submit specimens and the test request form.

Enter additional comments here...

Continue →

Testing at the Oregon State Public Health Lab **is recommended** for this patient.
Please prepare specimens for submission.

If testing is **not** recommended at OSPHL, you are encouraged to seek testing at another lab. You do **not** need OHA approval to test at a lab other than OSPHL.

Enter additional comments here...

Continue →

OHA does not recommend testing for this patient by the Oregon State Public Health Laboratory.
OHA encourages you to pursue testing with commercial laboratory.

Requesting testing

If testing **is** recommended at OSPHL, proceed to submit specimens and the test request form.

The box for “clinical or only suspect at this time” will already be checked.

You will not receive any further guidance or confirmation from OHA.

Contact of a case? yes

Diagnosis is (choose best option)

- confirmed by lab results
- supported by lab results
- clinical or only suspect at this time
- negative lab result

← Back

Continue →

Detailed instructions for requesting testing are here:

<https://www.oregon.gov/oha/PH/DISEASES/CONDITIONS/DISEASES/EMERGING%20Respiratory%20Infections/COVID-19-Health-System-Testing-Guidance.pdf>

Requesting testing

Final page: About the submitter

Note the required fields. This is essential in case public health needs to follow up.

Oregon Health Authority Confidential Oregon Morbidity Report

About The Reporting Entity

Facility Name * Organization or Company

Provider Name * First Name Last Name

Submitter Name * First Name Last Name

Same as Provider

Street

City State ZIP OR *

Phone * ### ### ####

Email *

Submitting test results

Slides 14–16 are for reporting test results.

We expect to get all results automatically by Electronic Lab Report, but you can report results here, too, if you know there is an issue with us receiving automatic results.



Submitting test results

If you are reporting a **positive** result, click the “Diagnosis is confirmed by lab results” button.

If you are reporting a **negative** result, pick that button.

Oregon Health Authority Confidential Oregon Morbidity Report

About The Disease/Condition

Disease or Condition Chlamydia Gonorrhea Hepatitis C Lead Test Animal Bite
 COVID-19 Hepatitis B HIV Pesticide poisoning Other

Date of Symptom Onset * 3/30/2020 unknown

Notes
Tribal Member? Yes
Hospitalized? Yes
Died? Yes
Symptomatic? No
Negative flu test? Unknown
Contact of a case? Yes

Diagnosis is (choose best option)
 confirmed by lab results
 supported by lab results
 clinical or only suspect at this time
 negative lab result

Laboratory Name * Laboratory Name

Specimen Collection * MM/DD/YYYY

← Back Continue →

Submitting test results

Final page: About the submitter

Note the required fields. This is essential in case public health needs to follow up.

Oregon Health Authority Confidential Oregon Morbidity Report

About The Reporting Entity

Facility Name * Organization or Company

Provider Name * First Name Last Name

Submitter Name * First Name Last Name

Street

City State ZIP OR *

Phone * ### ### ####

Email *

Notifying OHA of a hospitalized case

Slides 17–20 are for reporting hospitalization of a COVID-19 case.

The screenshot shows the Oregon Health Authority's Confidential Oregon Morbidity Report interface. At the top left is the Oregon Health Authority logo. To its right, the title 'Confidential Oregon Morbidity Report' is displayed. Below the title, there are four buttons for reporting different types of COVID-19 cases: 'Report COVID-19 Testing', 'Report COVID-19 Results', 'Report COVID-19 Hospitalization', and 'Report COVID-19 Death'. The 'Report COVID-19 Hospitalization' button is highlighted with a red border.

Notifying OHA of a hospitalized case

Enter the date of hospitalization.

If the person lives or works in a congregate setting, indicate that.

The screenshot shows the 'Confidential Oregon Morbidity Report' form from the Oregon Health Authority. At the top, there are four navigation buttons: 'Report COVID-19 Testing', 'Report COVID-19 Results', 'Report COVID-19 Hospitalization', and 'Report COVID-19 Death'. The 'Report COVID-19 Hospitalization' button is highlighted. Below the navigation buttons, the form asks for the 'hospital admission date for confirmed case', with the date '4/17/2020' entered in a text box. The next question is 'Does the patient work or live in a congregate setting? (e.g., LTCF, correctional facility, shelter)', with radio buttons for 'Yes' (selected) and 'No'. Below this, there are radio buttons for 'Live' and 'Work', and a text box labeled 'Enter facility name here...'. At the bottom of the form, there is a text box for 'Enter additional comments here...' and a blue 'Continue' button with a right-pointing arrow.

Notifying OHA of a hospitalized case

Complete the additional information about the patient's illness.

Note the required fields.

The screenshot shows the 'Confidential Oregon Morbidity Report' form from the Oregon Health Authority. The form is titled 'About The Disease/Condition' and includes several sections:

- Disease or Condition:** A grid of checkboxes for various conditions. 'COVID-19' is checked, while others like Chlamydia, Gonorrhea, Hepatitis C, Lead Test, Animal Bite, Hepatitis B, HIV, Pesticide poisoning, and Other are unchecked.
- Date of Symptom Onset:** A date input field with a calendar icon and a dropdown menu set to 'unknown'. A red box highlights this field.
- Notes:** A yellow text area containing the text 'Hospitalized? Yes: 4/17/2020'.
- Diagnosis is (choose best option):** Radio button options: 'confirmed by lab results' (selected), 'supported by lab results', 'clinical or only suspect at this time', and 'negative lab result'.
- Laboratory Name:** A text input field with a red asterisk and a red box highlighting it.
- Specimen Collection:** A date input field with a calendar icon and a red asterisk, highlighted with a red box.
- Has the patient already been notified of the diagnosis lab result?:** Radio button options: 'Yes', 'No', and 'Unknown'. A red box highlights this section.

At the bottom of the form are two buttons: '← Back' and 'Continue →'.

Notifying OHA of a hospitalized case

Final page: About the submitter

Note the required fields. This is essential in case public health needs to follow up.

The screenshot shows the 'About The Reporting Entity' section of the Oregon Health Authority's Confidential Oregon Morbidity Report form. The form is titled 'About The Reporting Entity' and includes several required fields marked with an asterisk (*). The fields are: Facility Name (Organization or Company), Provider Name (First Name and Last Name), Submitter Name (First Name and Last Name), Street, City State ZIP (with a dropdown for OR), Phone (### ### ####), and Email. A red box highlights the Facility Name, Provider Name, Submitter Name, and Phone fields. A blue button labeled 'Same as Provider' is located below the Submitter Name fields. At the bottom of the form are two buttons: 'Back' and 'Submit'.

Notifying OHA of a death

Slides 21–24 are for reporting death of a COVID-19 case.

The screenshot shows the Oregon Health Authority's Confidential Oregon Morbidity Report interface. The header includes the Oregon Health Authority logo and the title 'Confidential Oregon Morbidity Report'. Below the header, there are four buttons for reporting different types of COVID-19 cases: 'Report COVID-19 Testing', 'Report COVID-19 Results', 'Report COVID-19 Hospitalization', and 'Report COVID-19 Death'. The 'Report COVID-19 Death' button is highlighted with a red border.

Notifying OHA of a death

Enter the date of death.

If the person lives or works in a congregate setting, indicate that.

The screenshot shows the 'Confidential Oregon Morbidity Report' form from the Oregon Health Authority. The form has a blue header with the logo and title. Below the header are four green buttons: 'Report COVID-19 Testing', 'Report COVID-19 Results', 'Report COVID-19 Hospitalization', and 'Report COVID-19 Death'. The 'Report COVID-19 Death' button is selected. The form contains a text input field for 'Enter date of death for confirmed case:' with the value '4/17/2020'. Below this is a question: 'Does the patient work or live in a congregate setting? (e.g, LTCF, correctional facility, shelter)' with radio buttons for 'Yes' (selected) and 'No'. Underneath are radio buttons for 'Live' and 'Work', followed by a text input field 'Enter facility name here...'. At the bottom is a large text area 'Enter additional comments here...' and a blue 'Continue' button with a right arrow.

Notifying OHA of a death

Complete the additional information about the patient's illness.

Note the required fields.

The screenshot shows the 'Confidential Oregon Morbidity Report' form from the Oregon Health Authority. The form is titled 'About The Disease/Condition' and includes several sections:

- Disease or Condition:** A list of checkboxes for various conditions. 'COVID-19' is checked, while others like Chlamydia, Gonorrhea, Hepatitis C, Lead Test, Animal Bite, Hepatitis B, HIV, Pesticide poisoning, and Other are unchecked.
- Date of Symptom Onset:** A date input field with a calendar icon and a 'known' checkbox. A red box highlights this field, which contains the placeholder text '* MM/DD/YYYY'. An 'unknown' checkbox is also present.
- Notes:** A yellow text area containing the text 'Died? Yes: 4/17/2020'.
- Diagnosis is (choose best option):** A group of radio buttons with four options: 'confirmed by lab results' (selected), 'supported by lab results', 'clinical or only suspect at this time', and 'negative lab result'.
- Laboratory Name:** A text input field with a red box highlighting it, containing the placeholder text '* Laboratory Name'.
- Specimen Collection:** A date input field with a calendar icon and a red box highlighting it, containing the placeholder text '* MM/DD/YYYY'.

At the bottom of the form, there are two buttons: '← Back' and 'Continue →'.

Notifying OHA of a death

Final page: About the submitter

Note the required fields. This is essential in case public health needs to follow up.

The screenshot shows the 'About The Reporting Entity' section of the Oregon Health Authority's Confidential Oregon Morbidity Report form. The form includes the following fields:

- Facility Name** * Organization or Company
- Provider Name** * First Name Last Name
- Submitter Name** * First Name Last Name
- Same as Provider
- Street**
- City State ZIP** OR
- Phone** * ### ### ####
- Email** *

Red boxes highlight the Facility Name, Provider Name, Submitter Name, and Phone fields. A blue box highlights the 'Same as Provider' checkbox. The form also features 'Back' and 'Submit' buttons at the bottom.