

How to Use the K-12 School COVID-19 Reporting Portal (K12RP)

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You can get this document in other languages, large print, braille, or a format you prefer. Contact the Coronavirus Response and Recovery Unit (CRRU) at 503-979-3377 or email <u>CRRU@odhsoha.oregon.gov</u>. We accept all relay calls, or you can dial 711.



How to Use the K-12 School COVID-19 Reporting Portal (K12RP)

To enroll in K-12 School COVID-19 reporting, go to <u>COVID-19 Testing in K-12 Schools</u> Other methods to report COVID-19 cases are located here: <u>The Oregon ELR Project</u>

School Submitter Information

- 1. Select the School's County
- 2. Select the School's District
- 3. Select the **School's Name**

OREGON.GOV	Oregon K-12 Sch	ool COVID-′	19 Reporting Porta	Ú)
	Intentionally reporting false or mis	leading information All Fields Required		nalties.
	ool Submitter Information ts Teams, select "Other" School District Choose School County	~	First Name Last Name	<u>iitter Information</u>
Other	Choose School District Choose School	~	Email Address Phone	
Example School	udent/Staff Information		Testing	Details
Student/Staff First Name Student/Staff Last Name	First Last		BinaxNOW Resu	t OPositive ONegative
Date Of Birth Sex	MM/DD/YYYY		Specimen Collection Dat Has the patient already bee notified of the lab result	
Address City			notified of the lab result Reason for Testing	□ Has Symptoms
State County Phone	ZIP Code	~		
				TCall



School Submitter Information (continued)

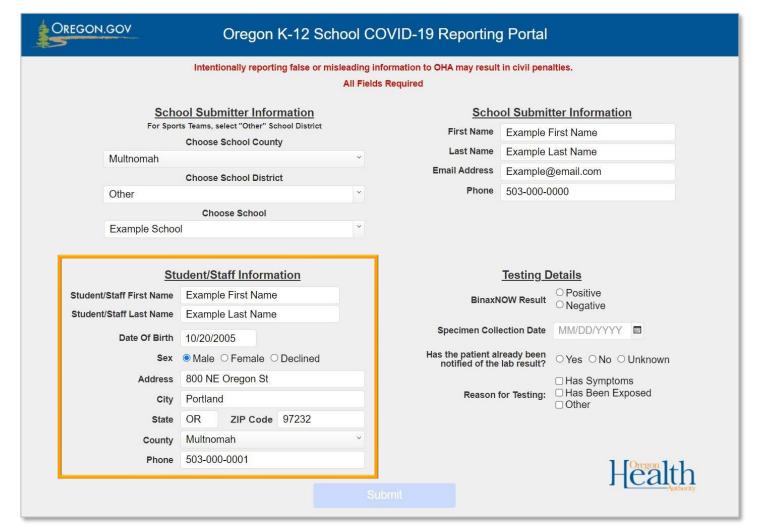
- 1. Enter in Submitter's First Name
- 2. Enter in Submitter's Last Name
- 3. Enter in Submitter's Email Address
- 4. Enter in Submitter's **Phone**

		All Fields Require	ed		
	ool Submitter Information		Scho	ol Submi	tter Information
For Sports Teams, select "Other" School District Choose School County Multnomah Choose School District			First Name Example Fi		irst Name
		→ Last Name Example L	ast Name		
			Email Address Example@email.com		Demail.com
Other		~	Phone	503-000-0	0000
	Choose School	~			
Chudont/Ctoff Eirot Nomo	First				
					OPOSITIVE
Student/Staff First Name Student/Staff Last Name	First Last		Binax	IOW Result	○ Positive ○ Negative
			BinaxM Specimen Coll		
Student/Staff Last Name	Last			ection Date	○ Negative
Student/Staff Last Name Date Of Birth	Last MM/DD/YYYY		Specimen Coll Has the patient al notified of the	ection Date ready been lab result?	 ○ Negative MM/DD/YYYY ■ ○ Yes ○ No ○ Unknown □ Has Symptoms
Student/Staff Last Name Date Of Birth Sex	Last MM/DD/YYYY		Specimen Coll Has the patient al notified of the	ection Date	 ○ Negative MM/DD/YYYY ○ Yes ○ No ○ Unknown
Student/Staff Last Name Date Of Birth Sex Address	Last MM/DD/YYYY		Specimen Coll Has the patient al notified of the	ection Date ready been lab result?	 ○ Negative MM/DD/YYYY ○ Yes ○ No ○ Unknown □ Has Symptoms □ Has Been Exposed
Student/Staff Last Name Date Of Birth Sex Address City	Last MM/DD/YYYY O Male O Female O Declined	×	Specimen Coll Has the patient al notified of the	ection Date ready been lab result?	 ○ Negative MM/DD/YYYY ○ Yes ○ No ○ Unknown □ Has Symptoms □ Has Been Exposed



Student/Staff Information

- 1. Enter in Student/Staff's First Name
- 2. Enter in Student/Staff's Last Name
- Enter in Student/Staff's Date Of Birth NOTE: The Date Of Birth must be in MM/DD/YYYY format.
- 4. Select the Student/Staff's Sex
- 5. Enter in Student/Staff's Address, City, State, ZIP Code, and County
- 6. Enter in Student/Staff's Phone





Testing Details

- Select the BinaxNOW Result NOTE: OHA requires all positive COVID-19 test results to be reported daily.
- 2. Enter in Specimen Collection Date
- 3. Select whether the Student/Staff has already been notified of the lab result
- 4. Select the Reason for Testing
- Review all information from all sections and confirm the information is correct and accurate NOTE: Once you click on Submit, you will not be able to edit your submission. Please review your submission first.
- 6. Click on Submit

OREGON.GOV Oregon K-12 School COVID-19 Reporting Portal			
	Intentionally reporting false or n	sleading information to OHA may result in All Fields Required	n civil penalties.
	School Submitter Information For Sports Teams, select "Other" School District Choose School County	First Name	Example First Name
Multnomah Choose School District		×	Example Last Name Example@email.com
Other	Choose School	~ Phone	503-000-0000
Examp	e School	·	
Student/Staff Fir Student/Staff La			Testing Details © Positive ○ Negative
Date	Of Birth 10/20/2005 Sex	Specimen Collect Has the patient alre	
	sex Male Female Declined address 800 NE Oregon St City Portland	Has the patient alre notified of the la Reason fo	Has Symptoms
	State OR ZIP Code 97232 County Multnomah	×.	
	Phone 503-000-0001		Health
		Submit	Н



Printing the Report for Your Records

- 1. To print the report for your records, click **Yes** in the popup box
- 2. Once you have printed the report, click Done
- 3. To exit or submit another report, click No thanks

OREGON.GOV	Confidential COVID-19 Data Submission Form
Health	
	Processing
	Print Report for your Records □ Do you want to print a copy of this report for your records? You will not be able to retrieve this information after it's been submitted.
	No thanks Yes



Submitting Another File / Confirmation Code

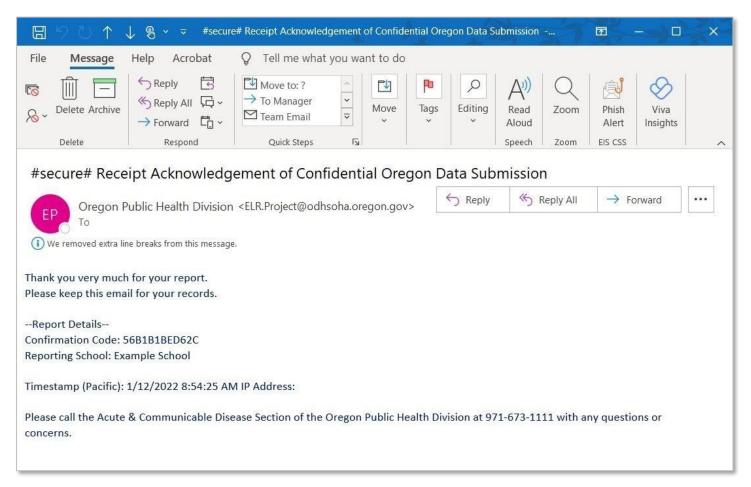
- Keep track of the Confirmation code NOTE: For assistance with your submission, you will need this confirmation code.
- 2. To submit another file, click on Submit Another File
- 3. To exit, close your browser
- 4. Thank you!

OREGON.GOV	Confidential COVID-19 Data Submission Form
Health	
	Thank you for submitting your file. Confirmation code: 56B1B1BED62C A confirmation email will be sent to <u>Example@email.com</u> Submit Another File
	For questions or concerns, contact: Opera.Support@odhsoha.oregon.gov



Email Notification

- Once you have submitted a report, you will receive a secure email with the subject: #secure# Receipt Acknowledgement of Confidential Oregon Data Submission
- This email is automatically sent from <u>ELR.Project@odhsoha.oregon.gov</u> after each submission.
- If you have trouble opening this secure email, please contact <u>Opera.Suppor@odhsoha.oregon.gov</u>





Other Questions?

For any technical assistance, please contact Opera.Suppor@odhsoha.oregon.gov.

Please include the confirmation code of the submission (you can find this code in the secure email that was sent to you after your K12RP submission).

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