

## Opera Release Notes

System Update – Wednesday, August 4, 2021

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8/4/2021

# “Vaccine” Tab Added to the “Contacts” Screen

A “Vaccine” tab has been added to the “Contacts” screen on a Case.

**60001064** CONTACTS

None Elicited  Contact List Summary From Case + Contact Contact Dupe

Labs 1 **Test Test** Disease: Coronavirus Name Age Sex Ref AriasExport Done

eCR 0 Subtype: COVID-19 Test, Test 22 M Ready  X

Clinical Status: Confirmed

Onset: ~4/6/2021

Deceased: [Not Answered]

Treatment DOB: Age: Sex: F

Risks REALD: Race: [unspecified] Sick  Contact has compatible signs/symptoms (or seroconverted)

Followup Ix / Demo Labs / Treatment **Vaccine** Docs ID 601080 Show Person Print FR Create Case

Epilinks Born: Worksite: School: Occupation: Housing: History of Previous Disease  Yes  No  Unknown Query ALERT

Contacts 1 Up to  Yes  No  Unknown + Vaccine

Vaccines 0

Docs OR HOOD RIVER

Letters 0 [Add Phone / Email Info...]

Log Provider: [none added]

Notes 0 Keep Active

Local Epi: Received by LHD: 4/13/21 LHD Completion Date: State Completion Date:

Immunization Count (0 for Coronavirus) Show all vaccines

CDC Supplement

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8/4/2021

# “REAL-D” Questions Updated

The following were updated to the “REAL-D” questions:

- Bolded/emphasized key words on the “Race”, “Language”, and “Disability” tabs
- Added the text **For Spanish Speakers: “¿De dónde es usted?”** on question 1
- Added tooltips to show countries for each REAL-D category

Race
Language
Disability
SOGI

Enter only case self-reported data here. I.e., from interview, NOT from ELR or medical record.

How do you identify your **race, ethnicity, tribal affiliation, country of origin, or ancestry?** ?

Which of the following describes your **racial or ethnic identity** For Spanish Speakers: "¿De dónde es usted?" ✕

**American Indian and Alaska Native** ?

American Indian Member of Tribe?

Alaska Native

Canadian Inuit, Metis, or First Nation

Indigenous Mexican, Central American, or South American

**Hispanic and Latino/a/x** ?

Central American

Mexican

South American

Other Hispanic or Latino/a/x

**Native Hawaiian and Pacific Islander** ?

CHamoru (Chamorro)

Marshallese

Communities of the Micronesian Region

Native Hawaiian

Samoan

Other Pacific Islander

**Asian**

Asian Indian

Cambodian

Chinese

Communities of Myanmar

Filipino/a

Hmong

Japanese

Korean

Laotian

South Asian

Vietnamese

Other Asian

**Middle Eastern/North African** ?

Middle Eastern

North African

African American

Afro-Caribbean

Ethiopian

Somali

Other African (Black)

Other Black

**White** ?

Eastern European

Slavic

Western European

Other White

**Other Categories**

Don't know

Don't want to answer

Other (please list)

Old 'race' values: ?

White

Black

Asian

Pacific Is.

AI/AN

Unknown

Refused

Other

Hispanic

Yes

No

Unknown

Old 'subrace':

<p><b>CHamoru (Chamorro)</b> Mariana Islands (which include Saipan)</p> <p><b>Marshallese</b> Marshall Islands (which include Enewetak, Bikini, Rongelap, Kwajalein, and Majuro)</p> <p><b>Communities of the Micronesian Region</b> Palau (also known as Belau), Guam, Yap, Chuuk, Pohnpei, Kosrae, Nauru, and Kiribati (formerly the Gilbert Islands, and which includes Banaba, formerly Ocean Island).</p>	<p><b>Native Hawaiian</b> Hawaiian Islands</p> <p><b>Samoan</b> Samoan Islands</p> <p><b>Other Pacific Islander</b> Pacific Islander, but another identity that does not fit with categories above.</p>
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8/4/2021

## “REAL-D” Questions Updated (continued)

- When “English” is selected for the first question on the “Language” tab, the remaining questions will not appear
- Answer options for question 4 on the “Language” tab changed:
  - **From** – “Unknown” and “Declined”
  - **To** – “Don’t know” and “Don’t want to answer”
- Answer option for question 5 on the “Language” tab changed:
  - **From** – “Deaf Interpreter for DeafBlind, additional barriers”
  - **To** – “Deaf Interpreter for DeafBlind, additional barriers, or both”
- All answer options on the “Disability” tab changed:
  - **From** – “Unknown” and “Declined”
  - **To** – “Don’t know” and “Don’t want to answer”

Race Language Disability SOGI

For age 5 and up:

What language or languages do you use at home?

English

Race Language Disability SOGI

For age 5 and up:

What language or languages do you use at home?

Spanish

If indicated home language is NOT only English, ask the following questions:

In what language do you want us to communicate in person, on the phone, or virtually with you?

In what language do you want us to write to you?

Do you need or want an interpreter for us to communicate with you?

Yes No **Don't know** Don't want to answer

If you need or want an interpreter, what type of interpreter is preferred?

Spoken language interpreter

American Sign Language interpreter

**Deaf Interpreter for DeafBlind, additional barriers, or both**

Contact sign language (PST) interpreter

Other (please list):

How well do you speak English?

Very Well  Not Well  Unknown

Well  Not at all  Declined

Race Language Disability SOGI

Your answers to the questions below help us find health and service differences among people with disabilities or limitations. Your answers are confidential.

Questions for all ages:

Are you deaf or do you have serious difficulty hearing?

Yes No **Don't know** Don't want to answer

Are you blind or do you have serious difficulty seeing, even when wearing glasses?

Yes No **Don't know** Don't want to answer

Questions for ages 5 and up:

Do you have serious difficulty walking or climbing stairs?

Yes No **Don't know** Don't want to answer

Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering or making decisions?

Yes No **Don't know** Don't want to answer

Do you have difficulty dressing or bathing?

Yes No **Don't know** Don't want to answer

... for ages 5 and up (continued):

Do you have serious difficulty learning how to do things most people your age can learn?

Yes No **Don't know** Don't want to answer

Using your usual (customary) language, do you have serious difficulty communicating, (for example understanding or being understood by others)?

Yes No **Don't know** Don't want to answer

Questions for ages 15 and up:

Because of a physical, mental or emotional condition, do you have serious difficulty doing errands alone such as visiting a doctor's office or shopping?

Yes No **Don't know** Don't want to answer

Do you have serious difficulty with the following: mood, intense feelings, controlling your behavior, or experiencing delusions or hallucinations?

Yes No **Don't know** Don't want to answer

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