

Case Surveillance: Coordinators Meeting Update

May 7, 2015

Presenter: Iris Chittams

Coordinator: Karen Robinson

Reporting of Confirmed Positive cases

- All reports of positive cases should be sent on a weekly basis
- Send reports by traceable mail (UPS, Fed EX, etc)
- Send completed report to the following addressee:

Ms. Iris Chittams

Department of Health

50 East State Street, 4th Floor

Trenton, NJ 08625

(609) 984-5940

Reporting a positive case

- Print the EvaluationWeb Form
- Place client identifying information on the EvaluationWeb Form “Notes” section
 - Name
 - Date of Birth
 - Address
 - Telephone Number

Reporting Notes Reminders

- **If**, a screening test only is performed by the CTS and a referral for confirmation is made
 - The CTS must obtain final results from the referral site and record the results of the second test in EvaluationWeb.
- **If**, a confirmation test was not offered, by the CTS
 - The CTS must indicate that information in the notes section of the EvaluationWeb form and indicate why follow-up was not performed.

Surveillance processes:

- EvaluationWeb Form types received
 - Actual EvaluationWeb form
 - Photocopy of printed EvaluationWeb Forms
 - EvaluationWeb printout
 - Previous edition from 2012-2014*

*Facilities should submit forms using the 2015 current version

Evaluation Web Form Part 3

PART THREE

Enter or adhere form ID												
HIV incidence (if required by health department)												
Date the client reported information						M	M	D	D	Y	Y	Y
Has the client ever had a previous positive HIV test?												
<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input type="checkbox"/> Declined												
Date of first positive HIV test						M	M	D	D	Y	Y	Y
Has the client ever had a negative HIV test?												
<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Don't Know <input type="checkbox"/> Declined												
Date of last negative HIV test						M	M	D	D	Y	Y	Y
Number of negative HIV tests within 24 months before the current (or first positive) HIV test			#	#	#	<input type="checkbox"/> Don't Know <input type="checkbox"/> Declined						
Has the client used or is client currently using antiretroviral medication (ARV)?												
<input type="checkbox"/> No <input type="checkbox"/> Yes → <input type="checkbox"/> Don't Know <input type="checkbox"/> Declined												
Specify antiretroviral medication:												
1 # #			3 # #			(see codes from right-hand column)						
2 # #			4 # #									
Date ARV began						M	M	D	D	Y	Y	Y
Date of last ARV use						M	M	D	D	Y	Y	Y

22	Agenase (amprenavir)
30	Aplisyn (dapsone, TPV)
32	Atripla (efavirenz/emtricitabine/zidovudine DF)
24	Combivir (lamivudine/zidovudine, 3TC/AZT)
38	Complanet (emtricitabine, rilpivirine/zidovudine DF, FTC/RPV/TDF)
06	Crixivan (indinavir, IDV)
37	Edurant (rilpivirine, RPV)
01	Emtriva (emtricitabine, FTC)
03	Epivir (lamivudine, 3TC)
20	Epikoin (abacavir/lamivudine, ABC/3TC)
25	Fortovase (saquinavir, SQV)
10	Fuzicon (enfuvirtide, T20)
19	Hepsera (adefovir)
02	Hivid (zalcitabine, ddC)
23	Hydroxyurea
18	Inviase (saquinavir_SQV)
34	Intelligence (etravirine)
36	Isumbra (raltegravir)
16	Kaletra (lopinavir, ritonavir)
31	Lesbia (fosamprenavir, 900)
07	Norvir (ritonavir, RTV)
33	Prezista (darunavir, DRV)
09	Rescriptor (delamanid, DLY)
26	Retrovir (zidovudine, ZDV, AZT)
15	Reyatac (atazanavir, ATV)
00	Saqinavir (Fortovase, Inviase)
35	Selzentry (maraviroc)
39	Stribild (elvitegravir/cobicistat/zidovudine/emtricitabine)
21	Sustiva (efavirenz, EFV)
13	Triostvir (abacavir/lamivudine/zidovudine, ABC/3TC, AZT)
27	Truvada (tenofovir DF/emtricitabine, TDF/FTC)
04	Videx (didanosine, ddI)
14	Videx EC (didanosine, ddI)
17	Virocept (raltegravir, RPV)
05	Viramate (nephelapine, NVP)
12	Viread (tenofovir DF, TDF)
08	Zerit (stavudine, d4T)
20	Zigen (abacavir, ABC)
00	Other
99	Unspecified

Notes:

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Surveillance processing:

- Received EvaluationWeb reports are reviewed for completeness and for errors
 - Facilities are called to complete missing information
 - Facilities are called to correct errors entered on the report
- Checked for both rapid test results
 - Completed reports should contain both rapid test results
- Client is checked in the Surveillance database
 - Newly diagnosed clients are entered
 - Existing clients are entered/updated
 - New facility reports are entered

Surveillance processing:

- Procedure for completed surveillance processing of EvaluationWeb forms is as follows:
 - Completed data is Entered into Surveillance database with corresponding NJDOH number
 - De-identified forms are copied and submitted to Prevention Unit Liaison