

ENTRY OF EVENTS INTO NC EDSS

Local Health Directors are required to use NC EDSS to report cases of disease pursuant to **G.S. 130A-135 through 139 and 10A NCAC 41A .0101e** to the state. LHDs may also utilize NC EDSS to document any investigation of a reportable disease that does not meet criteria for reporting. This may be desirable to assist in determining the burden of disease investigation and providing a central secure place for recording information as the investigation proceeds.

Cases that are reported to a LHD that are the jurisdiction of another county or state to report should be entered into NC EDSS with all available information. Those belonging to another county should be reassigned to that county; those belonging to another state should be assigned to the state disease registrar designated as the responsibility of another state or country to report.

Users are expected to make a conscientious effort to obtain all information requested in the Communicable Disease Part 2 form at the time of investigation. Dependent upon the disease all or part of the information on Communicable Disease Part 2 may be required to be entered into NC EDSS. Each Communicable Disease Part 2 indicates the data that must be entered. Any Part 2 information not entered into NC EDSS should be retained for one year from NC EDSS event assignment to the state. If the information is needed by the state Subject Matter Expert (SME) in the process of reporting the event to CDC, the state will request the entry of the additional information.

The following general guidance is provided for entry of data into NC EDSS:

- In situations where the inability to contact, or refusal of a patient to cooperate, prevents gathering information, the user should document the failure in the investigation trail. LHDs should follow local policy on what constitutes inability to contact a patient, for example *“Called patient 2 times, sent certified letter”*.
- When providers do not cooperate with an investigation, document number of times contacted and supporting statements from the provider, i.e. “I sent in the report, that’s all I have to do.” Ensure the providers name and contact information is documented in the event so they may be contacted by the state SME if needed.
- Users should leave a question blank if a question was not asked.
- When a question was asked but the patient or provider did not know the answer, the user should choose unknown as the answer.
- Users should contact the appropriate SME for the disease or the on call epidemiologist whenever they feel they need additional guidance investigating a case.
- Users should contact the help desk when requiring assistance entering an event into NC EDSS.