

Rabies on iPHIS – Quick Reference Guidelines for Data Entry

The Ministry of Health requires reports of incidents where Rabies post-exposure prophylaxis (RPEP) has been administered. A consistent approach to reporting is necessary to be able to interpret information in a reliable way. Beginning August 1, 2010 all incidents with exposure dates of January 1, 2010 onward for which RPEP has been administered are to be entered into iPHIS. It is however, the decision of the health authority if they want to enter all other animal bite investigations.

The Health Authority who provides follow-up of the individual will report the case, regardless of residence of the case. If follow-up of the animal is being done by another health authority, details of the animal (including the Unique Animal ID Number) will be shared with the health authority following the case so all required details of the animal can be completed in the case record. Refer to Animal Services Incident Number in the charts below for details about generating Unique Animal ID Numbers.

Note – Fields that are shaded in grey are required fields for reporting incidents where RPEP was administered to the Ministry.

Demographic information is for the individual who has been provided RPEP or it is being considered for.

Client Info

PHN	This is the Unique Individual Identification Number and must be reported
Family name - <i>iPHIS mandatory field</i>	Enter details
First name – <i>iPHIS mandatory field</i>	
Birth Date - <i>iPHIS mandatory field</i>	
Gender - <i>iPHIS mandatory field</i>	
Address/Telephone number	Not required by the Ministry, but for case management you may want to include a summary of the incident here

Rabies is not entered as a CD case – this is reserved for Human Rabies Cases, not Rabies incident investigations.

To get to the screen for entering Rabies incidents:

- Create or select a client in the demographic screen
- Click on the CD hotlink on the side bar
- Choose “Client Rabies Incident Summary”

If not previously entered, enter as “New Incident”

Incident:

Reported Date	The date the health region started the follow-up
General Comments	Not required by the Ministry, but for case management you may want to include a summary of the incident here. Please indicate here if the case was referred out of province for completion of series.
Status - <i>iPHIS mandatory field</i>	Open: if follow-up is being done. Closed: Once follow-up is complete Unresolved: if lost to follow-up (cannot reach the client to finish follow-up)

Incident – Client Details:

Attending Physician	Not required by the Ministry, but for case management you may want to include
Client Address at Time of Incident	Not required by the Ministry, but for case management you may want to include
Bleeding/Breaks to Skin	Choose as appropriate from drop down
Previously Immunized	Choose as appropriate from drop down: Yes – only for those who completed a series. No – for those who have not had a series or for those where a series was not completed Unknown -
Immunization Date	Only one date can be entered. Only include for those where Previously Immunized response was YES The following is the criteria for what date to enter for those who completed a series: <ul style="list-style-type: none"> • Choose actual date of last dose if known, OR • Choose 1st day of the month (for the appropriate year) if this is known, OR • Choose the 1st day of Jan for the appropriate year if month unknown.
Vaccine Type	Include the type of vaccine that the client has received previously – Immune Globulin is irrelevant in this situation as it has no bearing on post-exposure immunization requirements whereas the vaccine if given as pre-exposure or as a completed post-exposure series will eliminate the need for RIG and will reduce the number of additional doses of HDCV.
Client Weight at time of incident	Important for determining RIG dosage. Include for case management
Prophylaxis Indicated	Choose as appropriate from drop down – Yes – if RPEP is recommended No – if RPEP is not recommended Unknown – not applicable in this instance

Save Changes

Exposure:

Date of Exposure	The date the client was exposed (choose the first date if ongoing exposure). If ongoing exposure to a family pet that tested positive for rabies, choose the date that the animal's behaviour/health started to change.
Place of Exposure	Choose the name of the town/First Nations community or the name of the RM – this is important for tracking rabies incidents in the province and will be mapped along with rabid animal map.
Proximity to River/Rural	Not required by Ministry -
Details	Not required by the Ministry, but for case management you may want to include additional information about the exposure here
Type of Exposure	Choose as appropriate from drop down (see options below). Definitions on accompanying page. Note: Occupational Exposure options should be used if the exposure was due to an occupational incident. This would involve veterinarians, conservation officers, etc. Choose the appropriate one based on the type of exposure. Bite; Scratch; Saliva on mucous membranes; Saliva on existing lesion; Saliva on intact skin; Occupational Exposure Bite; Occupational Exposure Scratch; Occupational Exposure Saliva on mucous membranes; Occupational Exposure Saliva on existing lesion; Occupational Exposure Saliva on intact skin; No known contact
Wound location	Choose as appropriate from drop down Head/Neck; Face; Arm; Hand/finger; Torso; Leg; Foot/toe; Mucosa; Unknown
Wound Description	Not required by the Ministry, but for local follow-up/case management you may want to include more details here.

Animal – Owner Info

Owner information is not required by the Ministry, except in instances where the owner is out of province and we have to forward the information onto another jurisdiction so follow-up can be provided. Data entry of owner information is a regional decision

E-mail Communication Requirement:

Owner information is to be provided to the Ministry when the owner will be followed up in another jurisdiction (province). This will best be communicated via e-mail to the ministry at cdc@health.gov.sk.ca rather than including in iPHIS. Details that must be provided to facilitate follow-up include:

- Name of owner
- Phone numbers

- Address
- Details of the animal (name, type, etc)
- Summary of the incident
- Contact number of the individual following the victim so the animal investigator can relay animal observation results directly.

NOTE: E-mail from within the Global System is considered secure. If e-mail communication is from outside global, the message should be encrypted or it can be sent to the confidential fax at (306)787-9576.

Animal - Animal Info

Animal Species	Choose as appropriate from drop down (see options below) Dog; Cat; Bat; Cow; Horse; Hog; Skunk; Raccoon; Fox; Coyote; Ferret; Mouse/gopher; Hamster; Other; Unknown
Animal Type	Important for assessing biting incidents in Saskatchewan Pet (indoor); Pet (outdoor); Pet (Indoor/Outdoor); Outdoor Farm Animal; Wild; Stray; Unknown
Animal Description	Not required by the Ministry, but for case management you may want to include information here. An example of when this might be used is when it is a stray/unknown and you include a physical description. Please provide a note in this field if there were multiple victims involved in this incident.
Animal Vaccinated	Choose as appropriate from drop down
Vaccination Date	Not required by the Ministry, but for case management you may want to include this information
Animal Healthy	Choose as appropriate from drop down based on the health of the animal at the time of the incident. If "NO", complete the symptoms field.
Observation Following Exposure	Choose as appropriate from drop down. – this is an important field for reporting as is used for filtering of some reports
Brain sent for testing	Choose as appropriate from drop down. Will be used in generating reports
Date sent for testing	Indicate the date the specimen was sent for testing – Not required by the Ministry
FA Result	The preliminary result recorded here.
FA Result Date	Date the results were reported to the RHA/FN jurisdiction
Tissue Culture	Enter for complete record.
Rabies Status	Not required by the Ministry, but follow these guidelines for use of this field. Choose as appropriate from drop down (see options below) Positive – only to be used for those confirmed positive Negative – use for animals who were well after observation period or whose results returned as negative Unknown – use for escaped animals or those who were destroyed and

	not available for testing
Animal Retention Method	Not required by the Ministry, but for case management you may want to include information here.
Retention Method Comments	Not required by the Ministry, but for case management you may want to include information here.
Retention Method From ... To	Dates animal is to be under observation for (start date and end date) Not required by the Ministry, but for case management you may want to include information here.
Animal Retention Results	Choose as appropriate from drop down based on the status of the animal during/after the observation period. This field is only mandatory for reporting when observation following exposure was documented as “YES” Became ill; Released; Natural Death; Destroyed;
Family Vet Name	Not required by the Ministry, but for case management you may want to include information here.
Vet Phone	Not required by the Ministry, but for case management you may want to include information here.
Animal Services Notified	Choose as appropriate from drop down - Not required by the Ministry, but for case management you may want to include information here.
Animal Services Incident Number	<p>This field will be used for the Unique Animal ID Number. This must be used in each case report on iPHIS that involves the same animal in the following format (no spaces included in the sequence): <i><health region 3-4 letter acronym>-<four digit calendar year>-<R to indicate Rabies>-<three digit sequential number beginning at 001></i> (e.g. <i>SCHR-2007-R-001</i>)</p> <p>Rationale: this is an important element to be incorporated as it helps to determine the number of animals involved in incidents - for example it would be misleading if the same animal that rabies results were positive for was counted 5 times because 5 people were exposed the family pet.</p> <p>The region where the animal is being followed will generate the Unique Animal ID Number. Animal information must be included in the victim’s iPHIS record therefore, communication between investigators is important for quality of data and prevention of duplicate reporting.</p> <p>If there are multiple animals and one victim, only one animal will be documented. Additional details should be added to the Animal Description field.</p> <p>NOTE – a new number will be issued for animals in new exposures (if the same animal bites again in 2011, a new number would be issued for this animal)</p>

Symptoms - <i>iPHIS mandatory field</i>	Choose as appropriate from drop down if “animal healthy” response was NO
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Save changes

Immunization/TST

Immunization Date - <i>iPHIS mandatory field</i>	Date immunization provided. It is best practice and provides a complete record when all doses of RPEP (immune globulin and vaccine) are documented. This is required for analysis of RPEP in Saskatchewan. NOTE: The Saskatchewan Immunization Management System (SIMS) houses the complete immunization record for individuals and entry into SIMS should be considered.
Provider/ Personnel - <i>iPHIS mandatory field</i>	Not required by the Ministry, but is a mandatory field for data entry. We recommend choosing "Public Health Nurse", "Registered Nurse" or "Nurse Practitioner" (or the ordering physician) in this drop-down and entering the detailed information regarding who administered it in the comments field. This will ensure there are no delays in being able to enter the information while waiting for an individuals name to be added to the provider list by HISC. Maintaining the provider list will become cumbersome with staff turnover at the regional level. To get the provider field to pre-populate with RN, PHN or NP, choose “Public Health Nurse” in the <i>professional status filter field</i> and click on filter. These options are linked with this professional status and will appear as options. Choose as appropriate and include individual details (if required by regional policy) in the comments field.
Where Administered	Not required by the Ministry, but for case management you may want to include information here.
Agent Formulary	Not required by the Ministry,
Agent - <i>iPHIS mandatory field</i>	Choose as appropriate from drop down.
Lot Number/Expiry - <i>iPHIS mandatory field</i>	This is a drop-down list and must be pre-populated by HISC. A process has been established at the Ministry to try to ensure that when new Lot Numbers for the vaccine is received, it will be forwarded to HISC for inclusion in the drop-down list. If not in the drop-down, forward the information to hiscservicedesk@health.gov.sk.ca “Unknown” has been included as an option for instances where the series has been started in another province/country and the information will not be available. This option should be used infrequently.
Site - <i>iPHIS mandatory field</i>	Choose as appropriate from drop down.
Dosage/Dosage	Not required by the Ministry.

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Units	
Dose Number	All doses must be entered for a complete record. Each dose will be numbered sequentially in the series.
Informed Consent - <i>iPHIS mandatory field</i>	Mandatory field for data entry.
Reason for Immunization	Choose as appropriate from drop down.

Save changes