INSTRUCTIONS FOR SURVEILLANCE FORM

MHSU-6684 - CORONAVIRUS DISEASE 2019 (COVID-19)

CONTACT INVESTIGATION FORM
(FOR CONTACTS TO OUT-OF-PROVINCE CASES OR CASE UNKNOWN, OR FOR CONTACT REFERRALS BETWEEN REGIONS OR OUTSIDE PROVINCE)

TO MEET THE HEALTH NEEDS OF INDIVIDUALS, FAMILIES AND THEIR COMMUNITIES BY LEADING A SUSTAINABLE, PUBLICLY ADMINISTERED HEALTH SYSTEM THAT PROMOTES WELL-BEING AND PROVIDES THE RIGHT CARE, IN THE RIGHT PLACE, AT THE RIGHT TIME.

— MANITOBA HEALTH, SENIORS AND ACTIVE LIVING

Epidemiology & Surveillance
Public Health Branch
Public Health and Primary Health Care Division
Manitoba Health, Seniors and Active Living

Publication date: April 2, 2020

Let us know what you think. We appreciate your feedback! If you would like to comment of any aspects of this document please send an email to: outbreak@gov.mb.ca.
BACKGROUND

These instructions are intended to be used as a reference for Manitoba providers completing the MHSU-6684 (2020-04-02) – COVID-19 Contact Investigation Form.

This document provides form-specific instructions for completion, including some guidance for documentation in the Public Health Information Management System (PHIMS). Overall guidance on completion of surveillance forms is provided in the USER GUIDE FOR COMPLETION OF SURVEILLANCE FORMS FOR REPORTABLE DISEASES, available at http://www.gov.mb.ca/health/publichealth/surveillance/forms.html.

Please refer to Interim Public Health Measures document for additional information on contact definitions, timeframes for investigation, and contact management recommendations for COVID-19.

SUBMISSION OF FORMS TO THE SURVEILLANCE UNIT

INVESTIGATION (MHSU-6684) CONTACT FORMS SHOULD BE COMPLETED AND FAXED TO THE SURVEILLANCE UNIT CONFIDENTIAL FAX 204-948-3044 WITHIN 2 BUSINESS DAYS OF THE INTERVIEW WITH THE CONTACT.

Forms can also be mailed to:

- Surveillance Unit
  Manitoba Health, Seniors and Active Living
  4th floor – 300 Carlton Street
  Winnipeg, Manitoba R3B 3M9

Surveillance Unit’s General Line: 204-788-6736

If you have any questions or concerns about the reportable diseases or conditions or you need to speak with a Medical Officer of Health, please call 204-788-8666 anytime (24/7).
FORM-SPECIFIC GUIDANCE

Overall guidance on completion of surveillance forms is provided in the USER GUIDE FOR COMPLETION OF SURVEILLANCE FORMS FOR REPORTABLE DISEASES, which contains definitions and guidance for all data elements.


The following tables provide instructions of specific relevance to this form.

For users of the Public Health Information Management System (PHIMS), “breadcrumbs” (located at the top right hand corner of sections) provide guidance on where to navigate in PHIMS to enter the information. E.g. subject>client details>personal information.

This form should be used for contacts to out-of-province cases or case unknown, or for contact referrals between regions. For the most up to date provincial public health guidance relating to COVID-19, refer to the Interim Public Health Measures document.

FORM HEADER

For contacts to out-of-province cases, or cases unknown, the following identifying information will not be available (check off: “Case not identified”). The fields remain on the form in the event contact forms are used in cases where regions are transferring contacts between one another.

<table>
<thead>
<tr>
<th>Data Element</th>
<th>Critical Field</th>
<th>Instructions on Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Accession number; Additional accession numbers</td>
<td>*</td>
<td>The unique identifying number from the case’s positive laboratory report to identify the case that named this contact. The case accession number can be found on the header of the case investigation form. If the case has already been reported, the case investigation ID may be written on the contact form when referred out for investigation. If the identity of the case is unknown, please check “case not identified”. It is important to identify the case where possible, as critical epidemiologic information and case management information from the case’s record may be missing if the contact is not associated to the case.</td>
</tr>
<tr>
<td>Case specimen collection date</td>
<td></td>
<td>The specimen collection date of the first positive specimen from the case. This provides information on when the case’s infection was diagnosed. This is particularly important if the contact investigator does not have access to case information.</td>
</tr>
<tr>
<td>Transmission Event ID</td>
<td></td>
<td>If the contact has already been reported to Manitoba Health but the investigation was not complete (i.e. only the first half of the form was completed), the transmission event ID will be written on the investigation form when referred to allow easy identification of the investigation record. Please complete either the case accession number/case investigation ID or the transmission event ID, as well as</td>
</tr>
</tbody>
</table>
INSTRUCTIONS FOR COMPLETION OF SURVEILLANCE FORM MHSU-6684

Contact identifiers on the header of page 2 and 3 to ensure the correct investigation and person is identified if pages of the form are separated. If the client cannot be identified, or if the investigation cannot be identified, the client may exist as an “UNKNOWN” contact in a case transmission event in PHIMS, where some identifying information was recorded.

SECTION I CONTACT IDENTIFICATION

<table>
<thead>
<tr>
<th>Data Element</th>
<th>Critical Field</th>
<th>Instructions on use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Box 1-15</td>
<td></td>
<td>PERSONAL CONTACT DETAILS</td>
</tr>
</tbody>
</table>

This information must be completed and accurate after client has been initially contacted. The integrity of this information is important so that clients can be found in PHIMS, and the call centre performing daily symptom monitoring is able to start and continue follow-up. Ensure phone contact information is available.

SECTION V– ACQUISITION EXPOSURE (EXPOSURE TO INFECTION)

Indicate the setting where the contact was most likely exposed to the case during the period of communicability. Indicate if unknown.

<table>
<thead>
<tr>
<th>Data Element</th>
<th>Critical Field</th>
<th>Instructions on Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Box 20, 21, 22, 23</td>
<td></td>
<td>Indicate if exposure is through:</td>
</tr>
</tbody>
</table>

- Travel or Community contact setting
- If community contact setting, indicate if this is a household contact setting or other close non-household contact setting (e.g., workplace)

PHIMS data entry for travel-related exposures:

- Exposure name = Transportation Type (Cruise, Plane, Conference/Event, Accommodation)
  - e.g. “Plane”
- Acquisition start date = exposure start date
- Acquisition end date = exposure end date
- Location Name = Remaining information, as per form, dividing field with semi-colon (;)
  - e.g., “Air Canada AC492; Toronto; Winnipeg; 12D, 2020-03-10; 2020-03-10; Sat next to sick person”
INSTRUCTIONS FOR COMPLETION OF SURVEILLANCE FORM MHSU-6684

- Setting Type = Travel
- Setting = Choose applicable option

PHIMS data entry for **household**-related exposures:
- Exposure name = Household
- Acquisition start date = exposure start date
- Acquisition end date = exposure end date
- Location Name = Remaining information, as per form, dividing field with semi-colon (;)
  - e.g., “Home; 300 Carlton Street”
- Setting Type = Community Contact
- Setting = Household

PHIMS data entry for **close, non-household** exposures:
- Exposure name = Specify as appropriate
  - e.g., “Workplace”
- Acquisition start date = exposure start date
- Acquisition end date = exposure end date
- Location Name = Remaining information, as per form, dividing field was semi-colon (;)
  - e.g., “Workplace; 2020-03-04; Manitoba Health; 300 Carlton”
- Setting Type = Type of Community Contact
- Setting = Close non-household

- In the case of a travel related exposure, use table below to provide details on travel. Please fill in all fields, as information will be used for further contact tracing purposes. Regions are responsible for ensuring information is verified (i.e., flight numbers, routes).

### VI – INTERVENTIONS

Indicate which interventions have been put into place for the contact. When interventions overlap, such as quarantine and active symptom monitoring – include start and end dates for both interventions.

<table>
<thead>
<tr>
<th>Data Element</th>
<th>Critical Field</th>
<th>Instructions on Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Box 24, 25</td>
<td>*</td>
<td>Isolation*</td>
</tr>
</tbody>
</table>

MHSU-6684-INSTRUCTIONS
INSTRUCTIONS FOR COMPLETION OF SURVEILLANCE FORM MHSU-6684

Provide details of isolation intervention. Include intervention start date and end dates. This is crucial so users and call centre staff know when to end symptom monitoring daily calls.

Select the type of isolation:
- Facility isolation = isolation in hospital, long-term care facility or other
- Home isolation = isolation at place of residence
- Self isolation (other location) = isolation at alternate location (e.g., hotel)

For PHIMS users, active daily monitoring follow-up events can be documented for isolation. Once the intervention type is selected, users can add follow-up events. For each event, users can select the outcome – e.g., no symptoms, symptoms – and keep a record of each event.

Disposition
This indicates if the region will continue to do daily monitoring of the client, or if they would like this transferred to the call centre (after the initial call).

PHIMS data entry:
- The Disposition is found in “Investigation Information”. It should be documented in the overall disposition of the investigation, not the disposition of the Isolation intervention.
- The Intervention should be added under “Treatment and Intervention”.

* For the purposes of PHIMS standardization and to match commonly used language in this response, the Isolation intervention is used. However, this is not true “isolation” as the person is not sick.

| Box 26, 27 | Intervention start date, intervention end date | Document intervention start and end dates. |
| Box 28 | Address during isolation | If client is staying at an alternate address during isolation, include this address. PHIMS data entry: For “Address during isolation”, add this as a Temporary address. The effective dates should be the same as the isolation start and end dates. |