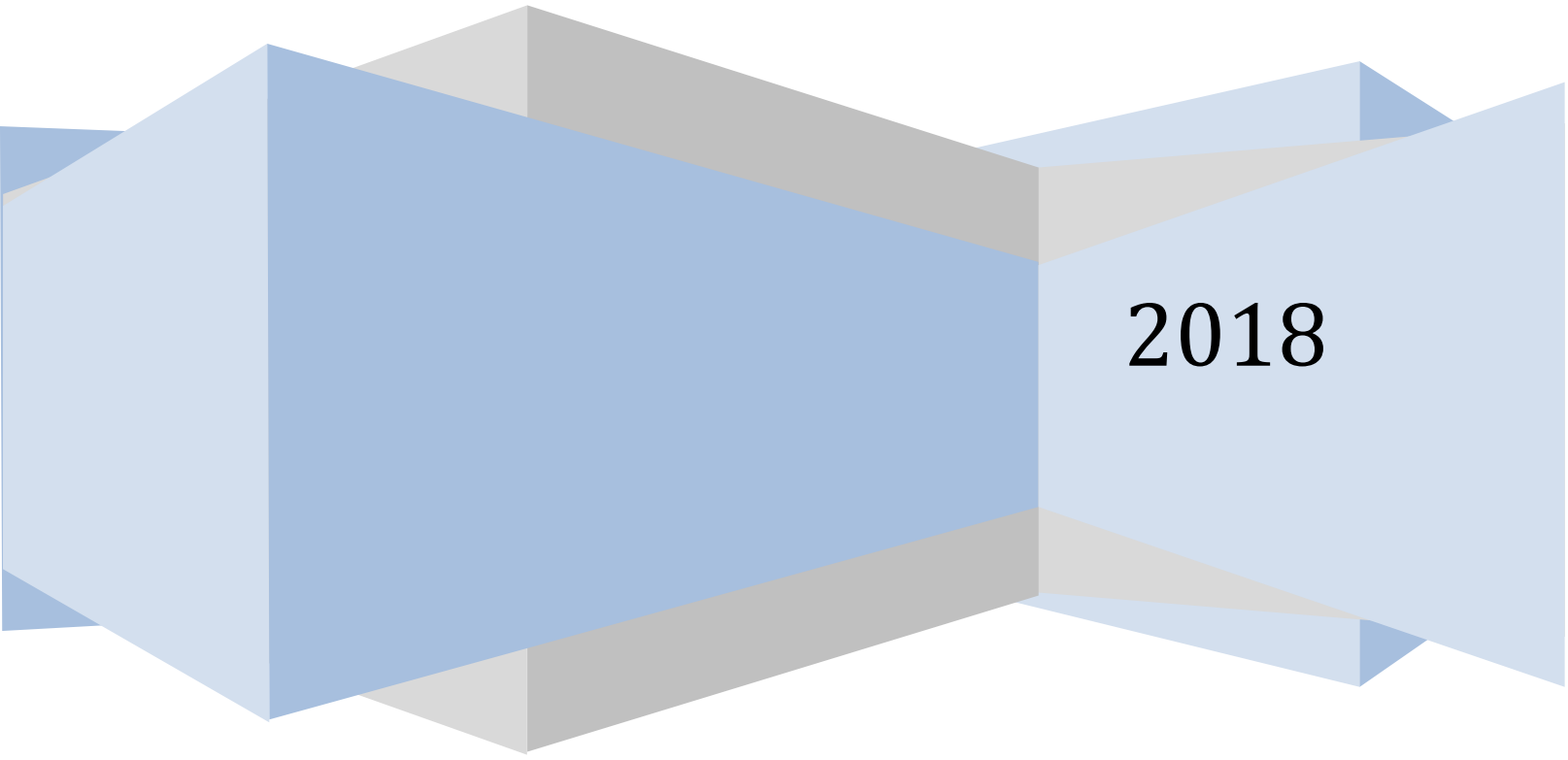


Washington Disease Reporting System

Lead Instruction Manual

Washington State Department of Health
Childhood Lead Poisoning Prevention Program Instruction Manual



2018

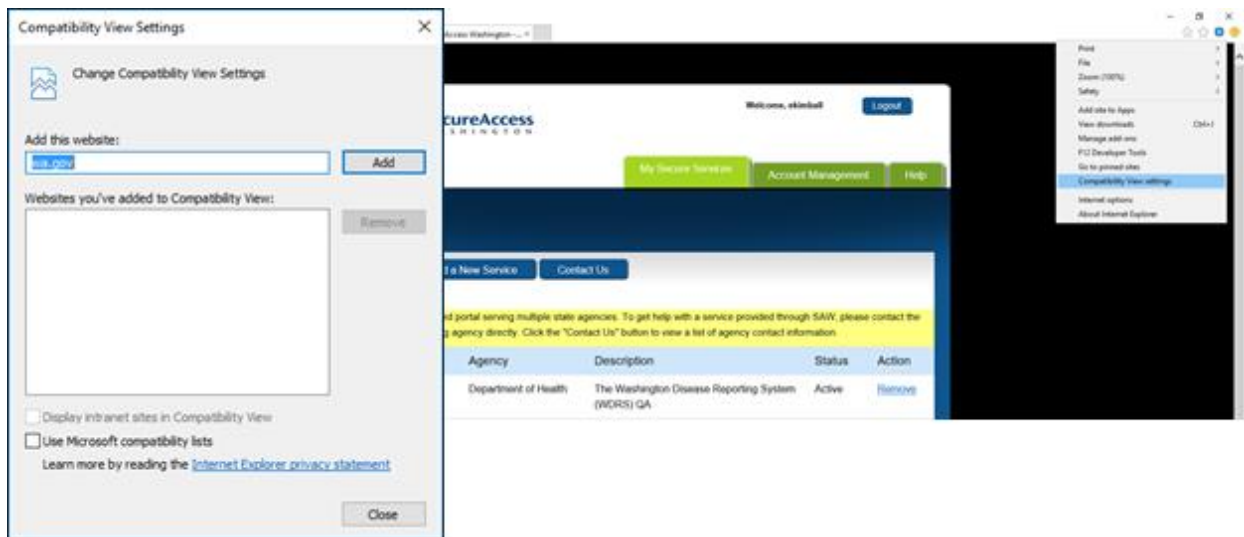
Questions?

Contact the Washington State Department of Health Lead Program
Email lead@doh.wa.gov, Phone: (360) 236-4280



Getting Started

The Washington Disease Reporting System (WDRS) Blood Lead Disease module is used to review and manage cases of Childhood Lead Poisoning. When logging into SAW, adjust your **Compatibility View settings** in Internet Explorer to avoid WDRS freezing issues by clicking on the 'Tools' icon on the top right hand corner of the page. Select **Compatibility View settings** from the dropdown menu and a pop-up menu will appear. Select **wa.gov** from the 'Add this website' window and click on the 'Add' button to drop the website down to the 'Websites you've added to Compatibility View' field. Click the 'Close' button and continue to log into SAW as normal.



Once you are logged into WDRS through SAW, search for a patient or create a new patient record from the WDRS Home screen. For guidance on how to **Create a New Event (Patient Record)**, refer to the general WDRS Reference Guide. All Lead investigations will be created and initiated by DOH and then assigned to the LHJ Accountable County.

Washington Disease Reporting System WDRS Instance 4 (Lead) Build 6.0.3.0 Project-6

Enter Case ID or Search Term... Search Elizabeth Kimball

Alerts and Notifications

Recent Records
No recent cases to display

Workflows

Workflow Queue	Events	Assigned
Lead Child elevated result on open event	0	0
Lead Child non elevated result on open event	0	0
My Open Tasks	0	0
My Overdue Tasks	0	0
Open Tasks Created by Me	0	0
Overdue Tasks Created by Me	0	0

Tasks
No tasks to display

Quick Links

Welcome To Washington Disease Reporting System WDRS Instance 4 (Lead) Build 6.0.3.0 Project 6

Have comments or questions? Contact us:

Business Area	Phone	Email
Tuberculosis	360-236-3443	tbervices@doh.wa.gov
STD (Surveillance and HW/STD Partner Services)	360-236-3445	STD_Surveillance@doh.wa.gov
HIV Surveillance	360-236-3427	HIV_Surveillance@doh.wa.gov
Hepatitis B and D	206-418-5500	CommDisEpi@doh.wa.gov
Hepatitis C	360-236-3390	hepatitis@doh.wa.gov
General Communicable Diseases	206-418-5500	CommDisEpi@doh.wa.gov
Blood Lead	360-236-4280	lead@doh.wa.gov
WDRS Administration Office	360-236-4229	wdrs_community@doh.wa.gov

Calendar

Manage appointments

Help Desk

DOH Service Central: 360-236-4357 or ServiceCentral@doh.wa.gov

Once you have found a patient event (patient record), the **Event Summary** screen will be displayed. At the bottom of the page, there is an **Event Data** tab with a series of **Question Packages** to add information about the Lead disease case including: **Administrative, Demographics, Housing, and Exposure**. Disregard the **CDC Notification** Question Package, which will be used by the DOH Blood Lead Program. To open a Question Package, double click on the Question Package name or single click to highlight the name and click on the 'View Question Package' button at the bottom of the list.

Event Summary

Basic Information

Event ID:	100000000
Disease:	Lead child
Person:	Training Example ()
Dates:	Create Date: 03/12/2018
Type:	Interactive
Investigation Status:	Open (Change to Closed)
Linked Events/Contacts:	0 linked event(s)/contact(s) (View)
Linked Exposure Sites:	0 linked exposure site(s) (View)
Attachments:	0 attachment(s) (Add)
Notices:	General Notifications (1) Vital Status: Alive

[Edit Event Properties](#) [Copy Event](#)

[Event Data](#) [Lab Results](#) [Concerns](#) [Persons](#) [Tasks](#) [Surveys](#) [Calendar](#) [Event Properties](#) [Event History](#)

Question Packages

Question Package	Person	Last Update
Administrative	Training Example	03/12/2018
Demographics	Training Example	03/12/2018
Housing	Training Example	03/12/2018
Exposure	Training Example	03/12/2018
CDC Notification	Training Example	03/12/2018

[View Question Package](#) Wizards [View Wizard](#)

In each question package, any question marked by an asterisk (*) indicates a RVCT reporting field that must be completed before a case is closed. Until each of these fields is complete, the status in

each question package will remain 'incomplete.' All RVCT required fields are captured in the Wizard tool.

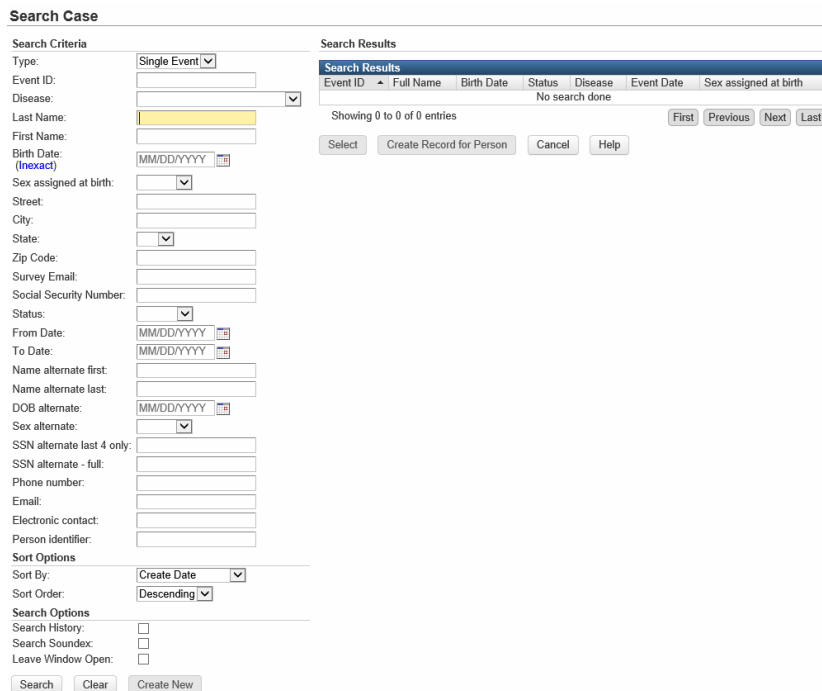
Answer questions in order, from the top to bottom of the page. Some questions have additional drop down questions that may not be visible until you select and answer the question in view.

Please note: the WDRS system will automatically time out due to inactivity after 20 minutes. Be sure to save the date you input in each question package by either clicking on the 'Save and Stay' button or 'Save' button (this takes you back to the **Event Summary** screen).

Additionally, some grayed out fields do not allow changes to be made. If changes to these fields are needed, make the change on the page where the information was originally entered. For example, refer to the 'Persons' tab on the **Event Summary** page to add addresses, or change vital demographics. Some grayed out fields can only be changed by Washington State Department of Health (DOH) Lead Program. Refer to the WDRS Reference Guide for more details.

Search for Event

To search for an event, click the magnifying glass  icon. The following pop-up will appear to begin the search:



Search Case

Search Criteria

Type:

Event ID:

Disease:

Last Name:

First Name:

Birth Date:

Sex assigned at birth:

Street:

City:

State:

Zip Code:

Survey Email:

Social Security Number:

Status:

From Date:

To Date:

Name alternate first:

Name alternate last:

DOB alternate:

Sex alternate:

SSN alternate last 4 only:

SSN alternate - full:

Phone number:

Email:

Electronic contact:

Person Identifier:

Sort Options

Sort By:

Sort Order:

Search Options

Search History:

Search Soundex:

Leave Window Open:

Search Results

Event ID	Full Name	Birth Date	Status	Disease	Event Date	Sex assigned at birth
No search done						

Showing 0 to 0 of 0 entries

Enter known patient information and select the Search button at the bottom of the window. If there are matches, they should appear to the right in the "Search Results" section. If you are unsure of spelling you can use the 'wildcard function,' by enter the first couple letters of the word you are searching for followed by an asterisk (e.g. for a search of the Last Name 'Example' you could type Ex*). This would pull up all Last Names that start with 'Ex').

Search Case

Search Criteria

Type:

Event ID:

Disease:

Last Name:

First Name:

Birth Date: (Inexact)

Sex assigned at birth:

Street:

City:

State:

Zip Code:

Survey Email:

Social Security Number:

Status:

From Date:

To Date:

Name alternate first:

Name alternate last:

DOB alternate:

Sex alternate:

SSN alternate last 4 only:

SSN alternate - full:

Phone number:

Email:

Electronic contact:

Person identifier:

Sort Options

Sort By:

Sort Order:

Search Options

Search History:

Search Soundex:

Leave Window Open:

Search Results

Event ID	Full Name	Birth Date	Status	Disease	Event Date	Sex assigned at birth
100000000	Example, Training		Open	Lead child	03/12/2018	

Showing 1 to 1 of 1 entries

Update an Event

To make updates to an assigned event, go to the Event Summary page and navigate to the appropriate section for the update. Options include: **Event Data** (Administrative, Demographics, Housing, and Exposure), **Lab Data** (Add or Update a Lab Result), **Concerns, Persons, Tasks, Calendar, Event Properties**, and **Event History**. In the current release, the **Surveys** functionality is not in use so it may be disregarded.

Event Summary

Basic Information

Event ID:	100000000
Disease:	Lead child
Person:	Training Example ()
Dates:	Create Date: 03/12/2018
Type:	Interactive
Investigation Status:	Open (Change to Closed)
Linked Events/Contacts:	0 linked event(s)/contact(s) (View)
Linked Exposure Sites:	0 linked exposure site(s) (View)
Attachments:	0 attachment(s) (Add)
Notices:	General Notifications (1) Vital Status: Alive

Edit Event Properties

Copy Event

Event Data

Lab Results

Concerns

Persons

Tasks

Surveys

Calendar

Event Properties

Event History

Question Packages

Question Package	Person	Last Update
▶ Administrative	Training Example	03/12/2018
Demographics	Training Example	03/12/2018
Housing	Training Example	03/12/2018
Exposure	Training Example	03/12/2018
CDC Notification	Training Example	03/12/2018

View Question Package

Wizards

▼

View Wizard

Event Data Tab – Administrative

The Administrative Data section of the Event Data tab contains information regarding the administrative details of the case, including clinic and county information.

Administrative - Training Example - Lead child [Jump To...]

Accountable county **Override accountable county** **Case classification and tracking**

Select reporting address **Address Reporting**

Street address

City

County

State

Zipcode

Date case assigned to LHJ for investigation **Communication Information**

Case classification

Investigator

Investigation start date

Is it okay to talk to case?

Case could not be interviewed

Date of communication

Case's health care clinic name **Health care provider**

Clinic address

Health care provider name

Health care provider phone

Date client/guardian interview was completed

History of anemia or low hematocrit/low RBCs

Ever referred for neurological, developmental, or educational assessment

Ever referred for any of the following

- Neurologic evaluation
- Educational referral
- Developmental evaluation
- Other (enter in clinical notes)

Case has received chelation treatment

Health promotion materials (DOH)

- Yes
- Child's Lead Test Results
- Lead In Home Remedies
- Lead Can Poison Your Child
- Protect Your Family From Lead In Your Home
- Renovate Right: Important Lead Hazard Information For Families, Child-care providers, and Schools
- Steps to Lead Safe Renovation, Repair and Painting
- Fight Lead Poisoning With a Healthy Diet

Reason event closed

- BLL is now <5.0 ug/dl.
- Lost to follow-up
- Moved out of state
- False positive

Event Closure Information

ACCOUNTABLE COUNTY

This field is auto-filled based on the reporting address of the patient, which was entered when the event was originally created. To populate the field, click on the 'Select reporting address' link in the middle of the Administrative page. A pop-up menu will appear. Click on 'Select an Official Address' next to the correct address. This will populate fields in the address section, and 'Accountable County', on the Administrative page. You will only be able to access events in your own jurisdiction. For case sharing with other users in your jurisdiction, the access is defined by the 'Accountable County' field. 'Accountable County' can be overridden using the field to the right labeled 'Override Accountable County' explained below.

Case classification and tracking	
* Accountable county	Override accountable county
<input type="text"/>	<input type="text"/>

Address Reporting

VERRIDE ACCOUNTABLE COUNTY – This field is available to override the 'Accountable County,' in the instance that the person is not being cared for in their county of residence. For example, if a patient lives in Everett but is being cared for at Harborview Medical Center in Seattle, and Seattle is going to count the case, this field will allow King County to be selected at the Accountable County. If this field needs to be utilized, contact the DOH Lead Program.

Communication Information Section

Communication Information	
* Date case assigned to LHJ for investigation	03/12/2018
* Case classification	Confirmed
* Investigator	<input type="text"/>
* Investigation start date	MM/DD/YYYY
Is it okay to talk to case?	<input type="text"/>
Case could not be interviewed	<input type="checkbox"/> True
Date of communication	MM/DD/YYYY

DATE CASE ASSIGNED TO LHJ FOR INVESTIGATION – This is the date the LHJ receives information on the patient, notified by phone, FAX, email, or workflow notification. For example, if a positive lab test is received.

INVESTIGATOR – This field is entered based on the primary data case manager for this case. This can be changed to another investigator in your jurisdiction. For transfers outside of your jurisdiction, contact the DOH Lead Program.

INVESTIGATION START DATE – This field should be populated on the date the investigator begins Case Management on the assigned case by taking action such as calling the provider or reviewing the case notes.

CASE COULD NOT BE INTERVIEWED – This field is entered in the event the patient could not be reached. If 'Case could not be interviewed' field is selected, a red warning will appear at the top of the screen.

Patient not interviewed	
Case classification and tracking	
* Accountable county	<input type="text" value="v"/> Override accountable county
Address Reporting	
Select reporting address	
Street address	<input type="text"/>
City	<input type="text"/>
County	<input type="text"/>
State	<input type="text"/>
Zipcode	<input type="text"/>
Communication Information	
* Date case assigned to LHJ for investigation	03/12/2018 <input type="text"/>
* Case classification	Confirmed <input type="text"/>
* Investigator	<input type="text"/> <input type="text"/>
* Investigation start date	MM/DD/YYYY <input type="text"/>
Is it okay to talk to case?	<input type="text"/>
Case could not be interviewed	<input checked="" type="checkbox"/> True

DATE OF COMMUNICATION – This field should be filled in with the first date of communication with the family of the case. The ‘Date of communication’ field should not be selected unless the ‘Case could not be interviewed’ field is unchecked.

Communication Information	
* Date case assigned to LHJ for investigation	03/12/2018 <input type="text"/>
* Case classification	Confirmed <input type="text"/>
* Investigator	<input type="text"/> <input type="text"/>
* Investigation start date	03/06/2018 <input type="text"/>
Is it okay to talk to case?	Yes <input type="text"/>
Case could not be interviewed	<input type="checkbox"/> True
Date of communication	03/13/2018 <input type="text"/>

Health care provider Section

Health care provider	
Case's health care clinic name	<input type="text"/>
Clinic address	<input type="text"/>
Health care provider name	Not answered <input type="text"/>
Health care provider phone	<input type="text"/>

Enter the health care clinic's name and address. This should be selected from a standardized pick list. Verify health care clinic and provider's name and address.

Case interview, letters, and referrals Section

Case interview, letters, referrals	
Date client/guardian interview was completed	MM/DD/YYYY
History of anemia or low hematocrit/low RBCs	<input type="checkbox"/> Yes
Ever referred for neurological, developmental, or educational assessment	<input type="checkbox"/> Yes
Ever referred for any of the following	<input type="checkbox"/> Neurologic evaluation <input type="checkbox"/> Educational referral <input type="checkbox"/> Developmental evaluation <input type="checkbox"/> Other (enter in clinical notes)
Case has received chelation treatment	<input type="checkbox"/> Yes
Health promotion materials (DOH)	<input type="checkbox"/> Child's Lead Test Results <input type="checkbox"/> Lead In Home Remedies <input type="checkbox"/> Lead Can Poison Your Child <input type="checkbox"/> Protect Your Family From Lead In Your Home <input type="checkbox"/> Renovate Right: Important Lead Hazard Information For Families, Child-care providers, and Schools <input type="checkbox"/> Steps to Lead Safe Renovation, Repair and Painting <input type="checkbox"/> Fight Lead Poisoning With a Healthy Diet

Event Closure Information Section

Event Closure Information	
* Reason event closed	<input type="checkbox"/> BLL is now <5.0 ug/dL <input type="checkbox"/> Lost to follow-up <input type="checkbox"/> Moved out of state <input type="checkbox"/> False positive <input type="checkbox"/> No investigation was performed by LHJ

REASON EVENT CLOSED – This field indicates the reason the investigation is complete and can be closed. Once a selection is made in the Reason event closed field, additional drop down will appear to confirm the Investigation complete date.

* Reason event closed	<input checked="" type="checkbox"/> BLL is now <5.0 ug/dL <input type="checkbox"/> Lost to follow-up <input type="checkbox"/> Moved out of state <input type="checkbox"/> False positive <input type="checkbox"/> No investigation was performed by LHJ
* Investigation complete date	03/13/2018

* Indicates required field

INVESTIGATION COMPLETE DATE – This field indicates the date which the LHJ has completed the investigation on a case. Once this field is filled out, the case will be returned to DOH for review.

Event Data Tab – Demographics

The Demographics Data section of the Event Data tab contains information regarding the patient's race, ethnicity, and language background.

Demographics - Training Example - Lead child		[Jump To...]	Save	Save & Stay	Cancel
Expand Details					
General Demographics					
Birth date					
Alternate birthdate					
Gender					Age in months as of today
Age in years as of today					
Age in months at last test					
Race, Ethnicity, Language					
Race	<input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Unknown				
Hispanic or non-Hispanic	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic				
Is case/guardian fluent in English?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Is case a refugee, immigrant, or adopted internationally?	<input type="checkbox"/> Refugee <input type="checkbox"/> Immigrant <input type="checkbox"/> Foreign adoption <input type="checkbox"/> No				
Other Programs					
Is case receiving WIC benefits?	<input type="checkbox"/> Yes				
Is case Medicaid-eligible?	<input type="checkbox"/> Yes				
Does case attend Head Start or ECEAP?	<input type="checkbox"/> Yes				
<input type="button" value="Save"/> <input type="button" value="Cancel"/> <input type="button" value="Help"/>					

RACE – This field is also self-reported and allows for one or more selections, which include American Indian or Alaska Native; Asian; Black or African American; Native Hawaiian or Other Pacific Islander; or White. If Asian or Native Hawaiian or Other Pacific Islander are selected, drop downs will appear to further specify the classification. For definitions of each category visit CDC RVCT Manual (60).

HISPANIC OR NON-HISPANIC – Choose ‘Hispanic’ or ‘Not Hispanic’. This field is self-reported. Hispanic description includes if patient considers themselves Cuban, Mexican, Puerto Rican, South or Central American, or of other Spanish culture or origin, regardless of race. See CDC RVCT Manual (58).

If the case/guardian is not fluent in English, please indicate the preferred language.

Is case/guardian fluent in English?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Preferred language	<input type="text"/>
What other language does the case/guardian use?	<input type="text"/>
Is an interpreter needed?	<input type="checkbox"/> Yes

If the case is a refugee, immigrant, or adopted internationally, please indicate the approximate date of arrival and Country of origin.

Is case a refugee, immigrant, or adopted internationally?	<input checked="" type="checkbox"/> Refugee <input type="checkbox"/> Immigrant <input type="checkbox"/> Foreign adoption <input type="checkbox"/> No
Approximate date of arrival	<input type="text"/>
Country of origin	<input type="text"/>

Event Data Tab – Housing

The Housing Data section of the Event Data tab contains information regarding the patient’s current living conditions and location.

Housing - Training Example - Lead child	
Housing	
Current home type	<input type="text"/>
Home ownership	<input type="text"/>
Years lived in home	<input type="text"/>
Year home was constructed ?	<input type="text"/>
Home water source	<input type="text"/>
Recent repairs/renovations done in the home (especially if the home was built before 1978)	<input type="checkbox"/> Yes (describe)
Lives or plays in former orchard site (orchards on property before 1960) ?	<input type="checkbox"/> Yes (describe)
Exposed to soil contaminated by Tacoma Smelter plume? (see Ecology footprint study maps) ?	<input type="checkbox"/> Yes (describe)
Other frequented places (childcare, etc)	
Other frequented locations such as childcare, school, relative, or friend's houses where case might have been exposed to lead?	<input type="checkbox"/> Childcare (describe possible lead exposures in notes) <input type="checkbox"/> Preschool (describe possible lead exposures in notes) <input type="checkbox"/> School (describe possible lead exposures in notes) <input type="checkbox"/> Relative's home (describe possible lead exposures in notes) <input type="checkbox"/> Family friend's home (describe possible lead exposures in notes) <input type="checkbox"/> Neighbor (describe possible lead exposures in notes) <input type="checkbox"/> Other (specify in notes)
Inspection	
Date of inspection (if applicable)	<input type="text" value="MM/DD/YYYY"/>
Is the investigation address the primary address?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Additional site investigated	<input type="checkbox"/> Yes
<input type="button" value="Save"/> <input type="button" value="Cancel"/> <input type="button" value="Help"/>	

DATE OF INSPECTION – This field should be populated with the date of the first home visit.

Event Data Tab – Exposure

The Exposure Data section of the Event Data tab contains information regarding probable or confirmed exposures to lead.

Expand Details

Paint, Food, Toys, Jewelry

Guardian reports the following

- Spends time in areas with peeling paint (indoor)
- Spends time in areas with peeling paint (outdoors)
- Spends time in areas with lead-based paint dust
- Observed with paint chips in mouth
- Eats non-food items (pica), such as soil.
- Recent refugee or immigrant
- Plays with old painted lead toys or lead-recalled toys
- Chews keys or metal or painted jewelry
- Swallowed lead sinker (fishing weights or similar)
- Handmade/imported ceramics (especially Mexican pots) used for cooking or storing food
- Other

Case consumed these possibly lead-containing foods [Lead spices, CA Candy PDF](#)

- Tamarind or chili candy (ie Tamarindo candy)
- Chapulines (Oaxaca grasshopper snacks)
- Spices (several implicated, often tumeric/curry powder, garam masala, tamarind pulp)
- Lead-soldered canned goods (hand-carried or imported into U.S.)
- Case is/was formula fed (drinking water used may contain lead)

Notes about lead exposure (circumstances, frequency and duration of exposure, etc)

Cosmetics, Religious powders, Alternative/Traditional medicines

Please select if any of these cosmetics or religious powders are used

Have any alternative/traditional medicines been used in the household? (see examples)

Occupation & Hobbies

Do any household members have hobbies or occupations that would expose them to lead?

- Works in construction or painting
- Works in Radiator repair shop, battery manufacturer or dismantler, lead or brass foundry or smelter
- Recreational shooting (gun club) or (ammunition) reloading
- Stained glass hobby (lead solder)
- Ceramics hobby (lead glaze)
- Soldering or smelting hobby (fishing, electronics, jewelry, others)
- Fireworks
- Automotive-related hobby or job
- Antique-related hobby or work

Describe work or hobby (how long, where performed, routes case could have been exposed)

Summary

* From your investigation, how do you think the case was exposed to lead?

- Alternative/Traditional remedies
- Cosmetics

Lab Results Tab – Add Lab Result

Local health jurisdictions may receive a laboratory report directly through fax, mail or telephone report.

To add a lab result on an existing case, click on the Add Lab Result [Add Lab Result](#) button on the Lab Results tab and select “WDRS manual lead lab DE template 20171020”. This is the manual template for adding a lab to a case for Blood Lead.

Event Data Lab Results Concerns Persons Tasks Surveys Calendar Event Properties Event History

Labs

Lab No.	Specimen collection date	WDRS specimen type	WDRS test performed	WDRS test result
> 1	01/03/2018			Test result greater than or...

Add Lab Result Update Lab Result Delete Lab Result

Add Lab Result - Training Example - Lead child

Lab Results	
Lab Results: WDRS manual lead lab DE template 2017/1020 ▼	
Lab report information	
WDRS report date	<input type="text" value="MM/DD/YYYY"/>
Lab report reviewed - DOH	<input type="checkbox"/> ▼
Lab report reviewed - LHJ	<input type="checkbox"/> ▼
WDRS user-entered lab report note	<input type="text"/>
Performing lab for entire report	<input type="text"/> 🔍 🗑️
Specimen	
Specimen identifier/accession number	<input type="text"/>
Specimen collection date	<input type="text" value="MM/DD/YYYY"/>
Specimen received date	<input type="text" value="MM/DD/YYYY"/>
WDRS specimen type	<input type="text"/> ▼
WDRS specimen source site	<input type="text"/> ▼
Specimen reject reason	<input type="text"/>
Test performed and result	
WDRS test performed	<input type="text"/> ▼
Test performed - description	<input type="text"/>
WDRS test result, coded	<input type="text"/> ▼
WDRS test result, coded (additional)	<input type="checkbox"/> ▼
WDRS result summary	<input type="text"/> ▼
WDRS result structured numeric	<input type="text"/>
WDRS result, not coded	<input type="text"/>
Test result	<input type="text"/>
WDRS units of measure	<input type="text"/> ▼
Result units	<input type="text"/>
Reference range	<input type="text"/>
Test method	<input type="text"/>

Lab Results Tab – Update Lab Result

To update a lab result, double click on the Lab Result to be updated or select the line and click the Update Lab Result button on the Lab Results tab.

Edit Lab Result - Training Example - Lead child

Lab Results	
Template:	WDRS_MANUAL_LAB_DE_TEMPLATE_LEAD
Person:	Training Example
Entry Method:	Manual
Lab report information	
WDRS report date	<input type="text" value="03/05/2018"/>
Lab report reviewed - DOH	<input type="text" value="No"/>
Lab report reviewed - LHJ	<input type="text" value="Yes"/>
WDRS user-entered lab report note	<input type="text"/>
Performing lab for entire report	<input type="text"/>
Specimen	
Specimen identifier/accession number	<input type="text"/>
Specimen collection date	<input type="text" value="03/05/2018"/>
Specimen received date	<input type="text" value="MM/DD/YYYY"/>
WDRS specimen type	<input type="text"/>
WDRS specimen source site	<input type="text"/>
Specimen reject reason	<input type="text"/>
Test performed and result	
WDRS test performed	<input type="text" value="Lead in Venous Blood"/>
Test performed - description	<input type="text"/>
WDRS test result, coded	<input type="text" value="Test result greater than or equal to 5 ug/dL"/>
WDRS test result, coded (additional)	<input type="text"/>
WDRS result summary	<input type="text"/>
WDRS result structured numeric	<input type="text"/>
WDRS result, not coded	<input type="text"/>
Test result	<input type="text"/>
WDRS units of measure	<input type="text"/>
Result units	<input type="text"/>
Reference range	<input type="text"/>

Lab Report Information Section

Lab report information	
WDRS report date	<input type="text" value="MM/DD/YYYY"/>
Lab report reviewed - DOH	<input type="text"/>
Lab report reviewed - LHJ	<input type="text"/>

WDRS REPORT DATE – This field is the date the case is entered in to WDRS.

LAB REPORT REVIEWED – DOH – This field is for DOH use only. Do not populate this field.

LAB REPORT REVIEWED – LHJ – This field is used to indicate that a case is currently under review and has been assigned to an investigator. It is important to populate this field in order to remove the case from workflow and indicate that the investigation has begun on the case.

Specimen Section

Specimen	
Specimen identifier/accession number	<input type="text"/>
Specimen collection date	03/05/2018 <input type="text"/>
Specimen received date	MM/DD/YYYY <input type="text"/>
WDRS specimen type	<input type="text"/>
WDRS specimen source site	<input type="text"/>
Specimen reject reason	<input type="text"/>

SPECIMEN COLLECTION DATE – This field indicates the date of collection for the sample.

WDRS SPECIMEN TYPE – This field indicates the collection method. It should either be “Blood, whole, venous”, “Blood, whole, capillary”, or “Blood, whole, unknown specimen source”.

Test Performed and Result Section

For consistency with Electric Lab Reporting (WELRS), populate the WDRS test results per the following instructions.

Test performed and result	
WDRS test performed	Lead in Venous Blood <input type="text"/>
Test performed - description	<input type="text"/>
WDRS test result, coded	Test result greater than or equal to 5 ug/dL <input type="text"/>
WDRS test result, coded (additional)	<input type="text"/>
WDRS result summary	<input type="text"/>
WDRS result structured numeric	<input type="text"/>
WDRS result, not coded	<input type="text"/>
Test result	<input type="text"/>
WDRS units of measure	<input type="text"/>
Result units	<input type="text"/>
Reference range	<input type="text"/>
Test method	<input type="text"/>
WDRS interpretation code	<input type="text"/>
Interpretation code	<input type="text"/>
Test result status	<input type="text"/>
Date/time of analysis	MM/DD/YYYY <input type="text"/>
WDRS performing organization	<input type="text"/> <input type="button" value="🔍"/> <input type="button" value="🗑️"/>
If performing organization is not on the pick list, please enter information below:*	
Performing organization name	<input type="text"/>
Performing organization address	<input type="text"/>
Performing organization phone number	<input type="text"/>
Performing organization identifier	<input type="text"/>
	Upload Document
	<input type="button" value="Add"/>

WDRS TEST PERFORMED – This field indicates the test type. It should usually be “Lead in Whole Blood”. The test performed should match the specimen type from above.

WDRS TEST RESULT, CODED – Select the appropriate field from the drop down menu. This field should only contain either “Test Result greater than or equal to 5ug/dL” or “Test Result less than 5ug/dL”.

WDRS TEST RESULT, CODED (ADDITIONAL) – This field should only contain comparators, if applicable.

WDRS RESULT STRUCTURED NUMERIC – This field should contain the numeric value of a test result. For example, if the result of a venous draw is 7.6, enter that number in the WDRS result structured numeric field as well as populating the WDRS test result, coded field with “Test Result greater than or equal to 5ug/dL”. If the result is <3.3, 3.3 will go in the WDRS result structured numeric field and < will go in the WDRS test result, coded (additional) field.

WDRS TEST RESULT, NOT CODED – This field can contain numeric and non-numeric characters. For example, if the result is <3.3, “<3.3” can be entered in this field.

Test performed and result	
WDRS test performed	Lead in Capillary Blood
Test performed - description	
WDRS test result, coded	Test result greater than or equal to 5 ug/dL
WDRS test result, coded (additional)	<
WDRS result summary	
WDRS result structured numeric	3.3
WDRS result, not coded	<3.3

If a lab result came in automatically through Electronic Lab Reporting (WELRS), the layout of the Lab Result will look slightly different in the Update Lab Result process. The above fields are the same and should be filled out as indicated above.

Upload document


Performing organization phone number	
Performing organization identifier	
Add	Upload Document

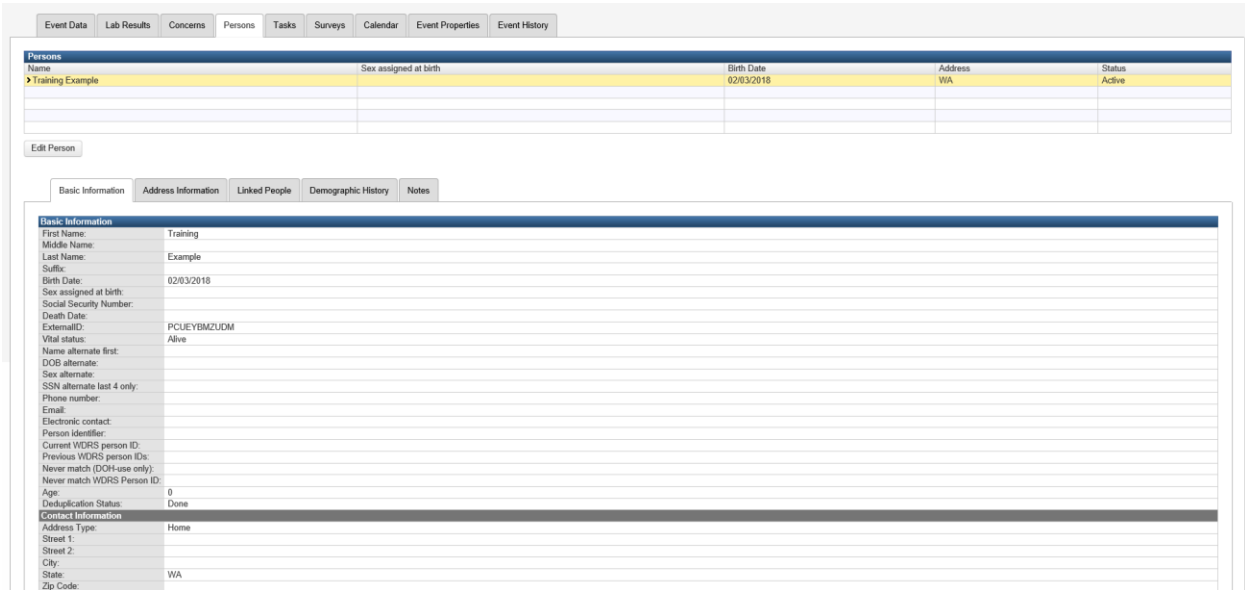


Click ‘Upload Document’ to attach the laboratory report to the event. Click Browse, navigate to the correct computer drive and select the file, enter a name for the file, and click Save. (Note: this will exit you from the lab report.)

Only one document can be attached to a result. If the Upload Document option is not present. Save the lab result and the option should appear upon reentry.

Edit Person Information

To view/edit the Basic Information, Address Information, and other related information in the Persons tab. Click on the Persons tab and then select Edit Person  or double click on the highlighted line.



Name	Sex assigned at birth	Birth Date	Address	Status
Training Example		02/03/2016	WA	Active

[Edit Person](#)

Basic Information | Address Information | Linked People | Demographic History | Notes

Basic Information

First Name:	Training
Middle Name:	
Last Name:	Example
Suffix:	
Birth Date:	02/03/2016
Sex assigned at birth:	
Social Security Number:	
Death Date:	
ExternalID:	PCUEYBMZUDM
Vital status:	Alive
Name alternate first:	
DOB alternate:	
Sex alternate:	
SSN alternate last 4 only:	
Phone number:	
Email:	
Electronic contact:	
Person Identifier:	
Current WDRS person ID:	
Previous WDRS person IDs:	
Never match (DOH-use only):	
Never match WDRS Person ID:	
Age:	0
Deduplication Status:	Done
Contact Information	
Address Type:	Home
Street 1:	
Street 2:	
City:	
State:	WA
Zip Code:	

Select **Basic Information**, **Address Information**, **Linked People**, **Demographic History**, or **Notes** to review or edit.

Basic Information

Basic Information	Address Information	Linked People	Demographic History	Notes
Basic Information				
First Name:	Training			
Middle Name:				
Last Name:	Example			
Suffix:				
Birth Date:	02/03/2018			
Sex assigned at birth:				
Social Security Number:				
Death Date:				
ExternalID:	PCUEYBMZUDM			
Vital status:	Alive			
Name alternate first:				
DOB alternate:				
Sex alternate:				
SSN alternate last 4 only:				
Phone number:				
Email:				
Electronic contact:				
Person identifier:				
Current WDRS person ID:				
Previous WDRS person IDs:				
Never match (DOH-use only):				
Never match WDRS Person ID:				
Age:	0			
Deduplication Status:	Done			
Contact Information				
Address Type:	Home			
Street 1:				
Street 2:				
City:				
State:	WA			
Zip Code:				
County:				
Country:	USA			
Survey Email:				
Residence Type:				
Address Status:	Incomplete			
Geocode Status:	Incomplete Data			
Latitude:	-999.0			
Longitude:	-999.0			
Geocode Quality:	-1			
Validation Status:	Pending			
Custom Field 1:				
Custom Field 2:				
Custom Field 3:				
Custom Field 4:				
Custom Field 5:				
Custom Field 6:				
Custom Field 7:				

EXTERNAL ID – This is the unique Person identifier.

Address Information

Basic Information	Address Information	Linked People	Demographic History	Notes		
Address Information						
Type	Address	Phone	Action			
>Home * Primary	WA					
<input type="button" value="Add Address Type"/> <input type="button" value="Edit Address"/>						
Address History						
Effective Dates	Address	County	Survey Email	Residence Type	Status	GIS Info
03/19/2018 - 03/21/2018	WA				Incomplete	Incomplete Data

Linked People

For the Childhood Lead Prevention Program, the “Linked People” section can be used if there is a relationship to an existing case. For example, if an investigator knows there is another child in the same family that also has an elevated blood lead level, they may be linked to the existing, active case.

Basic Information | Address Information | **Linked People** | Demographic History | Notes

Linked People				
Relationship	Full Name	Birth Date	Address	External ID

Add Link Remove Link

Basic Information | Address Information | Linked People | **Demographic History** | Notes

Demographic History			
Date	Field	Old Value	New Value
03/20/2018	First Name	Adams	Training


Closing a Case

LHJ investigators are not expected to completely close out an elevated blood lead case. The responsibility of closing out a case will be with the DOH. To end the investigation from the LHJ perspective, go to the Administrative Question Package tab and scroll down to the Event Closure Information section. The investigator will indicate the Reason the Event is closed and the Investigation Complete Date.

Event Closure Information	
* Reason event closed	<input type="checkbox"/> BLL is now <5.0 ug/dL <input type="checkbox"/> Lost to follow-up <input type="checkbox"/> Moved out of state <input type="checkbox"/> False positive <input type="checkbox"/> No investigation was performed by LHJ

The case will then be reassigned to DOH for closure.

Reports

To download a report out of WDRS, click on the Reports  icon. This will take you to the Maven Reporting page. Select the Lead Category and Lead Child Adhoc Report.

Maven Reporting

Maven Reporting

Category:

Select Report:

Description:

Report Period*: Date Range Period

Start Date: End Date:

Output Type:

Select the reporting period to be queried. This can be either a specific date range or a time period. Output type will default to HTML and will open in a new window. This can be changed to CSV, Excel, or Excel w/ Parameters. Excel w/ Parameters will indicate the search criteria and date the report was pulled.


Lead Child Adhoc Report

Report Period: 02/20/2018 - 03/19/2018
Report Time: 03/19/2018 08:43 AM

Disease	External ID	Status	Last Name	First Name	Birth Date	Street Address	City	State	Zip Code	County	Override accountable county	Sex assigned at birth	Race	Hispanic
Lead child	PCUEYAE0YJJ	Open	Example	Training				WA						


Event count: 1 (Filtered for: ekimball Roles: SuperUser Groups: None)

Workflows

When there are certain pending actions assigned to you, such as a new case with an elevated test result, there will be notifications in the workflow. To view these workflows, either go to the Workflows  icon or click on the link in the Workflow Queue section. Workflows for LHJ users will include: Lead Child elevated result on new open event, Lead Child elevated result on open event, and Lead Child non elevated result on open event.

Workflow Queues

Workflow Queue	Total Count	Priority	Last Update
Lead			
<input type="checkbox"/> Lead Child elevated result on new open event	0	Medium	03/19/2018 04:07 PM
<input type="checkbox"/> Lead Child elevated result on open event	0	Medium	03/19/2018 04:07 PM
<input type="checkbox"/> Lead Child non elevated result on open event	0	Medium	03/19/2018 04:07 PM
Task Specific Monitors (Add Task)			
My Open Tasks			
<input type="checkbox"/> My Open Tasks	0	Medium	03/19/2018 04:12 PM
<input type="checkbox"/> Open Tasks Created by Me	0	Medium	03/19/2018 04:12 PM
<input type="checkbox"/> Overdue Tasks Created by Me	0	Medium	03/19/2018 04:12 PM

By clicking into a workflow, you will be able to view and assign cases. To assign the case to a specific user, click on the check box on the far left and use the “Assign to user” (or click Assign to me) drop down to select the correct investigator and then click the Assign  button. The case will then appear in the users Tasks List.


Workflow Details - Lead Child elevated result on open event

Lead Child elevated result on open event (Last Update: 03/19/2018 12:47 PM)								
<input type="checkbox"/>	Event	Full Name	Status	Create Date	Disease	Last Update	Assigned To	Assigned To Group
<input type="checkbox"/>	100000000	Example, Training	Open	03/12/2018	Lead child	03/19/2018	Elizabeth Kimball	

Filter: Contains Apply Clear Displaying 1...1 of 1 (Export All) << First < Prev 1 / 1 Next > Last >>

Assign to user: [Assign to me] Assign to group: Assign Reassign

[Workflows](#) [Dashboard](#) [Help](#)

Tasks 			
Type	Priority	Full Name	Disease
Assignment	Medium	Example, Training	Lead child
			More...

Once an investigation is completed, the Investigation Complete date will need to be populated in order for DOH to receive and review the completed case. The Investigation Complete date field is found on the Administrative section of the Event data tab in the Event Closure section. It will appear once a selection is made from the “Reason event closed” field.