A new update to CDRSS was put in place on April 1, 2011. Part of this update included a mechanism to sort laboratories submitted electronically. An individual laboratory test can be initially assigned into one of the following case and report status fields.

Case Status:

Report Under Investigation: An investigation is pending and a determination has not yet been made regarding the status of the case, this includes most lab reports that come in electronically.

Possible: As described in the case definition for a specific disease.

Probable: As described in the case definition for a specific disease.

Confirmed: As described in the case definition for a specific disease.

E-sorted: This status is only assigned to cases that have been reported through electronic laboratory reporting (ELR) and do not require any follow up by NJDOH or LHD staff at this point in time. This classification has been described as a "holding bucket" for electronically submitted labs that do not necessarily meet the case definition without an additional test or physician report. Cases will remain e-sorted until additional information is received that would change the case status. Cases can be manually changed from e-sorted to another case status, but you cannot manually select e-sorted as a case status.

Report Status:

E-hold – Currently only used in the STD module but can be used by others if appropriate.

Pending – Assigned when an investigation is still pending and case is open for review.

LHD Open, Review, Closed – Assigned by LHD for work flow purposes.

Reopen – Assigned if additional information is being requested of the LHD or if a new lab is electronically entered indicating a secondary review of the case is warranted.

DHSS Open, Review - Assigned by NJDOH for work flow purposes.

DHSS Approved – Assigned when a case has been reviewed by NJDOH staff and the staff is approving the case status assigned based on information contained within the CDRSS record.

E-closed – Assigned when the case was closed out electronically and does not require any follow up or human intervention. E-closed has the same significance as DHSS Approved, except this was done without a DHSS user reviewing the case.

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Note: E-closed and e-sorted can only be assigned electronically. Once this case/report status is changed, users cannot assign cases back into e-sorted/e-closed status. Another case/report status would need to be selected.

Diseases in which e-sorted/e-closed are being utilized

Hepatitis A – added June 5, 2017

- NJAC 8:57 requires healthcare providers, administrators and laboratories to immediately report cases of acute Hepatitis A. Many of these reports are currently received via ELR.
- A confirmed case of Hepatitis A requires a positive IgM lab test. Hepatitis A total antibodies is not a reportable lab as it does not indicate an acute case of illness in the absence of a reported positive IgM. For those cases in which only total antibodies are reported, these will be automatically assigned as e-sorted and e-closed.

Influenza – updated Feb 22, 2013

- NJAC 8:57 requires electronic reporting of all influenza positive laboratories. All influenza tests currently reported by laboratories are considered confirmatory. CDRSS has been set up to assign influenza tests (AH3, AH1, B and 2009 H1N1) which are electronically submitted to CDRSS with a case status of "confirmed" and a report status of "e-closed". Laboratory tests reporting a positive influenza AH5 or AH7 will still be reported with a case status of "RUI" and a report status as "pending".
- Local health departments should conduct investigations on influenza cases occurring in children less than 18 years of age who have been admitted to the ICU or who have died. Guidance documents disseminated prior to each influenza season will provide any additional reporting forms which required on the above cases in addition to CDRSS reporting.
- Case reports in CDRSS which do not fall into one of the above criteria do not need to be investigated by the local health department.

Lyme Disease

- NJAC 8:57 requires that health care providers and laboratories report diagnosed cases of Lyme disease and positive laboratory tests for *Borrelia burgdorferi*. Many of these reports are received via ELR.
- According to the CDC and NJDOH surveillance case definition, a positive screening test for *Borrelia burgdorferi* must be accompanied by a positive Western blot (WB) and clinical symptoms of Lyme disease in order to be classified as a confirmed, probable or possible case of Lyme disease. In an effort to reduce work load, all positive screening tests for *Borrelia burgdorferi* received via ELR will automatically be assigned a case status of "e-sorted" and a report status of "e-closed." Such records do not require any investigation and will be considered "not a case" unless additional laboratory information is received.
- When NJDOH receives a positive WB for a case previously classified as "e-sorted" and
 e-closed," CDRSS will automatically assign a case status of "report under investigation"
 and a report status of "pending." The case will then appear on the pending screen at the
 appropriate LHD and is ready for investigation.

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• All reports with a positive WB must be investigated for clinical signs and symptoms of Lyme disease before assigning a case and report status. The only exception is reports of physician-diagnosed erythema migrans greater than five centimeters in diameter; these cases may be classified as "confirmed" and closed without further investigation.

Poliomyelitis - added Nov 7, 2016

- NJAC 8:57 requires laboratories to immediately report any positive test for polio virus. Many of these reports are currently received via ELR.
- A suspected case of polio requires immediate reporting by healthcare providers/administrators <u>and</u> confirmation of clinical disease. Many of the reports received via ELR are positive serology laboratory reports with no clinical information to support a case of disease. Prior evaluations of these serologic tests have shown that these tests are typical ordered to evaluate a person's protective antibody to poliovirus types 1, 2, and 3.
- In an effort to reduce work load, CDRSS will automatically assign a case/report status of "e-sorted" and "e-closed" to these polio serology results received via ELR. Here "e-sorted" is being used as a holding category.
- E-Sorted/E-Closed cases do not need to be evaluated by LHD/NJDOH unless a clinically compatible disease is reported by the healthcare provider. When this occurs, an investigation into the case would be conducted and the appropriate case/report status will be selected from the list of choices.

Streptococcus pneumoniae – added Jan 25, 2017

- NJAC 8:57 requires healthcare providers, administrators and laboratories to report within 24 hours of diagnosis confirmed cases of invasive pneumococcal disease.
- In 2017, CDC changed the case definition to include 'probable' cases identified by culture-independent diagnostic tests (CIDT). The ability to test for *Streptococcus pneumoniae* using CIDTs like polymerase chain reaction (PCR)-based testing has become both more available and more common. A CIDT-positive but culture negative (or with absent culture results) will denote a probable case.
- In an effort to reduce work load, CDRSS will automatically assign a report status of "eclosed" to these lab results received via ELR.
- Cases that are culture-confirmed will be designated confirmed/e closed and those cases that are CIDT-confirmed will be designated probable/e closed.
- E-closed cases do not need to be evaluated by LHD/NJDOH unless the case is part of an outbreak situation. There is very little public health response needed for these cases.
 Person-to-person transmission is limited and there are no recommendations for antibiotic prophylaxis for contacts. In an outbreak situation, an investigation would be conducted and the appropriate case/report status will be selected from the list of choices.

Varicella

• NJAC 8:57 requires healthcare providers, administrators, and laboratories to report within 24 hours all varicella (chickenpox) cases. Many of these reports are currently received via ELR.

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- A case of varicella requires confirmation of clinical disease. Many of the reports received via ELR are positive IgM laboratory reports with no clinical information to support a case of disease. Prior evaluations of these serologic tests have shown they were ordered along with IgG when a provider was evaluating the person's immunity to varicella (resulting in false-positive IgM results).
- In an effort to reduce work load, CDRSS will automatically assign positive varicella IgM results received via ELR a case/report status of "e-sorted" and "e-closed". Here "e-sorted" is being used as a holding category.
- E-Sorted/ E-Closed cases do not need to be evaluated by LHD/NJDOH unless a clinically compatible disease is reported. When this occurs, an investigation into the case would be conducted and the appropriate case/report status will be selected from the list of choices.

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