

# Orpheus County Feedback Meeting Agenda & Notes

Data for Public Health  
Policy

**Date:** August 11, 2016

**Time:** 1:30-3:00 **Place:** PSOB AOC, 4<sup>th</sup> flr (or room 710)

**ALL DATA FROM SCREEN SHOTS SHOWN IN THESE MINUTES ARE FAKE**

**Registration URL:** <https://attendee.gotowebinar.com/register/5575381935383763458>

The phone number is 1- 888-278-0296 participant code 6585758

**Purpose:** To share new features, user issues and gather feedback on development priorities for Orpheus, Outbreaks and Case log applications

**Outcome:** Users are kept informed about development projects and their needs are identified and prioritized.

Counties: Baker; **Benton** (Alice, Mary); Clackamas; Clatsop; **Columbia** (Heather, Nikki); Coos; **Crook** (Karen); **Curry** (Brody, Susan); **Deschutes** (Debbie, Emma, Heather); **Douglas** (Louai); Grant; Harney; Hood-River; Jackson; **Jefferson** (Joy); **Josephine** (Cat, Jared); **Klamath** (Katie); Lake; **Lane** (Heather, Lisa); **Lincoln** (Mollie); **Linn** (Debby); Malheur; **Marion** (Dana, Dawn); Morrow; **Multnomah** (Jennifer, Joan, Marta, Nicole, Taylor, Tom); **NCPHD** (Grace); Polk; **Tillamook** (Christina); Umatilla; Union; Wallowa; Warm Springs; **Washington** (Kathleen, Linda, Sue); Wheeler; Yamhill

**State:** Cedric, Denise, Heather, Irina, Julie, June, Laurel, Lisa, Nasreen, Rob, Stephen, Tina, Tom

| NOTES |  |  |
|-------|--|--|
| Item  | Discussion/Decisions   | Action items   |
| 1     | <b>Overall Orpheus Update — Stephen:</b> <ul style="list-style-type: none"><li>- Stephen will be sending security audits to the Overall Responsible Parties in early September.</li><li>- Both Oregon Health Authority and Orpheus security policies automatically deactivate users after 90 days of inactivity. It can be a hassle to re-activate</li></ul> | <b>Login frequently to avoid being removed from the Citrix Active Directory.</b> |

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|   | once you've been removed from the Citrix Active Directory. Please login frequently to avoid being deactivated.   |  |
| 2 | <p><b>Login/Idle Time Issues — June:</b></p> <ul style="list-style-type: none"> <li>- Due to a federal security audit, any application accessed via Citrix will time out after 15 minutes of idle time. A dialog box will pop up at 13 minutes warning the user. Counties recommended 30 minutes instead of 15 minutes.</li> </ul>   | Stephen to follow up with IT to see if the idle time can be set to 30 instead of 15 minutes. |
| 3 | <p><b>ELR Update — June for Michelle</b></p> <p>June reviewed the approval/disapproval process for the following labs:</p> <ol style="list-style-type: none"> <li>1. Approval for St. Alphonsus to discontinue faxing (they have been sending since 5/6). <b>Approved</b></li> <li>2. Approval for Mid-Columbia Medical Center to discontinue faxing (they have been submitting since 9/11/2014; last check in was 2/29). <b>Approved</b></li> <li>3. Approval for St. Charles to discontinue faxing (they have been sending since 2007 – but have had intermittent issues with delays; our last check in was on 3/27) <b>Approved, pending Julie's audit.</b></li> <li>4. Approval for Blue Mountain to discontinue faxing (they have been sending since 9/25/15) <b>Approved, pending June's follow-up with Michelle.</b></li> <li>5. Approval for Women's Healthcare Associates to discontinue faxing (they have been sending since 3/1). <b>Approved</b></li> <li>6. Confirm approval for Coquille Valley to discontinue faxing (they were given tentative approval on 7/14 with confirmation expected on 8/1) <b>Approved, pending June's follow-up with Michelle.</b></li> <li>7. Any feedback on data from Wallowa (began ELR on 8/2) <b>Approved, pending June's follow-up with Michelle.</b></li> <li>8. Any feedback on Lake Health District (began ELR on 7/28) <b>Approved, pending June's follow-up with Michelle.</b></li> </ol> |  |

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9. Any feedback on PAML (began ELR on 8/2). Heather in Deschutes mentioned that they're sending everything. More information is needed before approving.

### Negative Lab results for Zika and CRE from OSPHL — June:

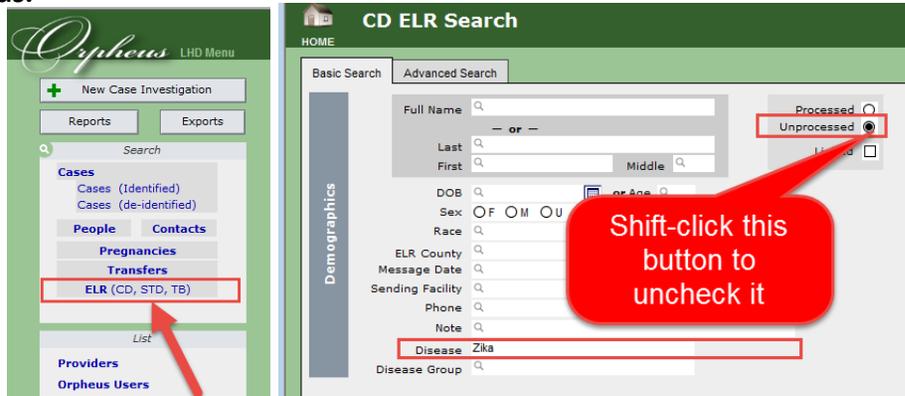
We are currently receiving negative Zika and CRE results from OSPHL; are there requests for other negative lab results? Denise would like to see negative Western Blots for HIV.

**Q. Are commercial labs going to start testing for Zika IgMs?** There are ongoing conversations about that, but currently not being done. If IgM is needed, the specimen has to go to OSPHL.

**Q. What commercial labs are doing PCR?** See the following link:  
<http://www.fda.gov/MedicalDevices/Safety/EmergencySituations/ucm161496.htm>

**Q. Can the State speak to the delays in PCR?** We're having issues getting the PCR results coming from OSPHL, but just received a batch.

### Negative AFBs and Negative FTAs from OSPHL — How to find them in Orpheus.



State to provide FDA link of commercial labs authorized to test for Zika on the Zika provider page.

Counties to send Lisa Takeuchi a note in Orpheus re: any missing Zika PCRs.

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## Contacting labs on reflex cultures — what is a reasonable length of time?

Julie

- Lots of labs are doing PCR testing in lieu of cultures; however, we have an agreement with the labs that they will do reflex testing on the PCR positive *Salmonella*, *Shigella*, *Yersinia*, and *Vibrio* – Shiga-toxigenic *E. coli* (STECs) typically get sent to the OSPHL.
- Julie has worked out an agreements, especially with Kaiser, to notify her when the culture was negative. She then updates Orpheus with the info and sends a note to the epi assigned to the case.
- If the counties try to call the labs about this, they're typically routed to client services, which won't know much (*reflex culture process is sort of off the books*).
- Culture results are available no earlier than 48 hours after the PCR test – **never call a lab prior to 48 hours after a PCR result.**
- STECs are particularly troublesome because it's often hard decipher the ELR result, e.g., the test order might be "culture," but if they report out "*Shiga-toxin detected*" positive or something like that, it doesn't necessarily mean they have an isolate.
- Stool cultures typically include *Salmonella*, *Shigella*, *Campylobacter*, and *E. coli* O157 – they may or may not include *Yersina* or *Vibrio*. We are encouraging labs to run some type of Shiga-toxin testing in addition to the actual plate.
- The only serotype of STEC that they can identify is *E. coli* O157, and not every laboratory can do that (there's a particular sugar that *E. coli* O157 doesn't ferment, and if they have an *E. coli* that is negative for that reaction, they

Counties to work with Julie before following up with labs for reflex culture results.

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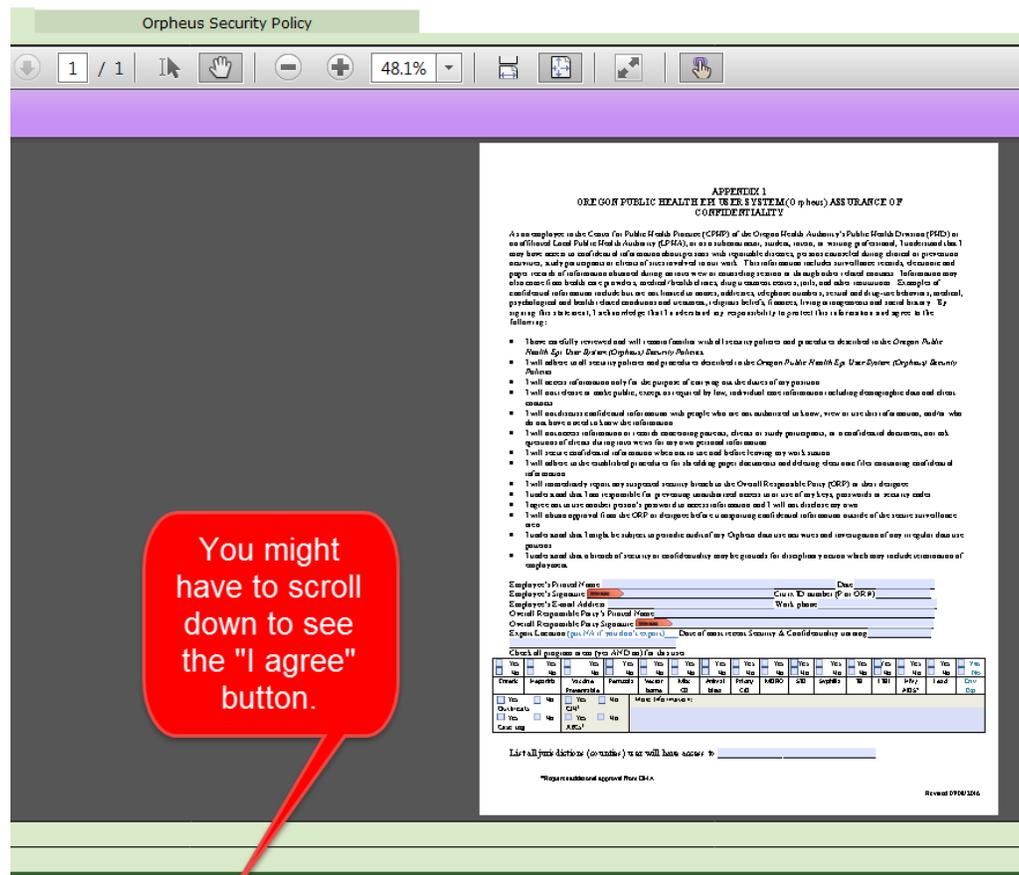
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|  | <p>need to do further testing, or, if they can't, then they need to send it to OSPHL).</p> <ul style="list-style-type: none"> <li>- You might get a report that says "possible" <i>E. coli</i> O157, but it may likely turn out not to be one. So they're very hard to interpret.</li> <li>- If the labs get a positive Shiga-toxin and they didn't isolate something that looks like an O157, then they send the broth to OSPHL, <b><u>which can take quite some time</u></b> before reporting a positive result, due to its labor-intensiveness complicated processes. If they get a positive Shiga-toxin reaction, they keep looking and try to find an actual organism on which to do further testing. Eventually, if they can't get an isolated colony that tests Shiga-toxin positive, then they'll finally turn it out as negative.</li> <li>- We don't want Counties to wait for the final results because they can take up to a few weeks (and some do turn out to be negative, especially when there's a long time between onset and actual testing).</li> </ul> <p><b>Discussion:</b> Debby hasn't experienced the problem yet, but is concerned about the scenario of someone in daycare whose only result is a "Shiga-toxin 102." She knows she would interview, but would she restrict daycare, etc.? June has recently taken over STEC and also is concerned. Taylor mentioned that one would still move forward with the interview, and if the person was symptomatic, they would be excluded from work or childcare. The issue is how long to keep them out with two negative stools that take a long time to finalize. This will be a training topic for the October webinar.</p> | <p><b>Counties to send June any specific questions or scenarios that they would like to review in the October STEC training webinar.</b></p> |
|  | <p><b>Security Oath pop up — Tom</b><br/>When your oath date expires, a dialog automatically pops up and is supposed to direct you to the oath within a browser window within Orpheus; however, you might be directed to Adobe Reader, which can be confusing. Tom is working with the Citrix folks at the State to see if there is an internet setting</p>   | <p><b>Counties to read the Orpheus oath, either from Adobe Reader or from the browser within Orpheus, before clicking "I agree."</b></p>     |

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that will prevent the user from being booted out of Orpheus and into Adobe Reader, but either way (in the meantime), please read the oath before clicking "I agree." Some users' screen settings require scrolling down to see the "I agree" button.

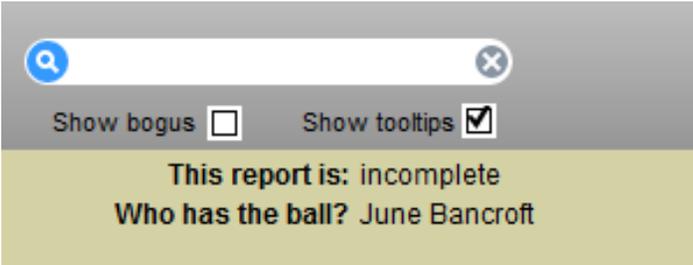


Cancel I agree

Clicking "I agree" means you have read and agree to the Orpheus security oath and Orpheus security policy.

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|  | <p><b>Out of state cases – should they be in the report table? June – 2 min</b></p> <p>The Report Table is refreshed with Case data from the Case Data Table every evening. Is there any reason to run a report on Out-of-State cases? <b>No response.</b></p>   | <p><b>June to follow up internally re: state needs for out-of-state-related reports.</b></p> |
|  | <p><b>Disease update – splitting <i>Ehrlichia</i> and <i>Anaplasma phagocytophilum</i> – Stephen – 5 min</b></p> <p>Up until yesterday, <i>Ehrlichia</i> spp. and <i>Anaplasma phagocytophilum</i> were grouped as one disease (Ehrlichia/Anaplasma). Because they’re two different organisms with two different NETSS codes, they deserve two separate disease designations in Orpheus. “<i>Ehrlichia</i>, unspecified” is used if we were not able to distinguish.</p>   |  |
|  | <p><b>Filter incomplete outbreaks by “Who has the ball?”</b></p> <p>There are three levels of outbreak completeness: County, State (epi), State (epi finalizer). Currently, all outbreaks show up on the user’s home page if they’re incomplete at any level. State is proposing to have a feature that filters completeness by level such that you only see the incomplete outbreaks for which you “have the ball.” <b>Counties agreed with this proposal.</b></p>  |  |

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|  | <p><b>Feature request – future note?</b> When you create a note for yourself in Orpheus, and you date it for the future, it shows up in the To Do list immediately with the future date at the top of the list. It's possible to have it display on the date it's assigned or to have displayed when it's created. State proposed to create a toggle button in the User Settings that allows the user to determine when to display a note for the future – either on the date when it's to be done, or the date when it's created. <b>Counties agreed with this proposal.</b></p> |  |
|  | <p><b>Trainings – Monthly Webinars – 1st Wednesdays 10:30-11:30</b></p> <p>Needed training topics? <b>No suggestions.</b><br/>Intermediate User training – Sept 7th<br/>STEC training – Oct 5th</p>   |  |
| <p><b>Future Meetings: 2<sup>nd</sup> Thursdays @ 1:30 PM</b><br/>September 8, 2016<br/>October 11, 2016</p> |   |  |