

# First Nations Health Authority Health through wellness

# Panorama User Guide #3

TB Screening Data Entry Follow-up Without a Skin Test

Version 3.2

Contact us at: panorama@fnha.ca

Find our guides at: http://www.fnha.ca/what-we-do/communicable-disease-control/panorama

# **Table of Contents**

Please Note:	3
Search for Client Chart	4
Subject Summary	5
Viewing Subject Summary	5
Edit/Update Client Demographics	8
Create a TB Investigation	
Adding External Sources	11
Risk Factors	
Types of Risk Factors	
For Children under the age of 19	
Risk Factors from iPHIS Transfer:	
Signs & Symptoms	
Update TB History Summary	
Create TB Follow-Up Only	
Encounters	23
Notes	24
Closing Investigations	25

## **Please Note:**

It is required for CHNs working in FN communities with Panorama access to have training with the FNHA Panorama team prior to use of the Panorama system. Panorama guides are to be used in <u>conjunction</u> with formal FNHA Panorama training. To arrange a training session, please contact panorama@fnha.ca

This guide is appropriate for TB screens where **there is no TB skin test involved** (ie. Client has a previous positive TST). This detailed guide will show you through the steps in entering your client's TB screening information:

Use the tool "*Which Panorama TB Guide Should I Use*?" To help you to determine how to enter your screens.

This detailed guide will show you through the steps in entering your client's TB screening information:

- Search and update client information (Last/First Name, DOB; Jurisdictional Registry)
  - Review/Edit Client Demographics
  - Add/Update Indigenous Information
  - o Add Immigration Information
  - Add Allergies
- Create TB Investigation
  - o Add External Sources
- Add Risk Factors
- Add Signs and Symptoms
- Enter TB History Summary
- Enter TB Follow Up-Only
- Close Investigation (if applicable)

This guide accompanies Panorama TB Screening Data Entry – QuickGuide (for Guide #2 and Guide #3)

# **Search for Client Chart**



For more information about creating, searching and opening client charts please see our <u>Core Guide</u>

### In the INVESTIGATIONS Module:

#### Search/Create Client

LHN > Search > **Search Clients** 

Ensure you have done a thorough search for the correct client and that all demographic information are correct and up-to-date.

- Search client following your choice of search options (See <u>Panorama Core Guide</u>).
- 2. Using the search results table, choose a single client by selecting the checkbox next to the *Client ID column*
- 3. Under *Row actions*, you will have several choices depending upon which module you are in. Select **SUBJECT SUMMARY**.
- 4. Alternately, you can select **CREATE CLIENT** if you have done a thorough search and the client does not have a chart in Panorama. You can then create the client's chart.

Ensure you have done a thorough search for the correct client and that all demographic information are correct and up-to-date.

	Searc	ch Res	ults							<b>~</b>	
	3 Client Quick Entry Create Client										
	Pre	eview	Update	Set In Context Create C	ohort Subje	ect Summary	>		4		
2			Client ID 🗢	Health Card Number 🗘	Last Name	First Name	Gender ≎	Date of Birth 🔺	Health Region 🗘	Active \$	
(		0	2456366	9000188885	FNTRAINE	FHALICE	Female	2019 Jan 24	_Inactive - Vancouver	Active	
		0	2456370	9000188932	FNTRAINE	FHALICE	Female	2019 Jan 24	_Inactive - Vancouver	Active	
		0	2456374	9000188989	FNTRAINE	FHALICE	Female	2019 Jan 24	_Inactive - Vancouver	Active	
		0	2456378	9000189031	FNTRAINE	FHALICE	Female	2019 Jan 24	_Inactive - Vancouver	Active	

# **Subject Summary**

A client's subject summary page is a great way to get a quick overview of client encounters and investigations Tip: To "hide" and show" components of the screen, click the *hide* or *show* hyperlinks along the encounter headers to view/hide more details Viewing Subject Summary With your client in context: 🇙 Hide Show **TB** Investigations • When the User does not have data access to a module or an Investigation, the Investigation and all associated Encounters are not displayed

The Subject Summary screen lists all Encounters and *Investigations* that have been recorded for a client under the various Encounter Groups (Communicable Disease, Sexually Transmitted Investigations, and Tuberculosis Disease Investigation, Immunization). Depending on which Module you are in, the subject summary page may vary slightly.

#### LHN > Investigation > Subject Summary

Investigation Encounter Groups are sectioned off by:

- **CD** Investigations (excluding TB and STIs)
- STI and HIV Investigations
- and Immunizations.

You can navigate to any investigation or encounter that are listed on the screen by clicking the appropriate hyperlink: Investigation ID, Encounter Date. This also sets the Investigation or Encounter in context.



Subject Sun	innary			0 2
Alerts A	otes			ACTIVE
Client ID:	Name(Last, First Middle) / Gender:	Health Card No:	Date of Birth / Ag	e:
2448450	FNTRAINER01, ACTIVETB / Female	-	1975 May 23 / 44 y	ears
Phone Number:	Health Region Organization:	Additional ID Type /	_	
Primary home: 604-250-2222	Vancouver,Vancouver-City Centre	Encounter Groups are sectioned off by dark grey bars		
Report:		~	Launch	
Communicable Di	sease Investigation,			😽 Show
excluding TB and	STI Encounter Group		Sele	ct here to create an
Sexually Transmit	ted Infections Investigation		enco	stigation under this with the second strength with the second second second second second second second second
Encounter Group			exar crea	nple, selecting here will te a new TB investigation
Tuberculosis Disea	ase Investigation Encounter			\$ Hide
Group				
vestigation 70	1362 - Tuberculosis - OF	PEN	nt): Report Date (Rece	A Hide
vestigation ID: Sta 362 OP	1362 - Tuberculosis - OF tus: Investigator: Linked Outl EN P - Etiologic Agent Epi Markers	PEN preaks: Report Date (Ser - Authority / Classification (√ Primary Classification	nt): Report Date (Rece 26 June 2017 Classif. Date , Δ Set by Case Def)	★ Hide Hide Fived): A quick summary of the investigation is shown here. It will show information the disease, investigation statu.
vestigation ID: Sta 362 OP isease uberculosis	1362 - Tuberculosis - OF tus: Investigator: Linked Outl EN  - Etiologic Agent Epi Markers 	PEN Preaks: Report Date (Ser - Authority / Classification (✓ Primary Classification ✓ Provincial / Case - Co	nt): Report Date (Rece 26 June 2017 Classif. Date , Δ Set by Case Def) onfirmed 2017 Jun 26	<ul> <li>Hide</li> <li>A quick summary of the investigation is shown here. It will show information I the disease, investigation statu, when it was first reported, and how</li> </ul>
vestigation 70 vestigation ID: Sta 362 OP isease uberculosis	362 - Tuberculosis - OF         tus:       Investigator:       Linked Outh         En       -       -         Etiologic Agent       Epi Markers         -       -         70362 Encounters	PEN preaks: Report Date (Ser - Authority / Classification (✓ Primary Classification ✓ Provincial / Case - Co	nt): Report Date (Rece 26 June 2017 Classif. Date , Δ Set by Case Def) onfirmed 2017 Jun 26	Hide sived): A quick summary of the investigation is shown here. It will show information It the disease, investigation statu, when it was first reported, and how case is classified
vestigation 70 vestigation ID: Sta 362 OP isease uberculosis investigation 4 encounter(s) total	1362 - Tuberculosis - OF         tus:       Investigator:       Linked Outle         EN       -         Etiologic Agent       Epi Markers         -       -         70362 Encounters	PEN preaks: Report Date (Ser - Authority / Classification (✓ Primary Classification ✓ Provincial / Case - Co	nt): Report Date (Rece 26 June 2017 Classif. Date , Δ Set by Case Def) onfirmed 2017 Jun 26 Click Enc	<ul> <li>Hide</li> <li>A quick summary of the investigation is shown here. It will show information I the disease, investigation statu when it was first reported, and how case is classified</li> <li>counter Date for encounter details.</li> </ul>
vestigation 10: Sta 362 OP isease uberculosis Investigation 4 encounter(s) total Move Selected Enc	362 - Tuberculosis - OF         tus:       Investigator:       Linked Outh         Etiologic Agent       Epi Markers         -       -         70362 Encounters         ounter(s) To:	PEN preaks: Report Date (Set - Authority / Classification   (✓ Primary Classification ✓ Provincial / Case - Co	nt): Report Date (Rece 26 June 2017 Classif. Date , Δ Set by Case Def) on firmed 2017 Jun 26 Click Enc nters table is	Hide sived): A quick summary of the investigation is shown here. It will show information It the disease, investigation statu when it was first reported, and how case is classified A quick summary of the investigation statu when it was first reported, and how case is classified
vestigation 70 vestigation ID: Sta 362 OP isease uberculosis Investigation 4 encounter(s) total Move Selected Enc Investigation: 70362	362 - Tuberculosis - OF         tus:       Investigator:       Linked Out         EN       -       -         Etiologic Agent       Epi Markers         -       -         70362 Encounters         ounter(s) To:         (Tuberculosis) Non-Episode Encounters	PEN preaks: Report Date (Ser - Authority / Classification   (✓ Primary Classification ✓ Provincial / Case - Co Provincial / Case - Co Encour organit type, e	nt): Report Date (Rece 26 June 2017 Classif. Date , Δ Set by Case Def) onfirmed 2017 Jun 26 Click Enc ters table is zed by encounter ncounter reason, zation and location	Hide tived): A quick summary of the investigation is shown here. It will show information I the disease, investigation status when it was first reported, and how case is classified
vestigation 70 vestigation ID: Sta 362 OP isease uberculosis Investigation 4 encounter(s) total Move Selected Enco Investigation: 70362 Non-Episode Enco	362 - Tuberculosis - OF         tus:       Investigator:       Linked Out         EN       -       -         Etiologic Agent       Epi Markers         -       -         70362 Encounters         ounter(s) To:         (Tuberculosis) Non-Episode Encounters         unters	PEN Dreaks: Report Date (Ser - Authority / Classification   (✓ Primary Classification ✓ Provincial / Case - Co Move Encour organi (SDL)	nt): Report Date (Rece 26 June 2017 Classif. Date , Δ Set by Case Def) onfirmed 2017 Jun 26 Click Enc Click Enc nters table is zed by encounter ncounter reason, zation and location	Hide Hide Hide Hide Hide Hide Hide Hide
vestigation 70 vestigation ID: Sta 362 OP isease uberculosis Investigation 4 encounter(s) total Move Selected Enco Investigation: 70362 Non-Episode Encounter (	0362 - Tuberculosis - OF         tus:       Investigator:       Linked Outle         EN       -       -         Etiologic Agent       Epi Markers         -       -         70362 Encounters         ounter(s) To:         (Tuberculosis) Non-Episode Encounters         unters         Date       Encounter Type	PEN preaks: Report Date (Ser - Authority / Classification (✓ Primary Classification ✓ Provincial / Case - Co Encounter Reasons	nt): Report Date (Rece 26 June 2017 Classif. Date , ∆ Set by Case Def) onfirmed 2017 Jun 26 Click Enc Click Enc Click Enc nters table is zed by encounter ncounter reason, zation and location	Hide Hide Hide Hide Hide Hide Hide Hide
vestigation 70 vestigation ID: Sta 362 OPP isease uberculosis Investigation 4 encounter(s) total Move Selected Enco Investigation: 70362 Non-Episode Encounter I 2017 Jun 27	0362 - Tuberculosis - OF         tus:       Investigator:       Linked Outter         EN       -       -         Etiologic Agent       Epi Markers         -       -         70362 Encounters         ounter(s) To:         (Tuberculosis) Non-Episode Encounters         unters         Date       Encounter Type         Clinic visit	PEN Dreaks: Report Date (Ser - Authority / Classification (✓ Primary Classification ✓ Provincial / Case - Co Provincial / Case - Co Encounter Reasons Appointment - new active	nt): Report Date (Rece 26 June 2017 Classif. Date , △ Set by Case Def) onfirmed 2017 Jun 26 Click Enc Click Enc Three Corners Health Serv	Hide Hide Hide Hide Hide Hide Hide Hide
vestigation 70 vestigation ID: Sta 362 OPP isease uberculosis Investigation 4 encounter(s) total Move Selected Enco Investigation: 70362 Non-Episode Encounter I 2017 Jun 27 2017 Jun 25	362 - Tuberculosis - OF         tus:       Investigator:       Linked Outter         En       □       -         Etiologic Agent       Epi Markers         -       -         70362 Encounters         ounter(s) To:         (Tuberculosis) Non-Episode Encounters         unters         Date       Encounter Type         Clinic visit         Lab	PEN Dreaks: Report Date (Ser - Authority / Classification (✓ Primary Classification ✓ Provincial / Case - Co Provincial / Case - Co Encounter Reasons Appointment - new active -	nt): Report Date (Rece 26 June 2017 Classif. Date , △ Set by Case Def) onfirmed 2017 Jun 26 Click Enc Click Enc C	Hide Hide Hide Hide Hide Hide Hide Hide

estigati 121	ion ID: Status CLOS	ED	Linked Outbreaks: Report Date	(Sent): Report Date May 13, 2015	The Investigation Module organizes the subject summary by investigations and encounters under the various Encounter Groups.
sease	c	ausative Agent F	Further Authority / Classifica	ition   Classif, Deta cation set by Case De	Newer investigations/ encounters are listed first
berculo	osis -	-	✓ Provincial / Ca	se - Not a Case 2015	May 15
Inve	stigation 7	0421 Encoun	ters		<b>∧</b> Hide
1 enco	ounter(s) total	0421 Encoun		Cli	ick Encounter Date for encounter details
Move S	Selected Encountigation:70421 N	nter(s) To: on-Episode Encoun	Select here to encounter un TB investigati	ocreate an der this specific on	
Non-E	pisode Encount	ers			Create Encounter Hide
	Encounter Date	Encounter Type	Encounter Reasons	Organization	Location
					- Health Three Corpore Health
nasso ncounte ve Sele	2015 May 13 Ociated End er(s) total octed Encounter	Clinic visit	Screen - TB Services for aboriginal cor (TBSAC)(11)	mmunity Three Corners Services	Centre
nasso ncounte ve Sele nassoci	2015 May 13 Ociated End er(s) total octed Encounter lated Non-Episo ode Encounters	Clinic visit counters (Nor (s) To: de Encounters	Screen - TB Services for aboriginal cor (TBSAC)(11)	mmunity Three Corners Services	Centre Conters Health Centre
ncounte ve Sele nassoci n-Episo	2015 May 13 Ociated End er(s) total octed Encounter iated Non-Episo ode Encounters	Clinic visit	Screen - TB Services for aboriginal cor (TBSAC)(11)	mmunity Three Corners Services	Hide Contres Health Centre
nasso ncounte ve Sele iassoci n-Episo	2015 May 13 Ociated End er(s) total octed Encounter iated Non-Episo ode Encounters inter Date	Clinic visit	Screen - TB Services for aboriginal cor (TBSAC)(11)	mmunity Three Corners Services	Hite Contre Centre Ride Rick Encounter Date for encounter detail Create Encounter
nasso ncounte ve Sele associ n-Episo Encour	2015 May 13 ociated End er(s) total ected Encounter iated Non-Episo ode Encounters nter Date	Clinic visit Counters (Nor (s) To: de Encounters Encounter Type	Screen - TB Services for aboriginal cor (TBSAC)(11)	mmunity Three Corners Services Cl Organization ✓ Contains Data	Centre Centre Nick Encounter Date for encounter detail Create Encounter Location KHide
nasso ncounte ve Sele associ n-Episo Encour muniz	2015 May 13 ociated Encounter ated Encounters ode Encounters nter Date ation Encourt ociated Encourt	Clinic visit Counters (Nor (s) To: de Encounters Encounter Type hter Group counters (Nor	Screen - TB Services for aboriginal cor (TBSAC)(11)	mmunity Three Corners Services C Organization ✓ Contains Data	Hitee Conters Health Centre  Hide  Cick Encounter Date for encounter detail  Create Encounter Hide  KHide
association necounter ve Sele- association Encounter munizan nassociation encounter ve Sele- nassociation	2015 May 13 ociated Encounter ated Encounters ode Encounters ode Encounters ode Encounters ode Encounters ode Encounters ociated Encounter ter(s) total ected Encounters	Clinic visit Counters (Nor (s) To: de Encounters Encounter Type Inter Group Counters (Nor (s) To: (s) T	Screen - TB Services for aboriginal cor (TBSAC)(11) Investigation) Investigation Encounter Reasons Investigation) Encousting Move	mmunity Three Corners Services C Organization ✓ Contains Data ounters that are not ociated with an estigation will fall her	Inter Conters Health Centre Lick Encounter Date for encounter details Location Hide Mide ounter Date for encounter details.
association necounter ve Sele- iassocia n-Episo Encount muniz nassociation encount ove Sele- nassociation	2015 May 13 Ociated Encounter ated Encounters ode Encounters ode Encounters ode Encounters ociated Encounter cation Encounter ter(s) total ected Encounters ociated Encounters ode Encounters	Clinic visit	Screen - TB Services for aboriginal cor (TBSAC)(11)	mmunity Three Corners Services C Organization ✓ Contains Data ounters that are not ociated with an estigation will fall her	Three Conters Realin Centre  Hide Centre  Hide Centre  Hide Create Encounter Hide Create Encounter details. Create Encounter details. Create Encounter details.
association necounter ve Seler iassociation n-Episo Encount muniz nassociation muniz nassociation muniz nassociation muniz nassociation	2015 May 13 ociated End er(s) total octed Encounters ated Non-Episo ode Encounters nter Date cation Encount ected Encounters ter(s) total ected Encounters ode Encounters ode Encounters ode Encounters	Clinic visit	Screen - TB Services for aboriginal cor (TBSAC)(11) Investigation) Investigation) Encounter Reasons Investigation) Encounter Reasons Move	mmunity Three Corners Services Cl Organization ✓ Contains Data ounters that are not ociated with an estigation will fall here Organization	Inter Conters Health Centre Centre Cick Encounter Date for encounter details Create Encounter Location

## **Edit/Update Client Demographics**

· Jubjeet					
<ul> <li>Client Details</li> </ul>					
Client Demogra	Client Demographics				
Occupation/Edu	ucation				
Health Services	;				
Einancial Assis	tance				
To create a new record click	Add.	Add			
Add Health Region History	- 4.	Apply Reset			
* Health Region Organization: Chilliwack, Chilliwack, British Columbia	<b>()</b> Q				
* Effective From: 2018/01/01	End Dating old Health Region				
	Organizations	Apply Reset			

For more information on updating client information and Indigenous Information and allergies please refer to the <u>Core Guide</u>

#### **Client Demographics**

LHN > Subject > Client Details > Client Demographics

- 1. Ensure Client skeleton information is correct (First Name, Last Name, DOB, PHN)
- Ensure Health Region Organization is correct. Use the ADD button to add the most recent location of residence (ie. The associated Public Health Unit for their Health Centre/Nursing Station). End Date old Health Regions. Select APPLY and SAVE your changes

*Eg. For Stolo Nation, their closest Regional Health Authority branch is Chilliwack* 

Health Region Organization:					
					Add
Update Delete					
B Health Region Organization ◆	Effective From	<b>.</b> •		Effective To 🗘	
Chilliwack	2018 Jan 01			2019 Aug 21	
Total: 1		1			10 ~
Telephone Numbers         Number Type:       Number:       ext         Effective       ext       ext         Effective       From: [2018] / [21]       To: [] / [] / []       ext         Row Actions:       Update       Delete       Set Preferred         Number Type       Number       Effective from       Effective Io         Primary home       (250) 555-5550       2017 Dec 23       -         Address Format:       Obmestic       International       Scowlaz         • Address Type:       Address on Reserve Administered By:       Primary home       Scowlaz         Unit No:       Street No:       Street Name:       Street Type:       102         102       246       Mideleothe       Road       P         PO. Box:       STH:       RPO:       Rural Route:       X         Country:       Province / Territory:       City / Town:       P       X         Other Address Details:       Latitude:       Longitude:       X       X         Other Address Details:       To:       To:       Y       Y       X         Ident Columbia       Chilliwack       X       X       X         Other Address Details:       To:	Add Clear Preterred Street Direction: stal Code: 0X-0X0	3.	Ensure Phone Num including Address if appropriate. ADD table below each s numbers and add numbers or addre Ensure all other fie are up-to-date (if i SAVE your work	nbers and Addresses are Located On Reserve info and <b>SAVE</b> your chang section. End date any o resses. DO NOT DELE esses elds in the <i>Client Demo</i> nformation is known)	e correct ormation if es to the old phone TE old graphics page

Address on Reserve Administered By:	
ch	
Chawathil Street	
Cheam Road	
Cheslatta Carrier Nation Rural Route:	
- Subject	Indigenous Information
	LHN > Subject > Client Details > Indigenous Information
Client Demographics	
Occupation/Education	1. Complete the Indigenous Information questions
Health Services	Organization (use (1) location) SAVE your work
Financial Assistance	organization (use (i) location). SAVE your work
	For more detailed information on how to update
Indigenous Information	Indigenous Information, please see the <b>Panorama Core</b>
Immigration Information	Guide or Completing Indigenous Information Guide
▼ Subject	Immigration Information
Client Details	
Client Demographics	LHN > Subject > Client Details > <b>Immigration</b>
Occupation/Education	Information
Health Services	1. For TB screens, the <i>Immigration Information</i> section
Einaneial Accistance	<u>must be entered</u> .
	2. Indicate if <i>Canadian citizen</i> (yes/no)
	3. Country Born In:
Immigration Information	If born in <i>Canada</i> , indicate Province (if known)
	4. Complete the other fields if known/applicable
	5. SAVE your work
- Subject	Add Client Allergies
Client Details	LHN > Subject > Allergies
Client Warnings	1. If client has no allergies, select <b>SET NKA</b> or <b>CONFIRM</b>
Relationships	NKA or
Households	2. Select <b>ADD</b> and enter client's allergies.
Consent Directives	For more detailed information on how to update client
Allergies	allergies, please see the Panorama Core Guide
Allergies	
Diele Castere	

## **Create a TB Investigation**

Investigation Summary Investigation Information Investigaton Information Investigation Information Investigaton Information Investigator Organization Infract Level 2 (specific one) > Level 3 (specific one) > Investigator Organization Infract Level 2 (specific one) > Level 3 (specific one) > Investigator Organization Infract Infract Neurons Health Services Society Investigator Organization Infract				
Subject Summary         Investigation Summary         Investigation Summary         Image:         Image: </th <th>🕶 Investig</th> <th>ation</th> <th></th> <th></th>	🕶 Investig	ation		
Investigation Summary         2         Create Investigation         Disease Summary         3.a-e         • Unease:         • Uneastigation Information         4. a-b         Priority:         • Disposition:         Screening         • Disposition:         Screening         • Disposition:         Screening         • Responsible Organization / Investigator         5. a-f         * Responsible Organization fort click on the 'Find' button. Then search, or type the Then click' Close' to close.         Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) > Level 3 (specific one) >         * Responsible Organization Date :       2018 / 07 / 20         Organization Vorkgroup :       TCHSS TB $\checkmark$ Investigator Workgr	Subjec	t Summary		
2         Create Investigation         Disease Summary         3.a-e         • Unesse:         • Unesse:         • Unesse:         • Unesse:         • Unesse:         • Classification:         • Priority:         •         • Disposition:         Screening         • Nesponsible Organization / Investigator         • Responsible Organization first click on the 'Find' button. Then search, or type the Then click' Close' to close.         • Organization:       Three Corners Health Services Society         • Responsible Organization Workgroup:       TCHSS TB >         • Neestigator Organization:       Three Corners Health Services Society >         • Nestigator Organization:       Three Corners Health Services Society >         • Nevestigator Organization:       Three Corners Health Services Society >         • Investigator Vorkgroup:       TCHSS TB >         Inve	Investi	gation Summa	ry	
2         Create Investigation         Disease         • Disease:         • Authority:         • Disease:         • Classification:         • Classification Date:         2018 / 07 / 20         Causative Agent:         Causative Agent:         • Disposition Date:         2018 / 07 / 20         Further Differentiation:         Investigation Information       4. a-b         Priority:         •         • Disposition:       Screening         * Disposition:       Screening         * Responsible Organization / Investigator       5. a-f         * Responsible Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close.         Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Date :       2018 / 07 / 20         * Investigator Organization       Three Corners Health Serv				
2         Create Investigation         Disease Summary         3.a-e         • Disease:         • University         • Classification:         Causative Agent:         · Classification Date:         · Other Differentiation:         Further Differentiation:         Investigation Information         4. a-b         Priority:         · Disposition:         Screening         * Responsible Organization / Investigator         5. a-f         * Responsible Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close.         Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Workgroup :         TCHSS TB ~         * Responsible Organization:         * Investigator Organization :         * Investigator Vorkgroup :         TCHSS TB ~         Investigator Workgroup :         TCHSS TB ~         Investigator Workgroup :				
Piecese         • Disease Summary         • Disease         • Authority:         • Provincial ·         • Classification Date:         • Other and the second				
Image: Create Investigation         Disease Summary         3.a-e         • Disease:         • Authority:         • Priority:         • Official on Date:         • Official on Officia				
Disease Summary       3.a-e         • Disease:       • Underclosis         • Authority:       • Provincial ····································		~		
Create Investigation         Disease Summary         * Obsesse:         * Obsesse:         * Authority:         * Classification Date:         2018         2018         * Classification Date:         2018         2018         * Classification Date:         2018         201	~		2	
Disease Summary       3.a-e         • Disease:       Iuberculosis         • Authority:       Proincial         • Classification Date:       2018         · Classification Date:       · · · · · · · · · · · · · · · · · · ·	Create	e Investigatio	n	
Disease Summary       3.a-e         * Disease:       Tuberculosis         * Authority:       Provincial         * Classification Date:       2018 / 07 / 20         Yyyy       mm         6d       Causative Agent:         Further Differentiation:       Investigation Information         4. a-b       Priority:         * Disposition:       Screening         * Disposition:       Screening         * Disposition:       Screening         * Responsible Organization / Investigator       5. a-f         * Responsible Organization :       Three Corners Health Services Society         To specify an Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close.         Organization:       Top Level > Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Date :       2018 / 07 / 20         * Responsible Organization :       Three Corners Health Services Society ~         * Investigator Organization :       Three Corners Health Services Society ~         * Investigator Organization :       Three Corners Health Services Society ~         * Investigator Workgroup :       TCHSS TB ~         Investigator Name :				
* Disease: Tuberculosis * Classification Date: 2016 / 07 / 20  Further Differentiation:  Investigation Information 4. a-b  Priority: * Disposition: Screening * Disposition: Screening * Disposition: Screening * Disposition: Screening * Responsible Organization / Investigator 5. a-f  * Responsible Organization : Three Corners Health Services Society To specify an Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close. Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) >  * Responsible Organization Date : 2018 / 07 / 20 * Investigator Organization : Three Corners Health Services Society with the services Society of the State of the transmission of the	Disease Summary	3.а-е		
<ul> <li>Authority: Provincial  <ul> <li>Classification Date: 2018 / 07 / 20</li> <li>Classification Date: 2018 / 07 / 20</li> </ul> </li> <li>Causative Agent:  <ul> <li><ul> <li><ul></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul>	*Disease:	Tuberculosis ~		
*Classification Date: 2018 / 07 / 20 Gausative Agent: Further Differentiation: Further Differentiation: A. a-b Priority: * Disposition: Screening * Disposition: Screening * Disposition: Screening * Responsible Organization / Investigator 5. a-f * Responsible Organization : Three Corners Health Services Society To specify an Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close. Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) > * Responsible Organization Date : 2018 / 07 / 20 yyyy mm dd * Investigator Organization : Three Corners Health Services Society * Responsible Organization Date : 2018 / 07 / 20 Jyyy mm dd	*Authority:	Provincial ~	* Classification: Case - Person Under Inve	estigati
Yyyy       mm       dd         Causative Agent:	*Classification Date:	2018 / 07 / 20 🛅		
Further Differentiation:         Further Differentiation:         Investigation Information       4. a-b         Priority:       ``         * Disposition:       Screening         * Disposition:       Screening         Responsible Organization / Investigator       5. a-f         * Responsible Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close.         Organization:       To receive location         Organization:       To Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Date:       2018 / 07 / 20         * Investigator Organization:       Three Corners Health Services Society v         * Investigator Workgroup:       TCHSS TB v         Investigator Workgroup:       TCHSS TB v         Investigator Name:       Vyyy mm dd         * Assigned Date:       2018 / 07 / 20         yyyy mm dd       Vyyy mm dd	Causative Agent:	yyyy mm dd	~	
Further Differentiation:         Investigation Information         4. a-b         Priority:         * Disposition:         Screening         * Disposition:         Screening         * Responsible Organization / Investigator         5. a-f         * Responsible Organization / Investigator         5. a-f         * Responsible Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close.         Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Workgroup :         TCHSS TB ~         * Responsible Organization:         * Investigator Organization:         Three Corners Health Services Society ~         * Investigator Workgroup :         TCHSS TB ~         Investigator Workgroup :         TCHSS TB ~         Investigator Name :         * Assigned Date :         2018       / 07         yyyy         mm			¥	
Investigation Information       4. a-b         Priority:       ~         * Disposition:       Screening         * Disposition:       Screening         Responsible Organization / Investigator       5. a-f         * Responsible Organization / Investigator       5. a-f         * Responsible Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close.         Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Workgroup :       TCHSS TB ~         * Responsible Organization Date :       2018 / 07 / 20	Further Differentiation:			
<ul> <li>* Disposition: Screening</li> <li>Responsible Organization / Investigator 5. a-f</li> <li>* Responsible Organization : Three Corners Health Services Society         To specify an Organization first click on the 'Find' button. Then search, or type the         Then click 'Close' to close.         Organization: Top Level &gt; Level 2 (specific one) &gt; Level 3 (specific one) &gt;         Responsible Organization Workgroup : TCHSS TB ~         Responsible Organization Date : 2018 / 07 / 20 m</li></ul>	Priority:		a-D	
Responsible Organization / Investigator       5. a-f         * Responsible Organization : Three Corners Health Services Society         To specify an Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close.         Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Workgroup : TCHSS TB ~         * Responsible Organization Date :       2018 / 07 / 20 m         * Investigator Organization : Three Corners Health Services Society ~         * Investigator Workgroup :       TCHSS TB ~         Investigator Workgroup :       TCHSS TB ~         Investigator Name :       *         * Assigned Date :       2018 / 07 / 20 m         yyyy       mm	*Disposition:	Sereening		
Responsible Organization / Investigator       5. a-f         * Responsible Organization : Three Corners Health Services Society         To specify an Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close.         Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Workgroup : TCHSS TB ~         * Responsible Organization Date : 2018 / 07 / 20 mm dd         * Investigator Organization : Three Corners Health Services Society ~         * Investigator Workgroup : TCHSS TB ~         Investigator Workgroup : TCHSS TB ~         Investigator Name :         * Assigned Date : 2018 / 07 / 20 mm dd	Disposition.	Screening	~	
Responsible Organization / Investigator       5. a-f         * Responsible Organization :       Three Corners Health Services Society         To specify an Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close.         Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Workgroup :       TCHSS TB ~         * Responsible Organization Date :       2018 / 07 / 20 Im         * Investigator Organization :       Three Corners Health Services Society ~         * Investigator Workgroup :       TCHSS TB ~         Investigator Workgroup :       TCHSS TB ~         Investigator Name :       *         * Assigned Date :       2018 / 07 / 20 Im         yyyy       mm				_
<ul> <li>* Responsible Organization : Three Corners Health Services Society         To specify an Organization first click on the 'Find' button. Then search, or type the         Then click 'Close' to close.         Organization: Top Level &gt; Level 2 (specific one) &gt; Level 3 (specific one) &gt;         </li> <li>* Responsible Organization Workgroup : TCHSS TB ~         </li> <li>* Responsible Organization Date : 2018 / 07 / 20 m         dd         </li> <li>* Investigator Organization : Three Corners Health Services Society ~         <ul> <li>* Investigator Workgroup : TCHSS TB ~</li> </ul> </li> <li>* Investigator Workgroup : TCHSS TB ~</li> <li>* Investigator Workgroup : TCHSS TB ~</li> <li>Investigator Workgroup : TCHSS TB ~</li> <li>Investigator Name :</li></ul>	Responsible O	rganization / Investi	<sub>gator</sub> 5. a-f	
To specify an Organization first click on the 'Find' button. Then search, or type the Then click 'Close' to close. Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) > * Responsible Organization Workgroup : TCHSS TB ~ * Responsible Organization Date : 2018 / 07 / 20	* Responsible O	rganization : Three Cor	ners Health Services Society	
Organization: Top Level > Level 2 (specific one) > Level 3 (specific one) >         * Responsible Organization Workgroup : TCHSS TB ~         * Responsible Organization Date : 2018 / 07 / 20 mm dd         * Investigator Organization : Three Corners Health Services Society ~         * Investigator Workgroup : TCHSS TB ~         Investigator Workgroup : TCHSS TB ~         Investigator Name :         * Assigned Date : 2018 / 07 / 20 mm dd	To specify an O Then click 'Clos	rganization first click on the se' to close.	'Find' button. Then search, or typ	e the
<ul> <li>* Responsible Organization Workgroup : TCHSS TB ~</li> <li>* Responsible Organization Date : 2018 / 07 / 20 mm dd</li> <li>* Investigator Organization : Three Corners Health Services Society ~</li> <li>* Investigator Workgroup : TCHSS TB ~</li> <li>Investigator Name :</li> <li>* Assigned Date : 2018 / 07 / 20 mm dd</li> </ul>	Organizatio	n: Top Level > Level 2 (sp	ecific one) > Level 3 (specific o	ne) >
<ul> <li>* Responsible Organization Date : 2018 / 07 / 20 dd</li> <li>* Investigator Organization : Three Corners Health Services Society ~</li> <li>* Investigator Workgroup : TCHSS TB ~</li> <li>Investigator Name :</li> <li>* Assigned Date : 2018 / 07 / 20 dd</li> </ul>	* Responsible O	rganization Workgroup		
Kesponsible organization bate : 2018 / 07 / 20 yyyy mm dd     * Investigator Organization : Three Corners Health Services Society      * Investigator Workgroup : TCHSS TB      Investigator Name :     Assigned Date : 2018 / 07 / 20 yyyy mm dd	* Perponsible O	rganization Date :		
<ul> <li>* Investigator Organization : Three Corners Health Services Society ~</li> <li>* Investigator Workgroup : TCHSS TB ~</li> <li>Investigator Name :</li> <li>* Assigned Date : 2018 / 07 / 20 □</li> <li>yyyy mm dd</li> </ul>	Responsible O	rganization Date :	yyyy mm dd	1
<ul> <li>Investigator Workgroup : TCHSS TB ~</li> <li>Investigator Name :</li> <li>Assigned Date : 2018 / 07 / 20 </li> <li>yyyy mm dd</li> </ul>	* Investigator Or	ganization : Three Con	ners Health Services Society 🕓	/
Investigator Name : * Assigned Date : 2018 / 07 / 20 yyyy mm dd	* Investigator W	orkgroup : TCHSS TE	3 ~	
* Assigned Date : 2018 / 07 / 20 0 yyyy mm dd	Investigator Nam	e :		
yyyy mm dd	* Assigned Date	: 2018 / 07 / 20		
		yyyy mm dd		

Create a **TB Investigation** for your TB screen. For more details, use the instructions from <u>Panorama User Guide</u> #2: TB Screening Data Entry With Skin Test

- 1. Scroll down to the *Tuberculosis Disease Investigation Encounter Group* section of the page
- 2. Select **CREATE INVESTIGATION**. You will be brought to the *Create Investigation* page
- 3. Complete the *Disease Summary* section:
- 4. In the *Investigation Information* section:
- 5. Complete the *Responsible Organization/Investigator* section:
- 6. Complete the *Reporting Notification* section. Press **SUBMIT**



	Name:	Dr. I.M Strange				
	Role/Organization	Family Physician				
	Country:	Canada	~			
	Address Line 1:	123 Middle Road, Su	uite 101		The City field is a Type- ahead. After you start	
	Address Line 2:				typing, options will appear for you to select	
3	Province/Territory	British Columbia	~	City: Pow	e	
	Postal Code:	НОН ОНО		Pow	vell River	
	Phone Number: (	604 ) 555 - 12	234 ext. 🗌 🗍 Intern	Pow	vell River Regional Distric	t
	<b>5 1 1 1</b>			Pow	vers Addition	
	Fax Number: 1	778-555-1234	International			
	* Effective Date From:	code section	Effect	tive Date To: / [	/ 🔤	
	*Effective Date From: 2.b	code section 2019 / 08 / 25 yyyy mm dd	Effect	tive Date To: / [ yyyy r	/ II nm dd	Add
	*Effective Date From: 2.b	code section 2019 / 08 / 25 yyyy mm dd	Effect	tive Date To: / [ yyyy r	/ 🖬 nm dd 3	Add
	*Effective Date From: 2.b Actions: Update Delete External Name	2019 / 08 / 25 yyyy mm dd Role/Organization	Effect	tive Date To: / [ /	nm dd 3 ( Effective Seff	Add Cl
	* Effective Date From: 2.b Actions: Update Delete External Source Type	code section	Address	tive Date To: / [ yyyy r Phone/Fax Numbers	nm dd 3 ( <u>Effective</u> <u>Eff</u> From <u>To</u>	Add Ci
<b>w</b> .	*Effective Date From: 2.b	code section         2019       /       08       /       25         yyyy       mm       dd         Role/Organization         Family Physician	Address      123 Middle Road, Suite 101     Powell River, British     Columbia Canada H0H0H0	tive Date To: / [ 	nm dd 3 Effective Eff From To 2019 Aug 25 -	Add C

Risk Factors	
The pre-populated table of risk factors in the TB module reflect the risk factors listed in the BCCDC TB screening (939) form	Enter Client <b>Risk Factors</b> for your TB screen. For more details, use the instructions from <u>Panorama User Guide</u> <u>#2: TB Screening Data Entry With Skin Test</u>
As of December 1, 2018, FNHSO users will enter Risk Factors by exception. This change in process is to avoid redundancy and eliminate charting errors. This change will also simplify the data entry process.	FNHA enters their Risk Factors in Panorama <b>by exception</b> . This means that unless you are changing a specific Risk Factor response to a 'yes', or making a risk factor pertinent to an investigation, there is no need to enter a response.
<ul> <li>Subject</li> <li>Client Details         <ul> <li>Personal Information</li> <li>Occupation/Language</li> <li>Health Services</li> <li>Financial Assistance</li> <li>Aboriginal Information</li> <li>Immigration Information</li> <li>Client Warnings</li> <li>Relationships</li> <li>Households</li> </ul> </li> <li>Consent Directives         <ul> <li>Allergies</li> <li>Risk Factors</li> </ul> </li> </ul>	To view client's risk factors, have your <b>Subject/Client</b> and <b>Investigation</b> in context: LHN > Subject > <b>Risk Factors</b>



\*This guide is to be used in conjuction with FNHA Panorama training

	Special Population - Indigenous under 19 yrs (*)	2019 Aug 24	Yes
+			

For more information, please see the <u>Immunization</u> <u>Data Entry Guide</u>

When *iPHIS* (the Province's previous Public Health charting system) charts were converted over to Panorama, some old Risk Factors that are no longer used, were pulled over to the client's Panorama chart.



**For Children under the age of 19** Similar to adding the 'Special Population: Aboriginal under 19 years' Risk Factor for children in the **Immunization** module, please ensure that children who qualify for the hepatitis A vaccine have the risk factor 'Special Population: Aboriginal under 19 years' added to the TB risk factor table as well.

### **Risk Factors from iPHIS Transfer:**

Some client charts may have old iPHIS risk factors on the table when you open their risk factor page. These risk factors were brought over from iPHIS and are no longer used.

\*Please see examples of old iPHIS RF on the left hand column.

If you encounter any of these risk factors, please ignore. If you see **'iPHIS DC'** in front of the Risk Factor, <u>DO NOT</u> <u>CHANGE</u> the response

#### Signs & Symptoms Investigation Enter Client **Signs and Symptoms** for your TB screen. Subject Summary For more details, use the instructions from **Panorama User Guide #2: TB Screening Data Entry With Skin** Investigation Summary Test Investigation Details The Signs and Symptoms page in Panorama is displayed Lab as the old 'Classic' version of Panorama Encounter Details \*All S&Sx in the table needs to have a documented Signs & Symptoms response. ie. Do not leave blank. When you create a TB Complications investigation for a client, a table of S&Sx recommended for the investigation appears. Row Actions: Select All Update Set Onset Clear Onset **Onset Date: Reason for Deletion :** Present: 4 No Apply Update Delete mm dd уууу Details Exist Sign/Symptom Present V <u>Onset Date/Time</u> 🔽 Recovery Date/Time Duration 🔽 Reported By No Chest pain No $\Box$ Ensure all responses are No Cough completed for the No Signs and Symptoms table Fatigue No No $\Box$ 6 Fever No No No Haemoptysis No Lymphadenopathy (enlarged glands) No No No Night sweats No Shortness of breath/breathing difficulty No No Sputum production No No $\Box$ Weight loss No No

Save Rese

7

opdate ib mistory summa	l y
✓ Investigation	
Subject Summary Investigation Summary Investigation Details Lab Encounter Details Signs & Symptoms Complications Outcomes	Enter Client Signs and Symptoms for your TB screen. For more details, use the instructions from Panorama User Guide #2: TB Screening Data Entry With Skin Test*Please note the TB History Summary Page is displayed as the old 'Classic' version of Panorama.Before entering the client TST, first review and update your client's TB history summary.
Medical History Incubation & Communicability	LHN > Investigation > Treatment & Interventions > <b>TB</b> <b>Skin Test Summary</b>
Treatment Profile Intervention Summary TB Skin Test Summary	

TB Guide #3	3: No Skin Test		*This guide is to	o be used in conjuction with F	NHA Panorama training
	TB History Summary			A Hide TB History Summary	1
	Previous Diagnosis: Previous Treatment:	- Pre - Pre	vious TB Test: - vious BCG Vaccine: -	1 Update	5
2.	TB Histor, Details		-	Rinde TC History Detai	ls
(а-к)	Previous TB Test: Source:	Negative  V Previous Test Date: Other  V	Use Full Date:  2017 Vyyy Use Partial Date:	/ 07 / 16 🔲 / mm dd	
	Previous Test Country:	Canada		mm	Complete/update the TB History Details section as much as possible
	Previous Diagnosis:	None V Previous Diagnosis Date:	Use Full Date:	/ 08 / 01 mm dd / mm	
	Previous Treatment:	None  V Previous Treatment Date:	Use Full Date:   Use Partial Date:  Use Partial Date:	/ 08 / 01 🛄 dd	
	Previous BCG Vaccine:	Yes v BCG Vaccine Date:	Use Full Date:	/ / dd	
	BCG Vaccine Country: BCG Scar Visible:	Canada Yes  Ves  Client Age at Last B	yyyy CG: 0 Years	mm	
	TB History Comm	ents :hart		.ii	
	Dat. Comments	i	(396	67 characters remaining ) Adv	
				2. (l)	
	<ul> <li>Treatment &amp; Interventi Treatment Profile Intervention Summary TB Skin Test Summar</li> <li>Will take you back</li> </ul>	to the TB Skin Test Summary Page			
TB H	listory Summary			*۱	Hide TB History Summary
Previ	ious Diagnosis: ious Treatment:	None . None	Previous TB Test: Previous BCG Vacc	Negative cine: Yes	The information you saved in the TB History Details Page will update the TB History
					Summary

# Create TB Follow-Up Only

Create	e TB Skin Test 1	<ul> <li>Ensure your Subject/Client and Investigation is open:</li> <li>LHN &gt; Investigation &gt; Treatment &amp; Interventions &gt; TB</li> <li>Skin Test Summary</li> <li>Since the client will not be receiving a TST test:</li> <li>From the <i>TB Test Summary</i> Page:</li> <li>Select CREATE TB FOLLOW UP ONLY from the <i>TB Skin Test and Follow Up Summary</i> section. You will be taken to the <i>TB Follow Up Details</i> page.</li> <li>In the <i>Clinical Information</i> section: <ul> <li>a. <i>Contact to other TB Case</i> – choose from No, Unknown, Yes and enter date if applicable</li> <li>b. <i>Recent illness</i> – choose from No, Unknown, Yes and enter date if applicable</li> <li>c. If <i>clinical comments</i> are entered, select ADD</li> </ul> </li> </ul>					
	* Encounter Group: Tuberculosis Disease Investigation	★ Hide Clinical Information					
2.a-c	The subsection pertains to previous contact, other than the current exposure.         Other TB Case Contact:       No       Vother Exposure Date:       Use Full Date:       Image: Contact:       Image: Contac						
	Clinical Comments	yyyy mm					
	IF YOU HAVE COMMENTS IN RELATION TO HISTORY OF CONTACT TO A TB CASE OR OF A RECENT ILLNESS, ENTER YOUR COMMENTS HERE AND SELECT 'ADD'.						
		(3866 characters remaining ) Add					
		<ul> <li>a. Select <i>Reason for Test</i> from the drop down list (codes as per the BCCDC TB screening form)</li> <li>b. <i>Organization</i> and <i>Location</i> default to your organization. This can be changed if needed.</li> <li>c. Either <b>FIND</b> and <b>SELECT</b> yourself or another provider as the <i>Provider</i>. Providers are listed last name, first name, designation. If the name is not listed in the provider list, use the radio button</li> </ul>					

B Guide #3: No Skin Test	*This guide is to be used in conjuction with FNHA Panorama training		
CXR CXR & IGRA CXR & Sputum CXR, IGRA & Sputum IGRA IGRA & Sputum No Follow Up Required Repeat skin test See Follow Up Details Sputum	<ul> <li>(O) in the Other Provider area and enter the provider name in the free text field.</li> <li>d. Enter Follow-up Date: the date the client TB screen was done</li> <li>e. Follow-Up selections from drop-down list (*see photo on left)</li> <li>f. Select Reason for not having chest x-ray if applicable (*see photo on left)</li> <li>4. Follow-up Details is a free-text field where you can, enter the location where the client has been sent for CXR and that you will follow up with FNHA TB Services</li> <li>5. SAVE your work. Select CANCEL or LHN &gt; Investigation &gt; Treatment &amp; Interventions &gt; TB Skin Test Summary</li> <li>6. You will go back to the TB Test Summary Page and you will see your TB Follow Up appointment in the table</li> </ul>		

	TB Follow Up						★ Hide TB Follow U		
	Reason for Test: 1	1 BC First Nations	TB Services		~		<u></u>		
	* Organization:	To specify an Or click on 'Select'	ganization first c button. Then click	lick on the 'Find' button. Th & 'Close' to close.	en search, or type the name	of the Organization you v	Clear vish to specify, select it and		
		Organization Society]	: Panorama > E	3C/Yukon > BC > Aborigir	al Health Organizations	> [Three Corners Hea	Ith Services Find Q		
	* Location:	To specify a Serv to specify, select Service Deliv	ice Delivery Loc it and click on 'S ery Location: F	ation first click on the 'Find elect' button. Then click 'Cl Panorama > BC/Yukon >	' button. Then search, or ty ose' to close. BC > Aboriginal Health (	pe the name of the Service Organizations > Three C	Clear Delivery Location you wish		
		Health Servic	Health Services Society > Sugar Cane Health Station > [Sugar Cane Health Station]						
3. а-с	* Provider:	Use this P Click Find to sel	rovider: ect a provider:				Clear		
		Provider:Ma	calino, Cecille,	Nurse - Registered, FNH	A Health Protection Offic	ce, West Vancouver	Find Q		
		Please select a	mong the 2 avail	able search methods; Searc	a or Type.		Close 🔀		
		Туре	Search						
			Start Select	typing the last name of the l t the match with the keyboar	rovider. Matches will begin d or mouse.	n to appear below.			
		Name of Pro	vider: Mac	alino, Cecille, Nurse - Re	gi		Show Info		
							Select		
		Use Other	Provider:						
	*Follow Up Date:		2018 / 12	/ 3		CXR	8 ICDA		
3. K	*Follow Up:		CXR & IGKA						
d-f	Reason For Not Hav	ving Chest	it CXR, IGRA & Sputum						
_ (	X-ray: Follow Up Details:					IGRA	& Sputum		
	Requisition given to client. Sent to ABC clinic for CXR. ENHA TB services notified by email.						eat skin test		
	4				Sputum				
					(3907	characters I			
	*******					5	Save Clear Cance		
		<u>Wha</u>	t your TB	follow up will lo	ok like on the to	able:			
B Skin	Test and Follow	Up Summary	l.			AHide TB Skir	Test and Follow Up Sur		
All TB Skir	Tests for the client	in context are dis	splaved, not i	ust those pertinent to t	he Investigation in co	ntext.			
Row Acti	ons: View/Update	View TB Test	Outcome Re	port	C	reate TB Skin Test	Create TB Follow Up C		
	Reason for De	letion:							
Ð	J		v [	Delete					
Tes ID	st/Follow Up 🔻 D G	<u>ate of</u> ive/Service	Date o Read	f Reaction Si (mm)	te Interprete Result	d Follow Up	<ul> <li>Pertinent Investigations</li> </ul>		
0 604	497 2	019 Aug 23	-	-	े. संर	CXR	70362 Tuberculosis		
					1		4		
e exan	nple email to F	NHA TB Serv	ices in ph	oto Notify	FNHA TB Serv	ices by phone	or email		
ow:				<b>FNHA</b>	TB@fnha.ca if o	lient follow up	is needed. AT TH		

TB Guide #3: No Skin Test			*This guide is to be used in conjuction with FNI	*This guide is to be used in conjuction with FNHA Panorama training			
			POINT YOU WILL WAIT TO GET X-RAY RESU	POINT YOU WILL WAIT TO GET X-RAY RESULTS/			
			<b>RECOMMENDATATIONS.</b> You will be conta	RECOMMENDATATIONS. You will be contacted by FNHA			
			TB Services if further information is requir	TB Services if further information is required or if there			
			are physician recommendations				
	ءَ الله الله الله الله الله الله الله الل	From +           To           Cc           Bcc	Cecille.Macalino@fnha.ca				
		Subject	Client ID: 123456, Investigation ID: 24680, Splatsin Health Centre, TB screening: 06 Entry for Treatment				
	Hi TB Te	eam, ent was scree	ned and was sent to ABC Clinic in Vernon for CXR.				
	Sincerely,						
	Splatsin Health Centre 250-555-1234						

Encounters	
Encounters can be automatically, or manually created.	Enter Client <b>Encounters</b> (if needed) for your TB screen. For more details, use the instructions from <u>Panorama</u> <u>User Guide #2: TB Screening Data Entry With Skin Test</u> An encounter represents a point of service between a client and healthcare provider for any type of service (eg. Clinic visit, home visit, telephone consult, etc). <u>Automatic Encounters</u> Panorama automatically creates an encounter for: • Administered Immunizations • AEFI (Adverse Event Following Immunization) • Special Considerations • Entry of Lab Results/Diagnostic Imaging Results • Entry of TST • Interventions <u>Manual Encounters</u> Users can manually create encounters for the following: • Clinic/ Home/ Outreach/ Street/ Workplace visits • Telephone assessments with the client/guardian • Case conferences – Contact between multiple
	<ul> <li>Counselling/education, provision of care, medication</li> </ul>
Each T	administration/ management, screening, etc.
Investigation 70364 - Tuberculosis	pciated gation ID number
Investigation ID: Status: Investigator: Linked Outbreaks	- Report Date (Sent): Report Date (Received): - June 27, 2017
Disease Causative Agent Further Automation (	thority / Classification   Classif. Date Site(s) Sta Primary Classification, Δ Set by Case Def)
Tuberculosis	Encounters for the erson 2017 Jun 27
Investigation 70364 Encounters	
0 encounter(s) total	Click Encounter Date for encounter
Move Selected Encounter(s) To:           Investigation:70364 Non-Episode Encounters         Move	To create a new encounter for this particular TB investigation, select here
Non-Episode Encounters	Create Encounter
Encounter Date Encounter Type	Encounter Reasons Organization Location

Notes

## Notes

You can quickly see and access client notes by checking if a *Notes* hyperlink exists on the top left hand corner of the client banner. When selected, this will take you to the *Clinical Notes* screen. When selected, this will take you to the *Clinical Notes* screen. For more information, please refer to the <u>Core Data Entry Guide</u>

Enter Client **Notes** (if needed) for your TB screen. For more details, use the instructions from <u>Panorama User</u> <u>Guide #2: TB Screening Data Entry With Skin Test</u>

Select to see all notes listed in the table (most recent note will appear first							
Row Actions: View All Notes in Table Upd	ate Note View Note Corrections	Delete Note	Author Note Transcribe Note				
Move selected note to	Select a radio button (O) then update note to edit	Move Note	$\bigcirc$				
Note Date/Time Ivra	the note (can only do this if you are the original author of the note)	Author	Attached To Status Corrected				
O 2017 Sep 9 Murse 2-Month	well baby visit	TRAINER03, Cecille	Enc 2017 Sep Complete				
02017 Jul 25 Nurse Postpart	um Home Visit	TRAINER03, Cecille	Client 2456377 Complete				
O 2017 Jul 20 Nurse Phone C Question	all from Mom - Breastfeeding	TRAINER03, Cecille	Client 2456377 Complete Shows you if a note has been updated/ corrected from the original note				
Total: 3 Page 1 of 1			Jump to page:				
Select the hyperlink if you would like to view an individual note		S a ir c	hows you if the note is ttached to an encounter, ivestigation, or a general lient note				
Note is being created for Investigation	n ID 70364, Encounter 20	17 Aug 10	Shows you if a note is created under the client, Investigation, or				
Note ID: -	Status: -		encounter				
* Required Field		Structure Subject I	ed using the .ine standard to Structure				
Author: TRAINER03, Cecille	Role: BCY System-Sup	oport Your Not	es section)				
* Subject: TB - Community TB S	Screening						
* Note Date: 2018 / 08 / 10 yyyy mm dd	Time: hh mm	:PST					
Note Type: Nurse	~						
Common Phrases: TB_Intake_Note_par	2 v Add to	o Note					
* Note: $\mathbf{T}_{\text{Normal}} \sim \mathbf{T}_{\text{Arial}} \sim 7pt \sim \mathbf{b}  i \; \underline{u} \equiv \underline{a} \equiv \underline{a} \equiv \underline{b} = \underline{b} \qquad \qquad$							
Client in for TB screening. TST measured at 15mm. Discussed with client TST results. Client states no symptoms, no risk factors noted. Client sent to ABC Clinic for CXR. Requisition given. Email notification to ENHA TB Services sent							
Free-text box to enter note. Users can cut and paste notes from other documents (i.e., Word document, Notepad); however, to prevent error messages, users must insert a space or return at the beginning of the note content pasted into this field							
Select to save your note Save as Draft Note Complete Clear Cancel							

#### **Closing Investigations** If you are unsure if you should be closing a client If there is no follow-up required, the investigation can Investigation, please contact FNHA TB Services be closed by the CHN. FNHA TB Services or the BCCDC fnhaTB@fnha.ca will be responsible for closing all other TB Investigations. If you want to close your investigation, use the instructions from Panorama User Guide #2: TB **Screening Data Entry With Skin Test** The Investigation ID banner will now note that the status is set to 'closed' Investigation ID: Disposition: Age at time of Investigation: Status: CLOSED 70364 Screening Disease: PHAC Date/Type: **Causative Agent:** Authority/Classification: 2017 Jun 27 / Date Reported Provincial / Case - Not a Case / 2017 Tuberculosis A This investigation has a status of CLOSED. Please consider this when making updates to the investigation. investigation successfully closed. **Tuberculosis Disease Investigation Encounter** The Subject Summary Group page shows that this TB Invesigation is closed. Investigation 70440 - Tuberculosis - CLOSED Investigation ID: Status: Investigator: Linked Outbreaks: Report Date (Sent): Report Date (Received): 70440 CLOSED 07 July 2017 Disease Etiologic Agent Epi Markers Authority / Classification | Classif. Date (✓ Primary Classification, ∆ Set by Case Def) Tuberculosis . Provincial / Case - Not a Case 2017 Jul 7