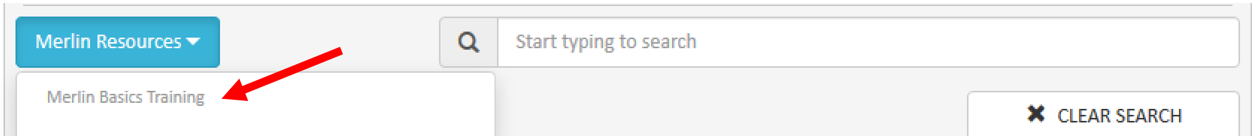
Coronavirus Disease 2019 (COVID-19) Merlin Data Management Guidance

Version 6 | January 14, 2021

Summary

This document describes how to record information in Merlin for confirmed and probable COVID-19 cases and their contacts, as well as entering COVID-19 outbreaks. For an introductory training on Merlin basics, including adding a new profile and case, visit the [Training Tuesday SharePoint site](#) via Google Chrome or Firefox and select Merlin Basics Training under the Merlin Resources dropdown. A copy of the Merlin Basics Training slides are available [here](#).



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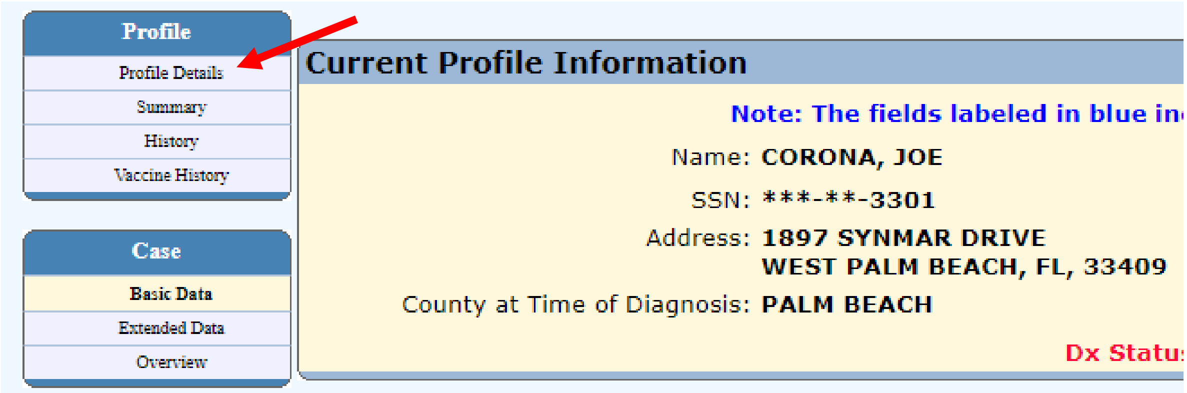
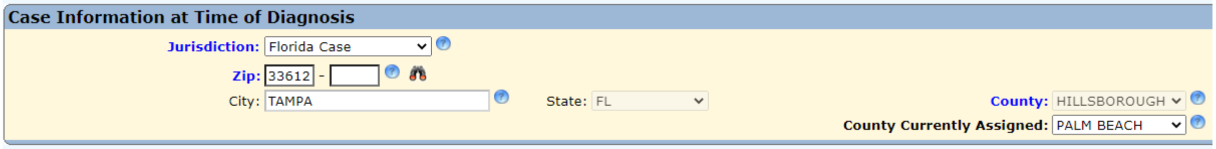
Basic Data Standard Sections

- Upon creation of a COVID-19 case, Merlin will direct you to the Basic Data screen. Basic Data contains several sections, including some that are standard across all diseases and some that are specific to COVID-19 cases. This section includes guidance for the sections that are standard across all diseases.
- The “Current Profile Information” section displays information from the person’s profile. To edit any of the fields, navigate to the “Profile Details” tab on the navigation menu on the left.

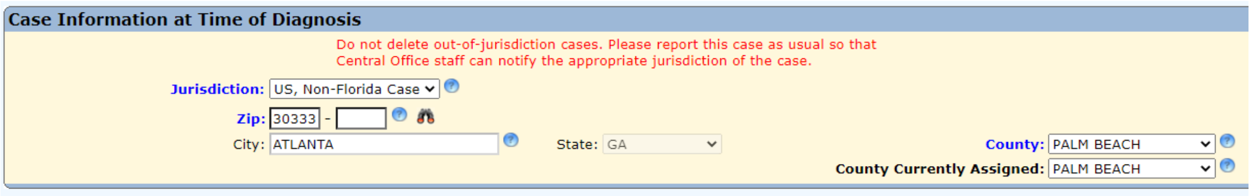


- The “Case Information at Time of Diagnosis” section sets the Jurisdiction and County fields based on the initial profile information. Once a case is created, updating the profile information on the “Profile Details” screen will **not** change the information in the “Case Information at Time of Diagnosis” section. Information in this section should be reflective of the person’s **residence at the time they were diagnosed with COVID-19**.
    - To change the fields in this section, edit the Zip field. Merlin will automatically update the other fields based on the Zip.

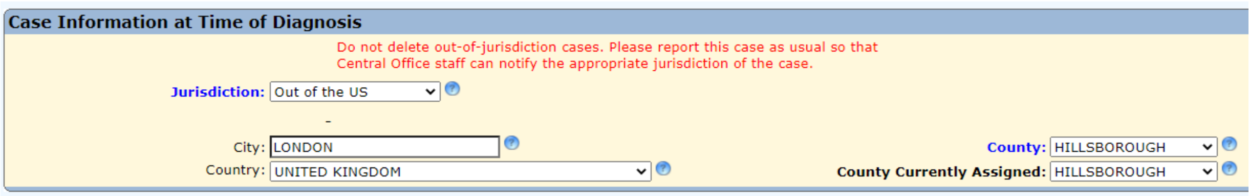


    - **The County field represents the person’s county of residence at the time they were diagnosed with COVID-19** and is used to assign case counts for reports.
    - The County Currently Assigned field allows users in another county to update and edit the case in Merlin. This field might be used, for example, if a person works in a long-term care facility in Palm Beach County but lives in Hillsborough County. The County Currently Assigned field could then be changed to Palm Beach County so that they could add information to the case. Of note, the case would still be counted as a Hillsborough County case.
    - If the person was not a Florida resident at the time they were diagnosed with COVID-19, the “Case Information at Time of Diagnosis” section should be updated to reflect their state or country of residence. This information will be used to send the case to the appropriate jurisdiction for follow up. Guidance for determining residency for disease reporting is available here.
        - Entering a non-Florida Zip will automatically update the other fields to reflect the non-Florida jurisdiction.

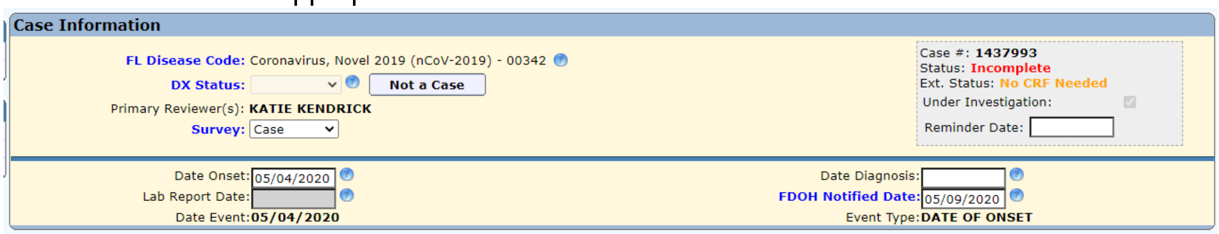
- The County Currently Assigned field will remain with the county the case was reported from for tracking purposes and should not be changed to State.



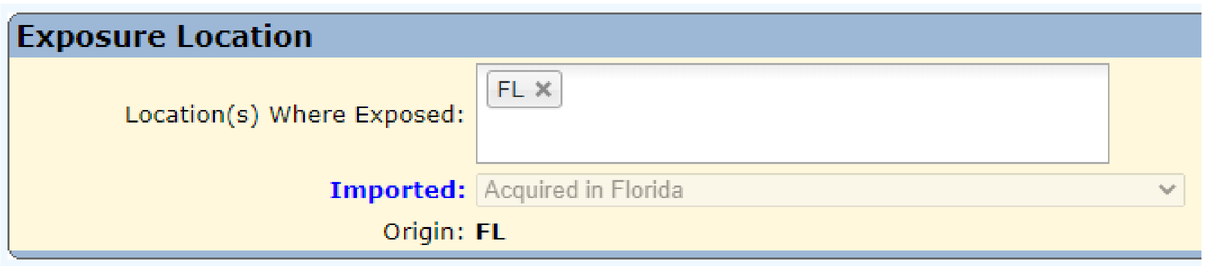
- If the person lived outside of the United States, select "Out of the US" as the Jurisdiction and enter the city and country.



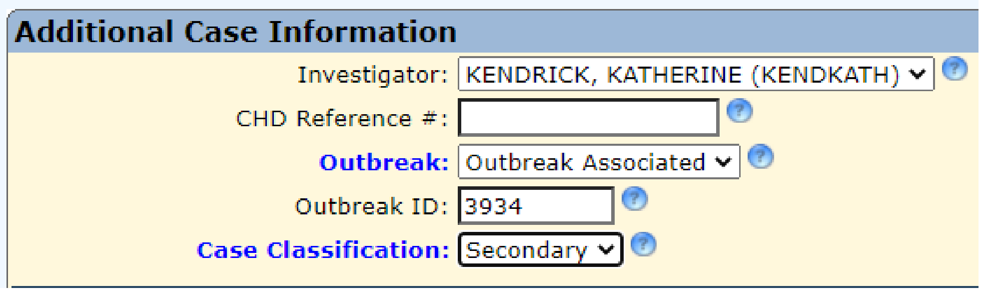
- In the "Case Information" section, ensure that the Survey field is set to Case. Enter the relevant dates in the appropriate fields.



- The "Exposure Location" section documents where a person was potentially exposed to SARS-CoV-2. In the Location(s) Where Exposed field, use the dropdown to select the states and/or countries a person visited **the 14 days before onset of COVID-19 symptoms or lab collection date, if asymptomatic**. If the person did not leave Florida, select "FL" from the dropdown. The Imported and Origin fields will automatically update based on the selected locations.

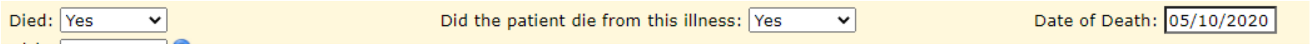


- In the "Additional Case Information" section, select the appropriate investigator name, do not leave blank or as "Auto, Created Case." Use the dropdown in the Outbreak field to select whether a case is sporadic or outbreak-associated. A case should be marked as outbreak-associated if the case is epidemiologically linked to another COVID-19 case. If the case is part of a known outbreak, the case can be linked to the outbreak in Outbreak Module by entering the outbreak number in the Outbreak ID field.

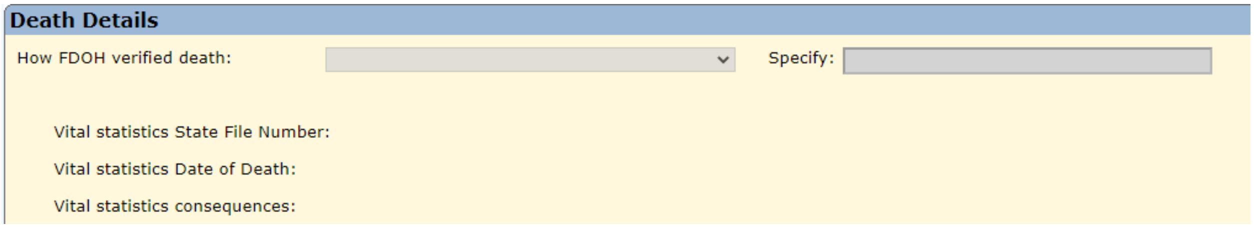


  - Complete the remaining fields in this section related to notification of the case.
- In the "Clinical Information" section, document whether the case was investigated and if so, the date the investigation began. Investigating a case includes gathering additional information beyond what was submitted in the initial case or lab report. All COVID-19 cases should be investigated. Document whether the person or their proxy (e.g. caregiver, healthcare provider, spouse) was interviewed and if so, the date of first interview. Interviewing a case includes gather pertinent information involving symptoms, exposure(s), occupation and close contact information.

- Also, in the "Clinical Information" section, document whether the person died, and if so, include the date of death. Updating the date of death on the basic data screen will also populate the date of death on the profile details screen.

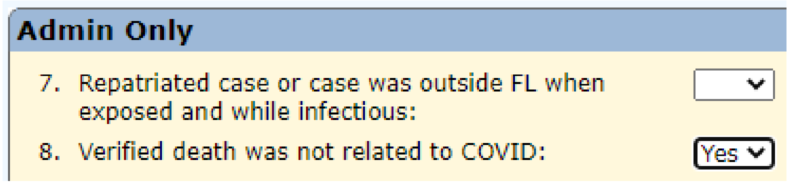


- The "Death Details" section connects to the Vital Statistics database for cases with an event date of August 1, 2020, or later. Cases that match with death certificate information in Vital Statistics will auto-populate the Died field to "yes." It will be the responsibility of the CHD to collect information to determine the date of death. Document the data source for how you were able to verify the case died.



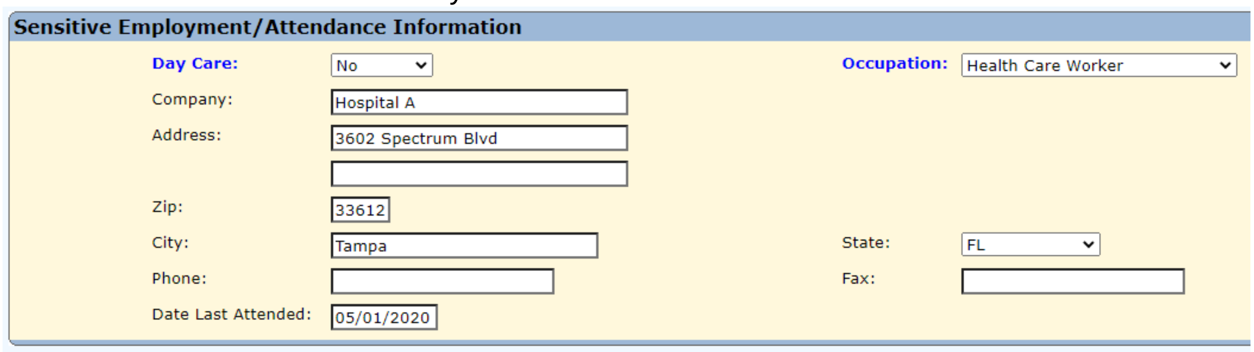
  - **Deaths are counted in reports when all of the following criteria are met:**
    - **Died field on the basic data screen is marked as "yes."**
    - **Date of death field on the basic data screen is complete.**

  - **State-level reviewer has not verified that the death was not related to COVID-19 on the extended data screen.** Deaths will be counted in reports unless a state-level reviewer determines the death was not related to COVID-19 and documents that in the Admin Only section of the extended data screen; therefore, death counts may change based on new information.



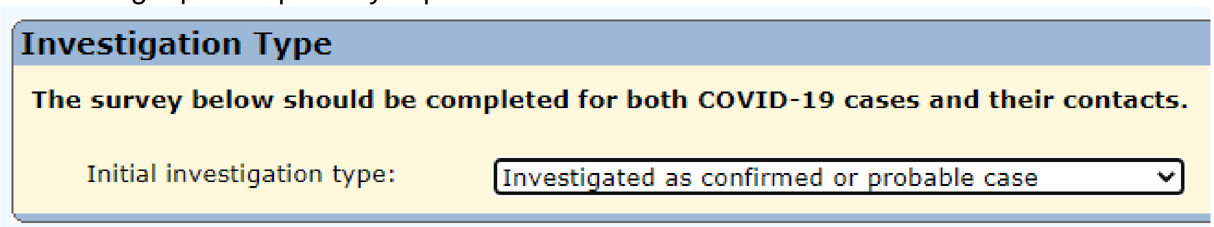
- ○ Bureau of Epidemiology (BOE) COVID-19 staff regularly review deaths to evaluate whether they are or are not associated with COVID-19 based on the criteria outlined in Appendix A.
  - If you are aware of a death that is not related to COVID-19 but is not marked as such or have death-related questions, please email COVIDdeaths@flhealth.gov.

- In the "Sensitive Employment/Attendance Information" section, use the Day Care field to document whether the person attends or works at a daycare. Use the occupation field to document if the person is a health care worker, farm worker, or food handler. Also, document information on the facility and the last date of attendance.



Basic Data COVID-19-Specific Sections

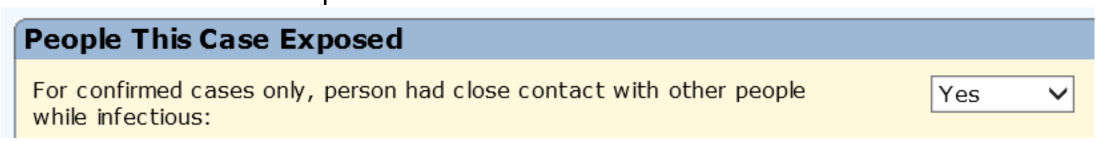
- The “Investigation Type” section is used to document the status of the case at the beginning of the investigation. If the person is reported as a confirmed or probable COVID-19 case, select “Investigated as a confirmed or probable case.” If the person is being monitored after a potential exposure to a COVID-19 case, select “Monitoring a person possibly exposed to 2019-nCoV.” **The initial investigation type should not change over the course of any investigation.** For example, if a person who is being monitored develops symptoms and/or tests positive to become a confirmed case, the initial investigation type should remain as “Monitoring a person possibly exposed to 2019-nCoV.”


Investigation Type

The survey below should be completed for both COVID-19 cases and their contacts.

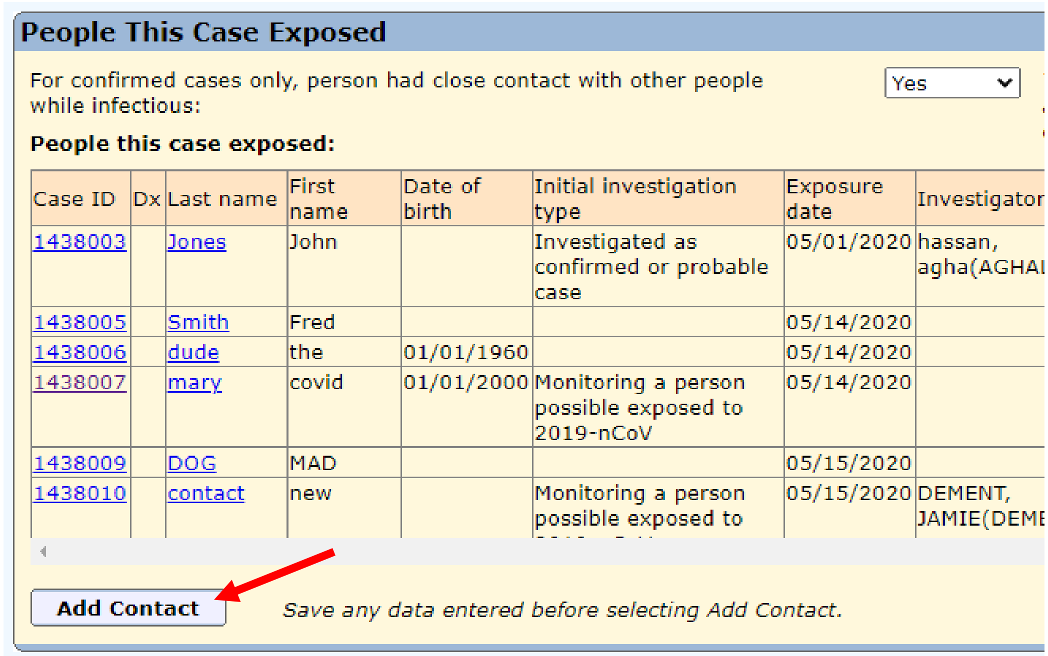
Initial investigation type: Investigated as confirmed or probable case

- When a laboratory-confirmed case reports they had close contact with other people while infectious (beginning 48-hours before symptom onset/lab collection date, if asymptomatic), it should be documented in the “People This Case Exposed” section on the Basic Data screen.
  - Select “Yes” from the dropdown.


People This Case Exposed

For confirmed cases only, person had close contact with other people while infectious: Yes

- Each Florida resident the case identifies as a contact should be entered into the table. This will create a Merlin profile and COVID-19 case for the person. If a person has out of state contacts, do not enter them into the table. Send the out of state contact’s information, including name, date of birth, address/phone number, and last exposure date, to HSD00EpiMonitoring@flhealth.gov so the appropriate jurisdiction can follow up.
  - Save any data already entered, then select “Add Contact” at the bottom of the table.



People This Case Exposed

For confirmed cases only, person had close contact with other people while infectious: Yes

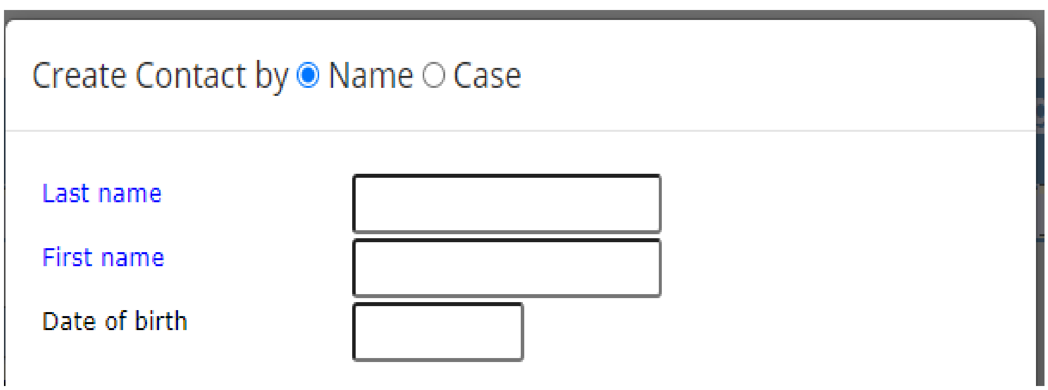
People this case exposed:

Case ID	Dx	Last name	First name	Date of birth	Initial investigation type	Exposure date	Investigator
1438003		Jones	John		Investigated as confirmed or probable case	05/01/2020	hassan, agha(AGHAI
1438005		Smith	Fred			05/14/2020	
1438006		dude	the	01/01/1960		05/14/2020	
1438007		mary	covid	01/01/2000	Monitoring a person possible exposed to 2019-nCoV	05/14/2020	
1438009		DOG	MAD			05/15/2020	
1438010		contact	new		Monitoring a person possible exposed to	05/15/2020	DEMENT, JAMIE(DEME

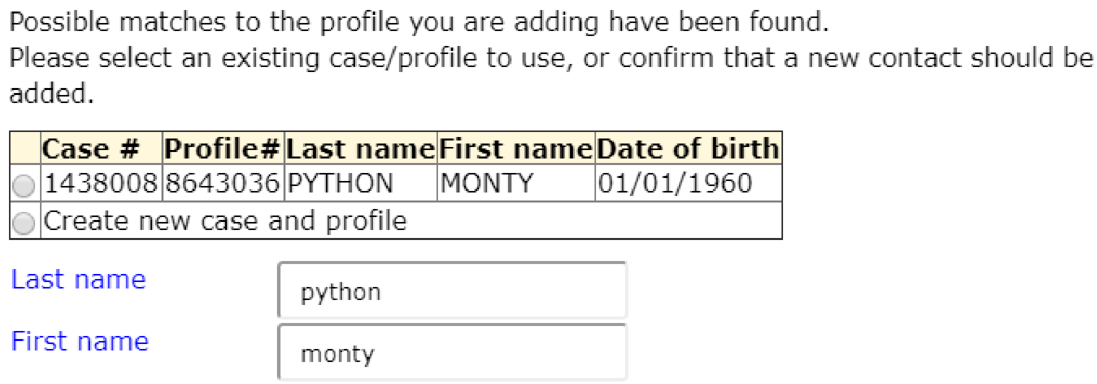
Add Contact

Save any data entered before selecting Add Contact.

- The “Create Contact” screen will appear. You can choose to search by “Name” or “Case” by selecting the radio button next to the preferred option. Enter as much information as you have about the person. The fields in blue are required (Last name and First name).
  - If you do not have the contact’s name, do not put in placeholders (e.g. “case’s friend 1”). Wait to enter the contact until you are able to obtain the information.

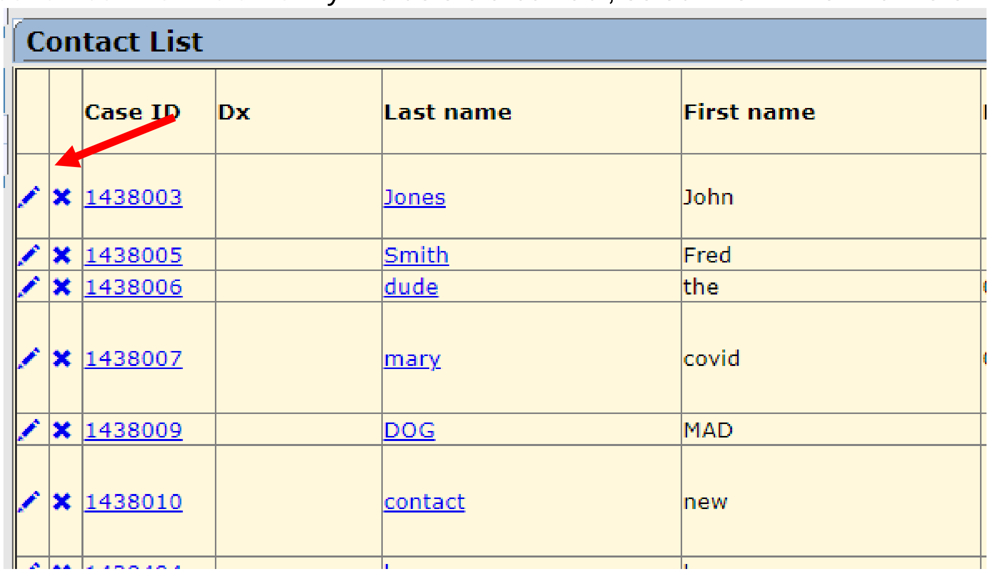


- Merlin will automatically do a search of existing profiles to find matches. If a profile already exists for the person, select the radio button next to the profile. If not, select the radio button next to “Create new case and profile.” Continue completing the form.


Possible matches to the profile you are adding have been found.
Please select an existing case/profile to use, or confirm that a new contact should be added.

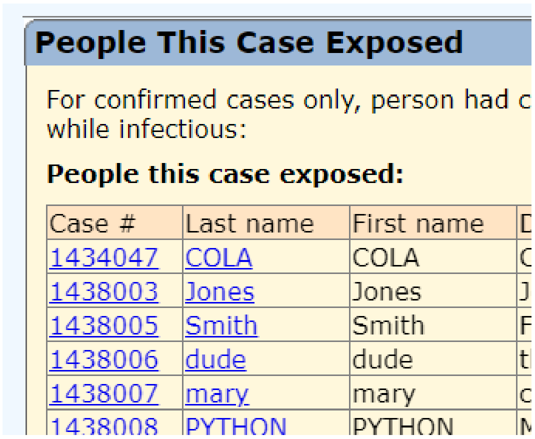
	Case #	Profile#	Last name	First name	Date of birth
○	1438008	8643036	PYTHON	MONTY	01/01/1960
○	Create new case and profile				

- When finished, either select “Save and exit” or “Add Another” to enter another person.
- If needed, contacts can be edited directly from the “Contact List” table by selecting the pencil icon next to an entry. To delete a contact, select the “X” next to the entry.


Contact List

		Case ID	Dx	Last name	First name
		1438003		Jones	John
		1438005		Smith	Fred
		1438006		dude	the
		1438007		mary	covid
		1438009		DOG	MAD
		1438010		contact	new

- Navigate back to the Basic Data screen using the link in the left-hand menu. The person(s) you entered should now appear in the “People this case exposed” table. Entries can also be edited from this table by clicking on the person’s last name to go to that person’s Profile Detail.

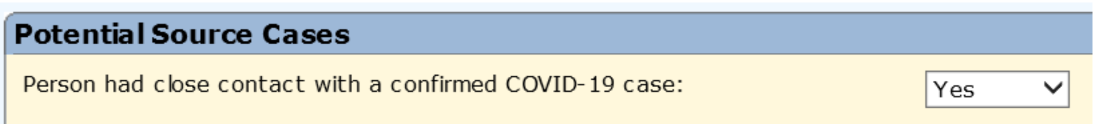

People This Case Exposed

For confirmed cases only, person had c while infectious:

People this case exposed:

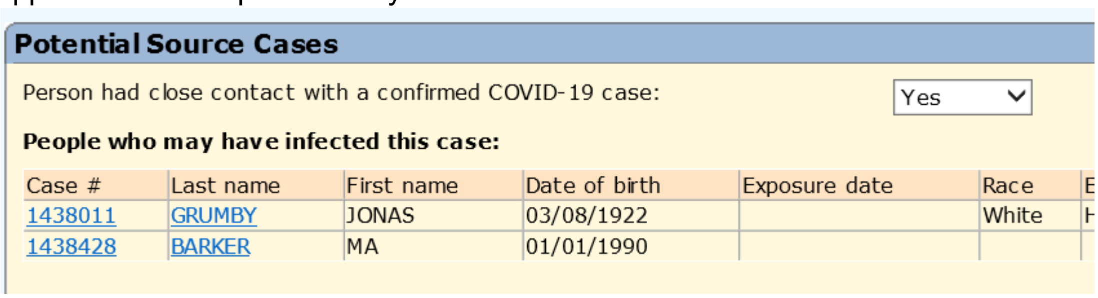
Case #	Last name	First name	D
1434047	COLA	COLA	C
1438003	Jones	Jones	J
1438005	Smith	Smith	F
1438006	dude	dude	t
1438007	mary	mary	c
1438008	PYTHON	PYTHON	M

- If the case reports they had close contact with another confirmed COVID-19 case who may have infected them, it should be documented in the "Potential Source Cases" section on the basic data screen.
    - Select "Yes" from the dropdown.


Potential Source Cases

Person had close contact with a confirmed COVID-19 case: Yes

    - Each person the case reports as a potential source case should be linked to the case. To link to the potential source case, navigate to their Merlin COVID-19 case and enter the initial case as a contact in the "People This Case Exposed" section as described above. When you return to the initial case, the source case should now appear in the "People who may have infected this case" table.


Potential Source Cases

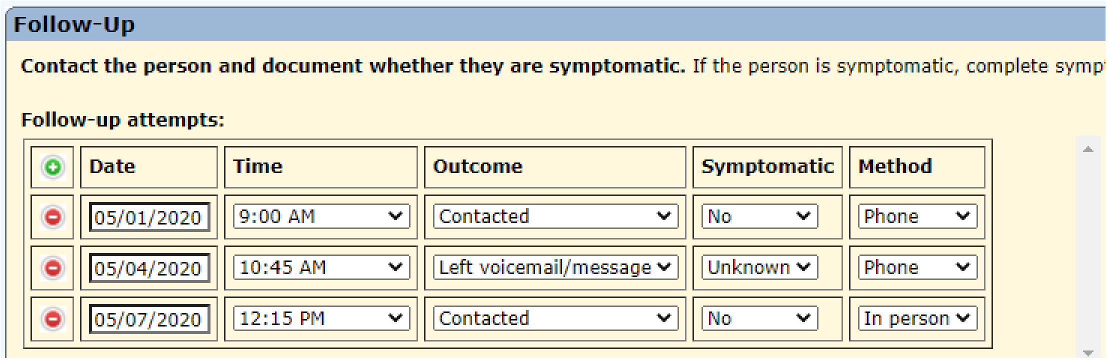
Person had close contact with a confirmed COVID-19 case: Yes

People who may have infected this case:

Case #	Last name	First name	Date of birth	Exposure date	Race	E
1438011	GRUMBY	JONAS	03/08/1922		White	H
1438428	BARKER	MA	01/01/1990			

- Attempts to contact the person should be documented in the "Follow-Up" section.
    - Each person's follow up attempts should be documented in their own cases. Double check the name in the "Current Profile Information" section to make sure you are on the correct case.

- For each follow-up attempt, record the date, time, outcome, whether the person was symptomatic, and method of contact. To add a new row to the table, select the green circle at the top left corner. To delete a row, select the red circle on the left of the row.



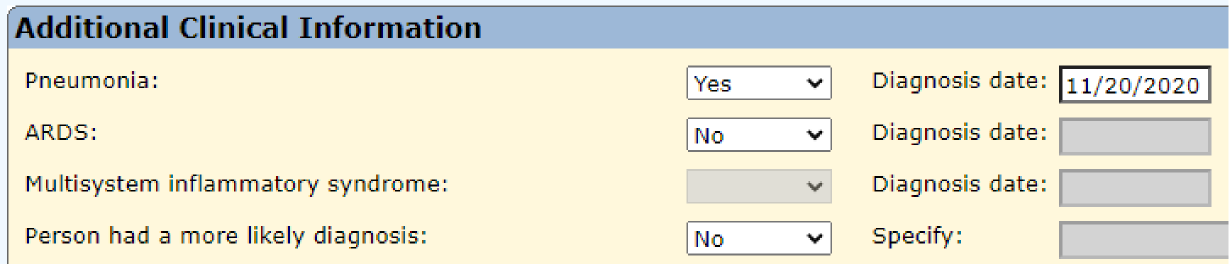
Follow-Up

Contact the person and document whether they are symptomatic. If the person is symptomatic, complete symp

Follow-up attempts:

	Date	Time	Outcome	Symptomatic	Method
	05/01/2020	9:00 AM	Contacted	No	Phone
	05/04/2020	10:45 AM	Left voicemail/message	Unknown	Phone
	05/07/2020	12:15 PM	Contacted	No	In person

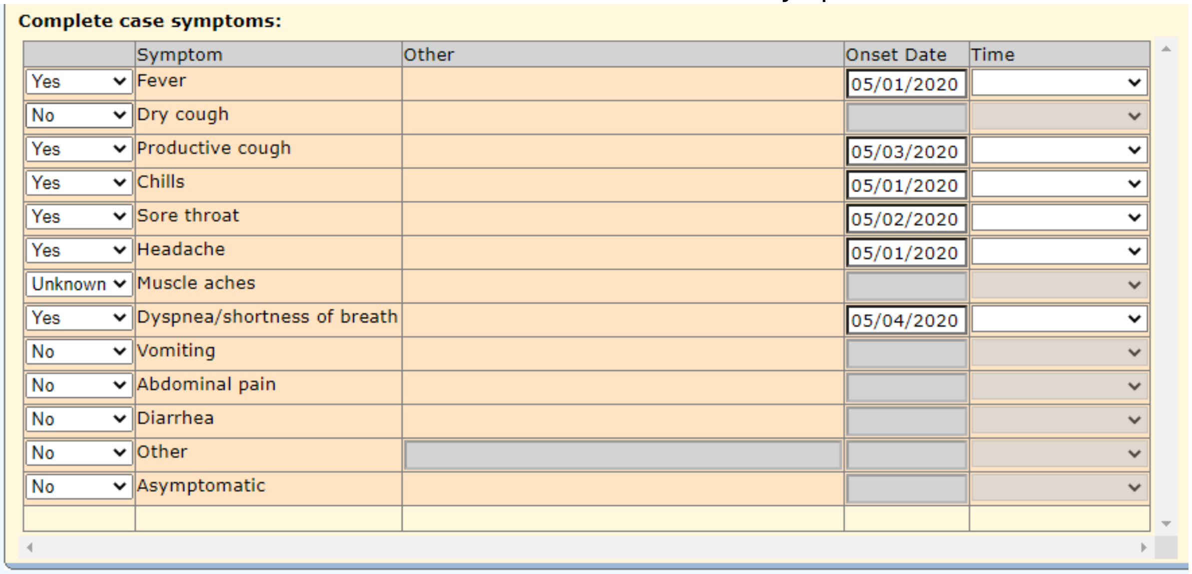
- In the "Additional Clinical Information" section, document any diagnoses the person received. Multisystem inflammatory syndrome only needs to be completed for persons <21 years old; the field will be deactivated for persons 21 years and older.



Additional Clinical Information

Pneumonia:	Yes	Diagnosis date:	11/20/2020
ARDS:	No	Diagnosis date:	
Multisystem inflammatory syndrome:		Diagnosis date:	
Person had a more likely diagnosis:	No	Specify:	

- Symptoms can be documented either in the "Additional Clinical Information" section on the Basic Data case screen or on the Symptoms screen, accessed via the "Symptoms" tab on the navigation menu on the left. The fields are linked so that any symptom information entered on one screen will automatically appear on the other.
    - If a person is asymptomatic, no other symptoms should be marked as "Yes" and there should not be an onset date recorded for the asymptomatic field.

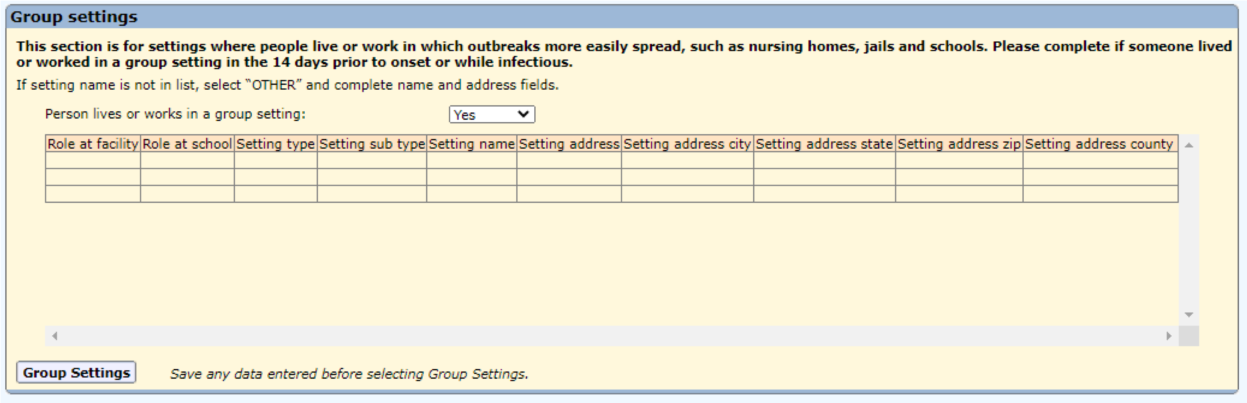


Complete case symptoms:

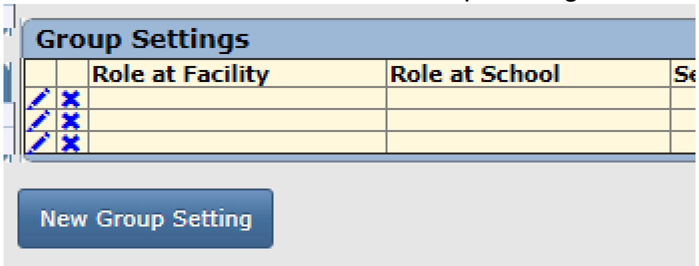
	Symptom	Other	Onset Date	Time
Yes	Fever		05/01/2020	
No	Dry cough			
Yes	Productive cough		05/03/2020	
Yes	Chills		05/01/2020	
Yes	Sore throat		05/02/2020	
Yes	Headache		05/01/2020	
Unknown	Muscle aches			
Yes	Dyspnea/shortness of breath		05/04/2020	
No	Vomiting			
No	Abdominal pain			
No	Diarrhea			
No	Other			
No	Asymptomatic			

Group Settings Section

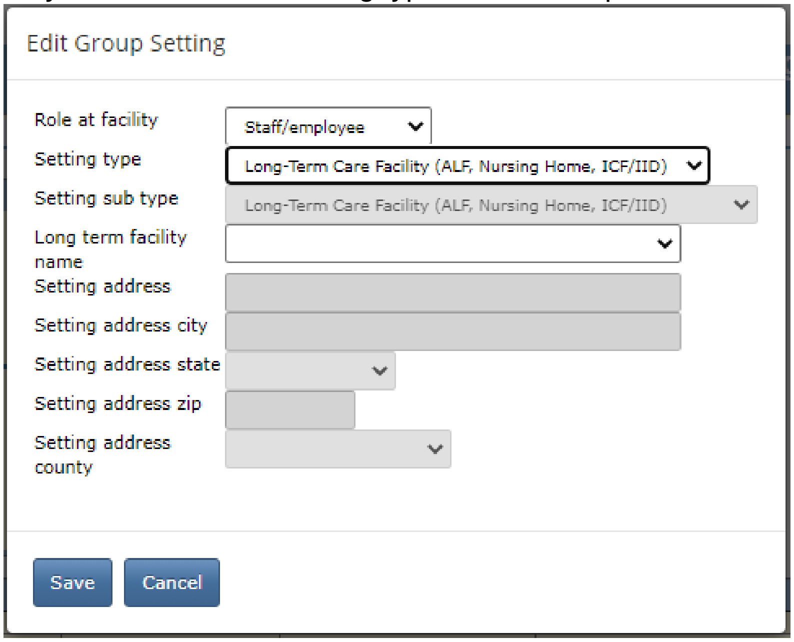
- The “Group Settings” section captures information on the group settings where a person lives, attends, or works, such as a long-term care facility, jail, or school. If a person lived, attended, or worked in a group setting in the **14 days prior to onset/lab collection date (if asymptomatic), or while infectious**, select “Yes” from the dropdown for the first question, then save the case. Once saved, select the “Group Settings” button at the bottom of the section.
- For LTCF residents that transfer to a COVID-19 facility for isolation, please do not add this facility in the “Group Settings” section.



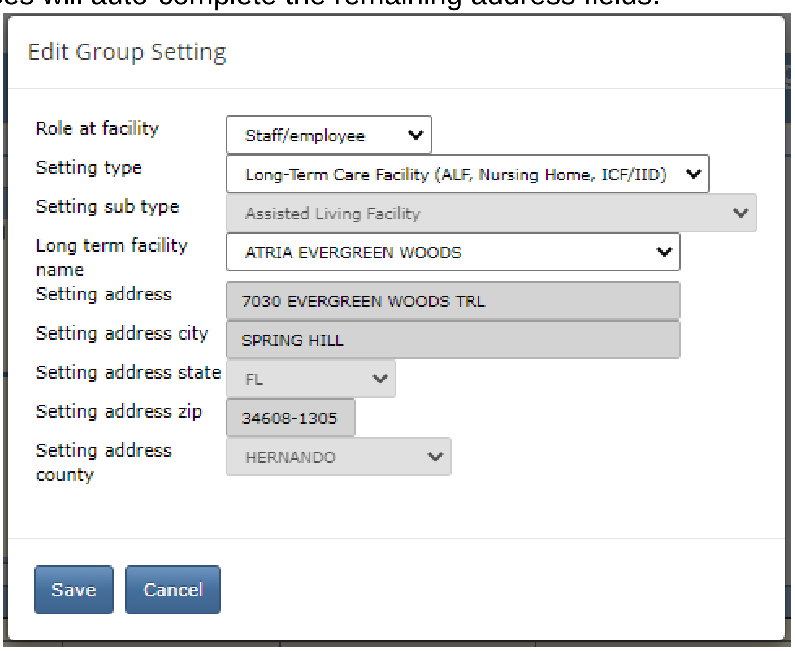
- The “Group Settings” button will take you to a new screen where you can add and edit information on the specific settings. A separate row should be completed for each setting where the person lives, attends, or works. If a person is associated with multiple facilities, **the facility in the first row of the table should be the facility of likely exposure**. To edit an existing row in the table, select the pencil icon. To delete a row from the table, select the X. To add a new row to the table, select the “New Group Setting” button.



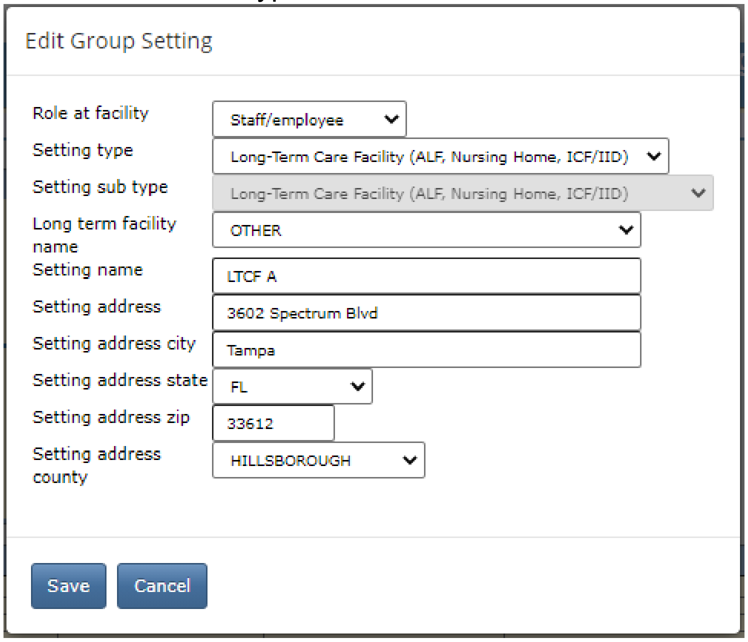
- Selecting the pencil icon or the “New Group Setting” button will activate a popup. Document the person’s role at the group setting, either resident/attendee or staff/employee, in the first field, “Role at facility.” Next select the setting type from the dropdown.



- Selecting a setting type of “Correctional Facility/Juvenile Detention Center,” “Long-Term Care Facility (ALF, Nursing Home, ICF/IID),” “School, Post-Secondary (college/university),” “School, Primary or Secondary Private,” or “School, Primary or Secondary Public” will activate an additional field containing a dropdown of facility names. Selecting one of the dropdown choices will auto-complete the remaining address fields.



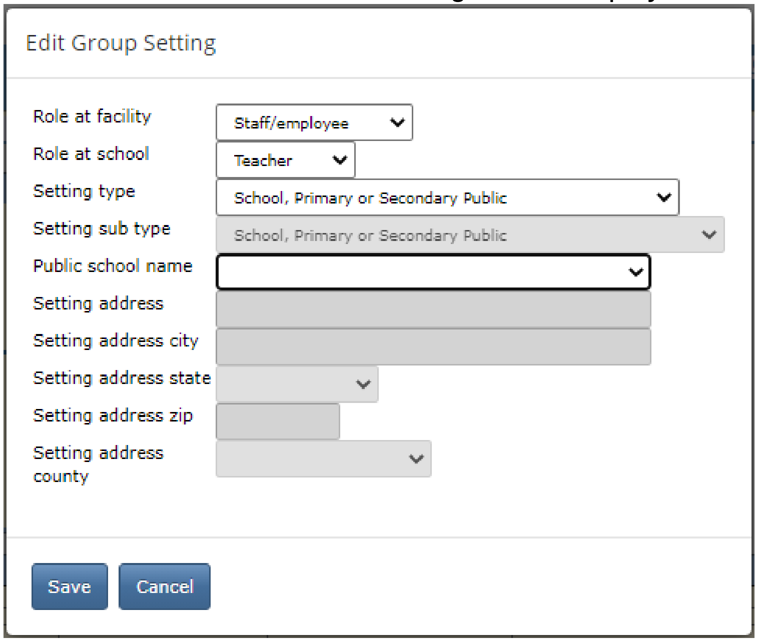
- If a facility is not listed in the dropdown and you have verified that the setting type is correct, select “OTHER” and type in the address information.


Edit Group Setting

Role at facility	Staff/employee
Setting type	Long-Term Care Facility (ALF, Nursing Home, ICF/IID)
Setting sub type	Long-Term Care Facility (ALF, Nursing Home, ICF/IID)
Long term facility name	OTHER
Setting name	LTCF A
Setting address	3602 Spectrum Blvd
Setting address city	Tampa
Setting address state	FL
Setting address zip	33612
Setting address county	HILLSBOROUGH

Save Cancel

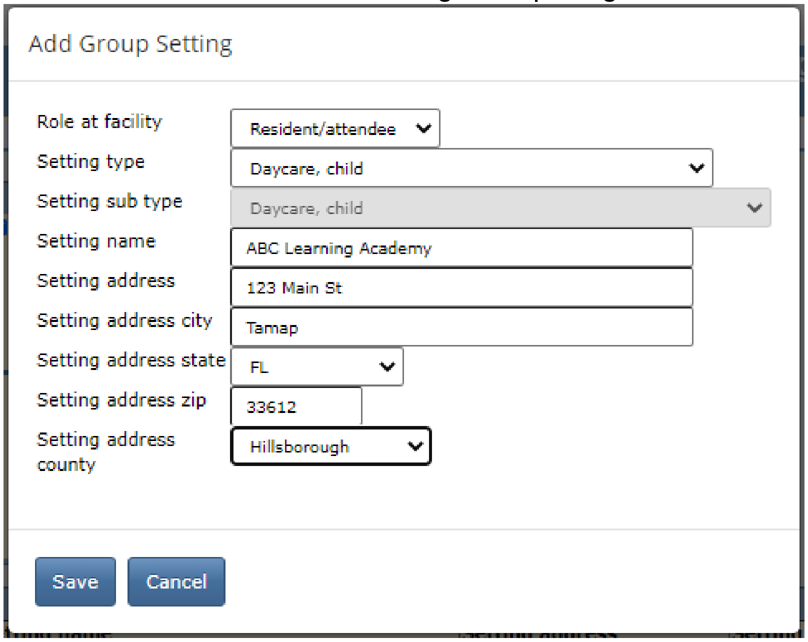
- Selecting a role of “Staff/employee” and a setting type of “School, Post-Secondary (college/university),” “School, Primary or Secondary Private,” or “School, Primary or Secondary Public” will activate an additional field “Role at school.” This field is used to differentiate between teachers and other staff among school employees.


Edit Group Setting

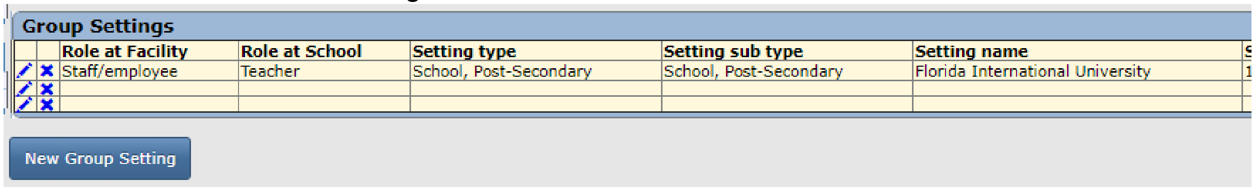
Role at facility	Staff/employee
Role at school	Teacher
Setting type	School, Primary or Secondary Public
Setting sub type	School, Primary or Secondary Public
Public school name	
Setting address	
Setting address city	
Setting address state	
Setting address zip	
Setting address county	

Save Cancel

- If the setting type selected does not have an associated dropdown list, type in the setting name and address. If multiple cases are associated with the same setting, try to input the setting name and address with consistent wording and spelling.



- When you have finished entering the group setting information, select "Save." The entry will then appear in the table. If you need to make additional edits, select the pencil icon, or select the X to delete the setting from the table.

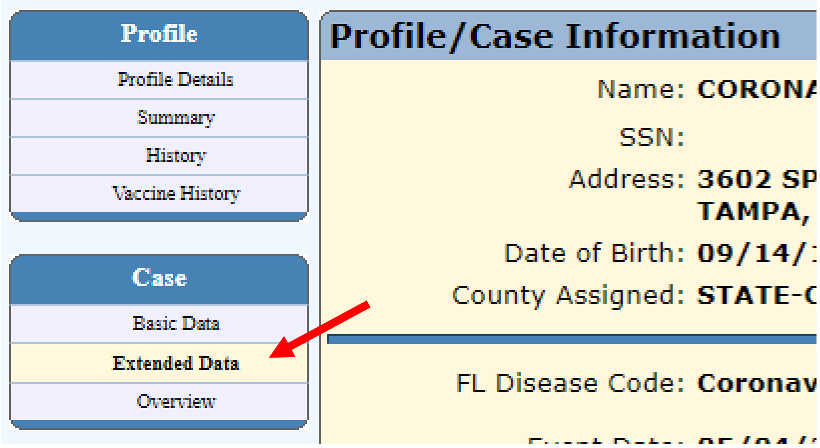


- Continue to add/edit the table until each facility the case is associated with is reflected in the table. Return to the "Basic Data" screen using the navigation menu on the left.
- Keep these tips in mind when completing the group settings section for a setting type of "Long-Term Care Facility" (LTCF):
  - The LTCF categorization is based on criteria used by the Agency for Health Care Administration (AHCA). Facilities that meet the LTCF setting type criteria are registered with AHCA and include:
    - Assisted living facilities (ALFs)
    - Nursing homes (NHs)
    - Intermediate care facilities for the developmentally disabled (ICFs/IIDs)
  - If the facility is not an ALF, NH, or ICF/IID, do not select the "Long-Term Care Facility" setting type. Additional information about a facility can be found using AHCA's Facility/Provider Locator: https://www.floridahealthfinder.gov/facilitylocator/FacilitySearch.aspx.
  - Note that the AHCA registered facility name may differ from the facility's colloquial name.

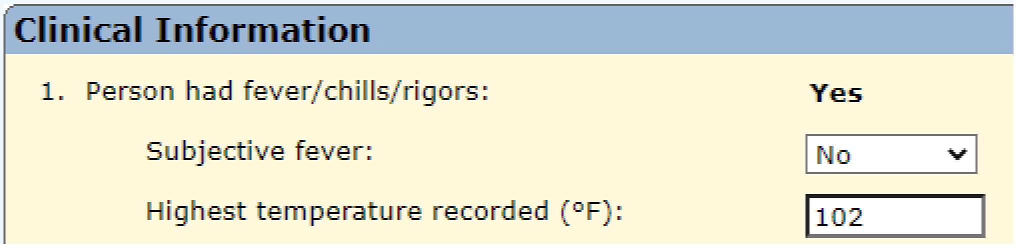
  - Before saving, **double check the facility information to ensure you are selecting the correct facility**. Some facilities have similar names while others have the same name but different setting subtypes or addresses.
  - For some LTCFs, the AHCA licensed facility may be in a complex of multiple facility types (i.e. nursing home, assisted living facility, or independent living). Verify which specific facility the case lives or works in and complete the group settings table accordingly. Independent living facilities should not be listed as LTCFs. Some nursing homes and assisted living facilities have the same name or address, so it may be helpful to verify the correct facility information using the facility's AHCA license number.
  - A person does not have to officially work for a LTCF to be considered a worker if they have had significant contact with residents at the facility.
  - Persons employed by a LTCF that don't enter the facility that houses residents or interact with staff that care for residents would not be considered a worker at the LTCF. Examples may include administrative staff in separate buildings or support staff working solely in the independent living side of a complex.
  - Only workers who could have been exposed at the facility (14 days prior to onset or lab collection date, if asymptomatic) or who were at the facility while infectious should be associated with a facility. If an individual visited a facility outside of this timeframe, do not associate them with the facility.
  - A person should not be associated with a facility if they never went to the facility. For example, if an employee of a facility exposed other household members, those persons should not be linked to the facility in the group settings section.
  - Do not wait to interview a case to fill out the group settings section if you have already verified with the facility or through medical records that the case is linked to a facility.
- The setting type "Correctional Facility/Juvenile Detention Center" includes prisons, jails, ICE detention centers, juvenile detention centers, juvenile residential detention facilities, and forensic health care facilities (secure mental/behavioral health facilities). The following tool can be used as an inmate search for department of corrections facilities: www.dc.state.fl.us/OffenderSearch/Search.aspx?TypeSearch=AI.
  - A person does not have to officially work for a "Correctional Facility/Juvenile Detention Center" to be considered a worker if they have had significant contact with inmates at the facility.

Extended Data

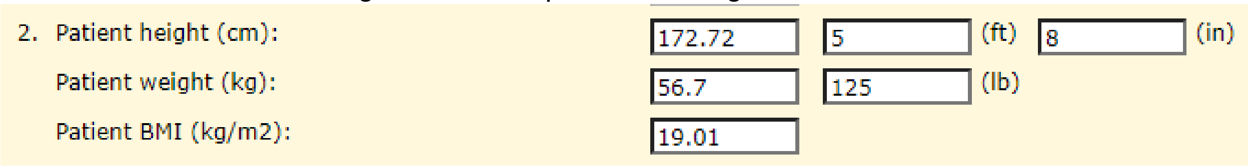
- The “Extended Data” screen is optional but encouraged to be completed for confirmed and probable cases if resources allow or if the case is severely immunocompromised. Navigate to the screen by selecting the “Extended Data” tab on the navigation menu on the left.



- Question 1 is linked to the fever symptom and can be updated on either the Symptoms or Basic Data screen. If fever was not subjective, document the person’s highest temperature in degrees Fahrenheit.



- Document the person’s height and weight in question 2. **These fields are particularly important for persons age 20-65 years.** If body mass index (BMI) is included in a person’s medical record, also document that in question 2.
  - Height, weight, and BMI reported in medical records will often be more reliable than reported through individual interviews, so **use of data from medical records, when available, is encouraged**.
  - Pay close attention to the units; height should be documented in **centimeters** and weight in **kilograms**. Merlin will automatically convert height entered in feet/inches to centimeters and weight entered in pounds to kilograms.



- Document all diagnoses the person received from a health care provider in question 3 along with the diagnosis date. The fields for pneumonia, ARDS, and multisystem inflammatory syndrome are linked to the respective fields on the Basic Data screen and can be completed in either place.

3. Diagnoses the person received:

		Diagnosis date:
Abnormal chest X-ray:	Yes	05/20/2020
Abnormal chest CT:	Unknown	
Pneumonia:	Yes	05/20/2020
ARDS:	No	
Renal failure:	No	
Multisystem inflammatory syndrome:		
Other:	No	

- Document all underlying health conditions of the person in question 4.

4. Underlying health conditions:

Current smoker:	No
Former smoker:	No
Obesity:	No
Diabetes:	Yes
Chronic lung disease:	Yes
Asthma:	Yes
Chronic obstructive pulmonary disease (COPD):	No
Chronic kidney disease:	No
Chronic liver disease:	No
Cardiac disease:	No
Hypertension:	No
Neurological/neurodevelopmental:	No
Immunocompromised:	No
Other:	No

- Question 5 is related to hospitalization. The inpatient hospitalization field is linked to the inpatient hospitalization field on the Basic Data screen and can be completed in either place.

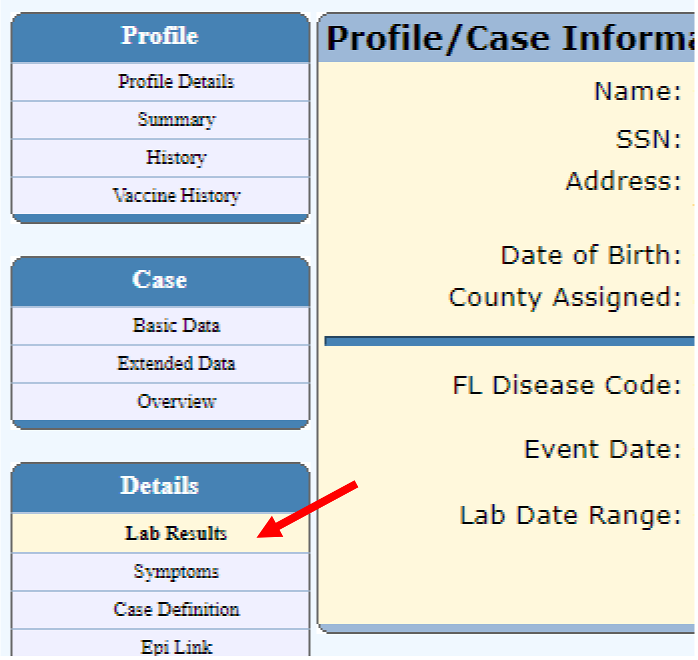
5. Inpatient hospitalization:	Yes		
Patient admitted to ICU:	No		
Patient received mechanical ventilation (MV)/intubation:	No	Total days on MV:	
Patient was on ECMO:	No		

- Document any positive, non-SARS-CoV-2 test results the person had in question 6. All SARS-CoV-2 test results should be documented on the Laboratory Results screen; see the Laboratory Results section of this document for additional guidance.

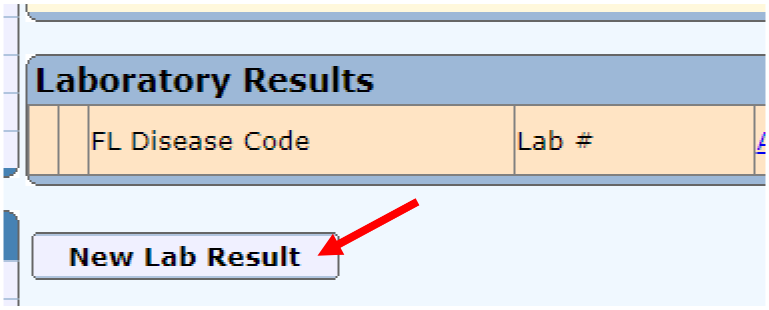
6. Patient had a positive non-SARS-CoV-2 test result:	Yes
Specify positive result(s):	
Influenza A rapid test:	Yes
Influenza B rapid test:	No
Influenza A PCR:	Yes
Influenza B PCR:	No
Respiratory syncytial virus (RSV):	Unknown
Human metapneumovirus (hMPV):	No
Adenovirus:	No
Parainfluenza 1-4:	No
Rhinovirus:	No

Laboratory Results

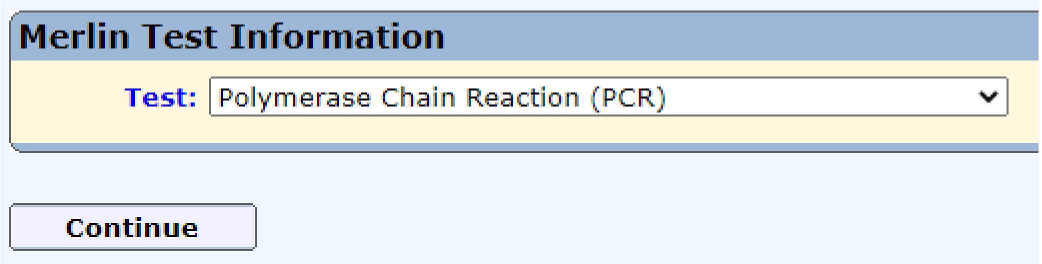
- If a paper SARS-CoV-2 laboratory result needs to be added to a case, navigate to the Laboratory Results screen by selecting the “Lab Results” tab on the navigation menu on the left.



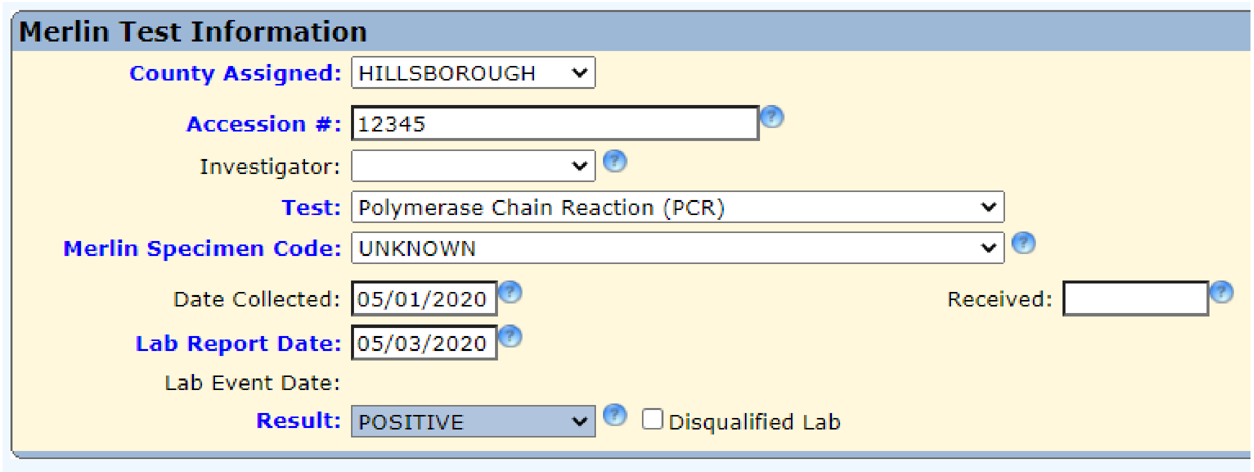
- Select “New Lab Result.”



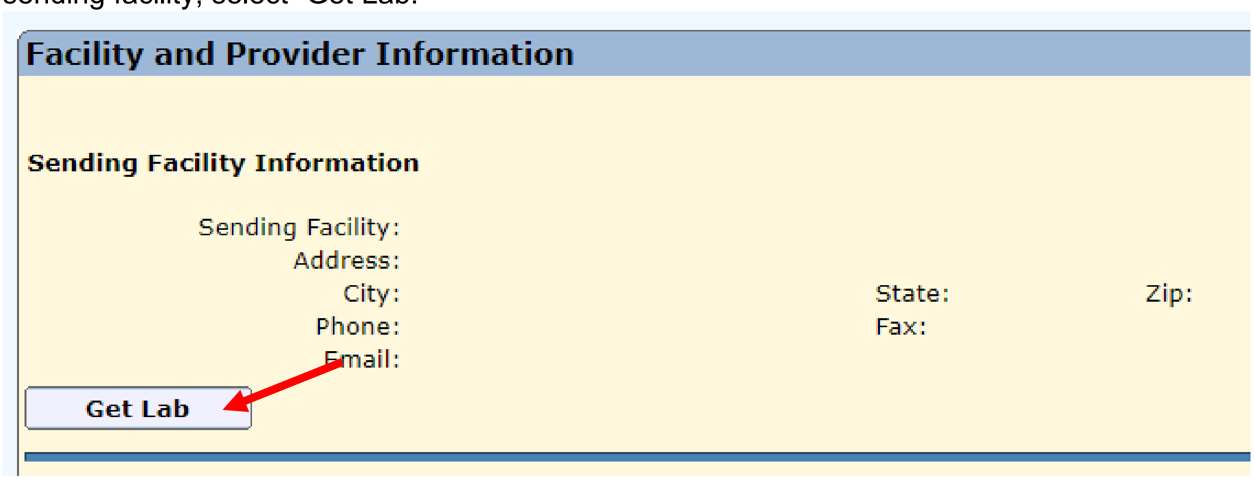
- Select the appropriate test type from the dropdown, and then select “Continue.”



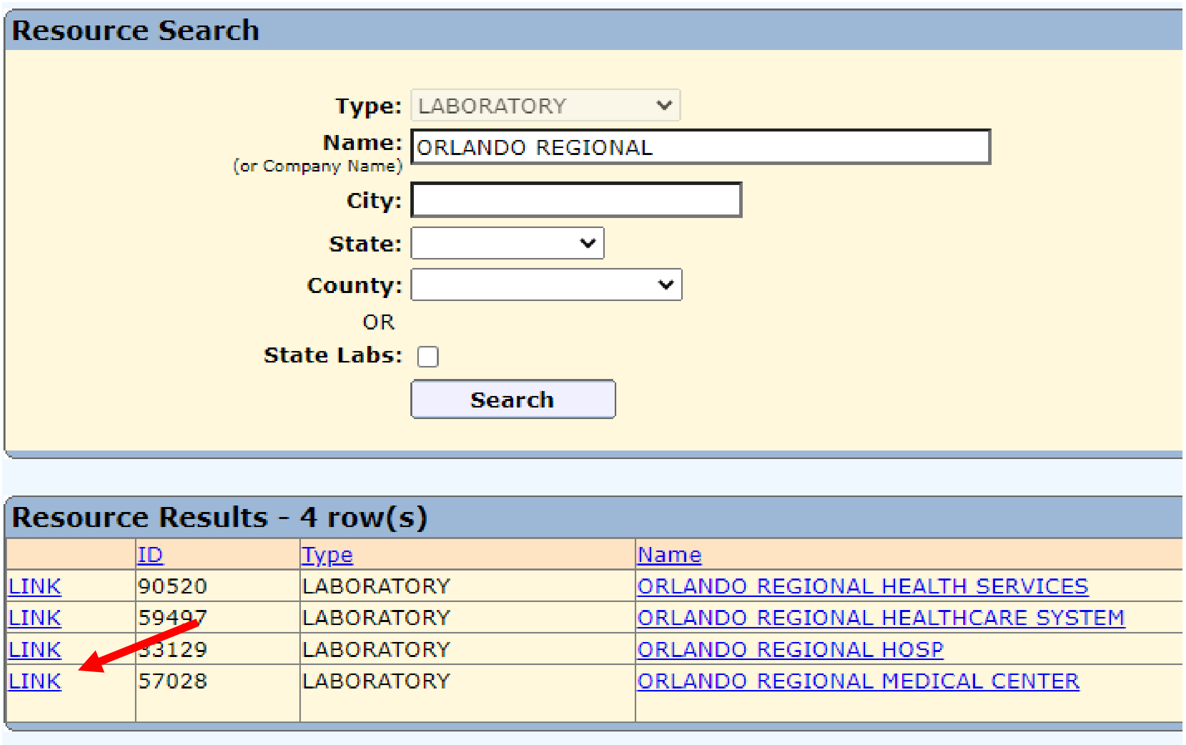
- Document as much information as you have in the “Merlin Test Information” section. The fields in blue are required.



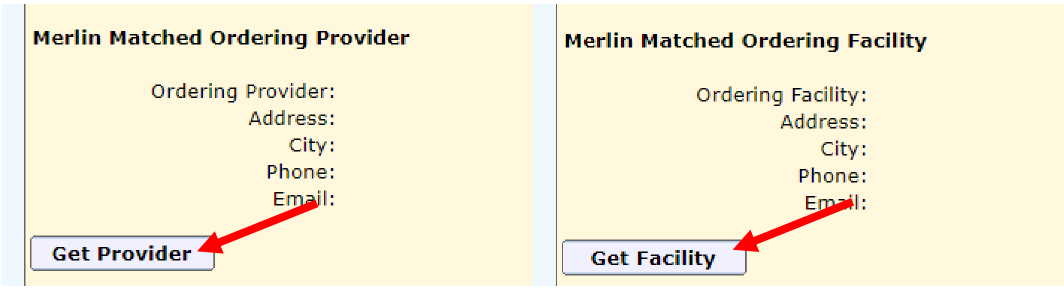
- In the “Facility and Provider Information” section, the sending facility is required. To select a sending facility, select “Get Lab.”



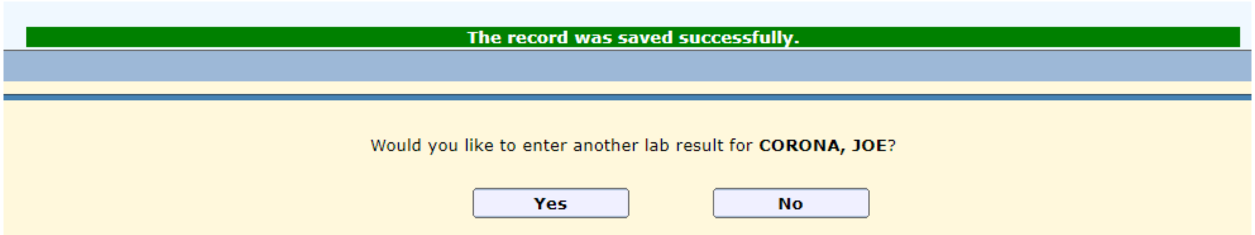
- In the “Resource Search” section, search for the laboratory that reported the paper laboratory result.
    - If you find the correct laboratory, select “LINK” next to the laboratory to return to the Lab Results screen.
    - If you do not find the correct laboratory, contact the Merlin Helpdesk at Merlin.Helpdesk@flhealth.gov.



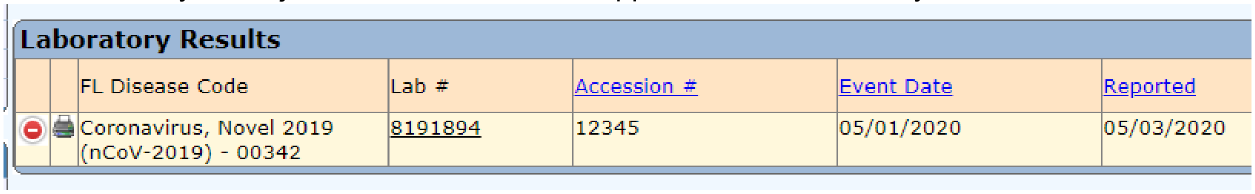
- Repeat this process for the ordering provider and ordering facility by selecting “Get Provider” and “Get Facility,” respectively.
- If you find duplicate resources for the same facility or provider, select the one that is most accurate or that contains an ELR Link.



- When ready, select “Save.” You should get a notification that the record was saved successfully. If you have another laboratory result to enter, select “Yes” to repeat this process; otherwise, select “No” to return to the Lab Results screen.



- The laboratory result just entered should now appear in the “Laboratory Results” section.

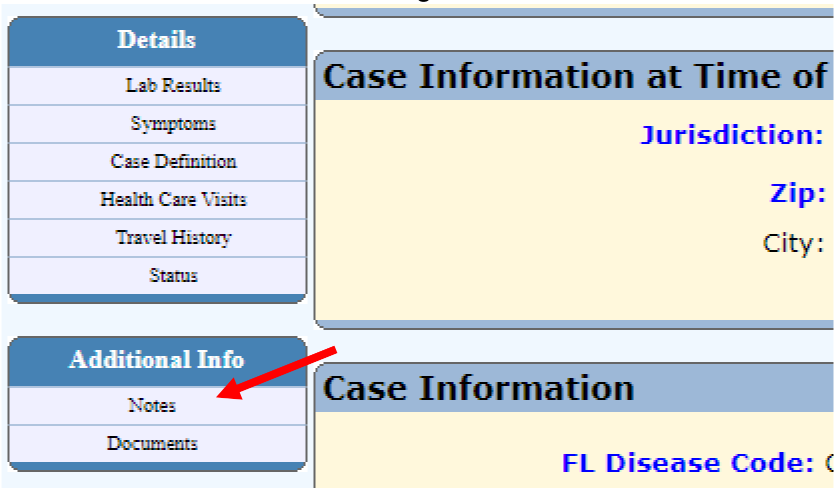


Laboratory Results

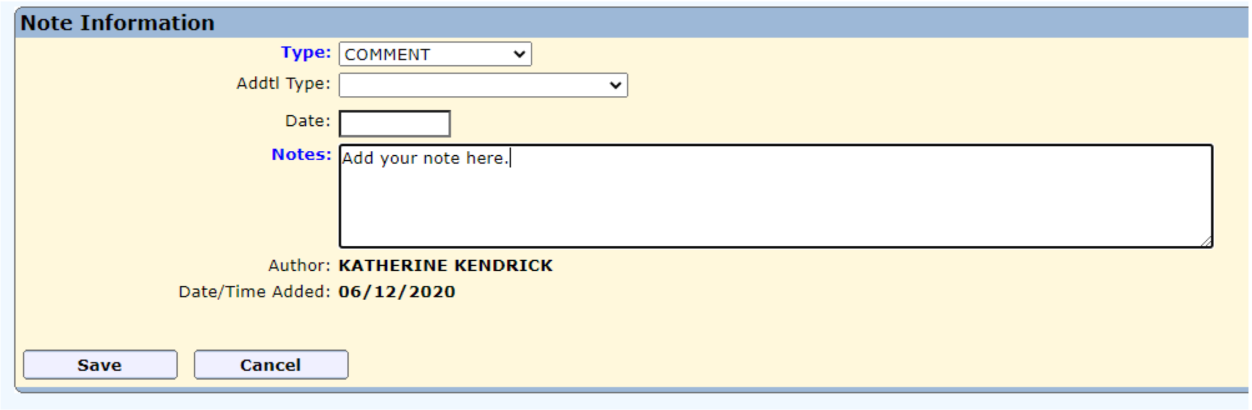
		FL Disease Code	Lab #	Accession #	Event Date	Reported
		Coronavirus, Novel 2019 (nCoV-2019) - 00342	8191894	12345	05/01/2020	05/03/2020

Notes and Documents

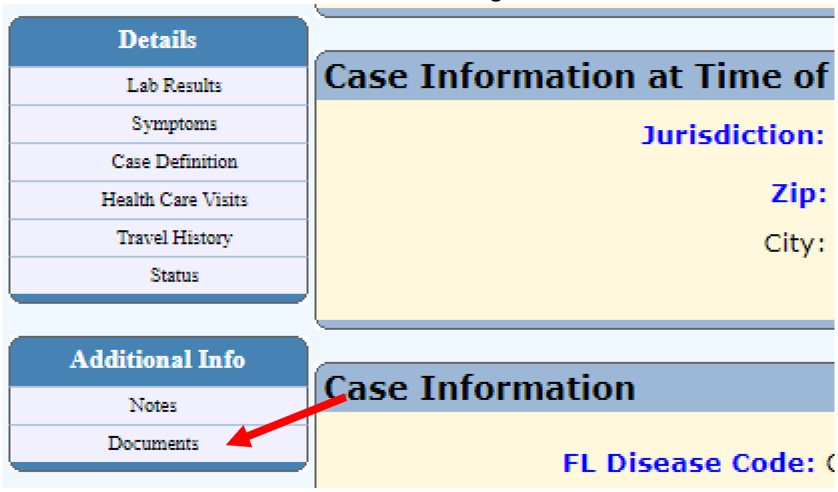
- Document any additional information not captured elsewhere on the Notes screen.
    - Navigate to the “Notes” tab on the navigation menu on the left.



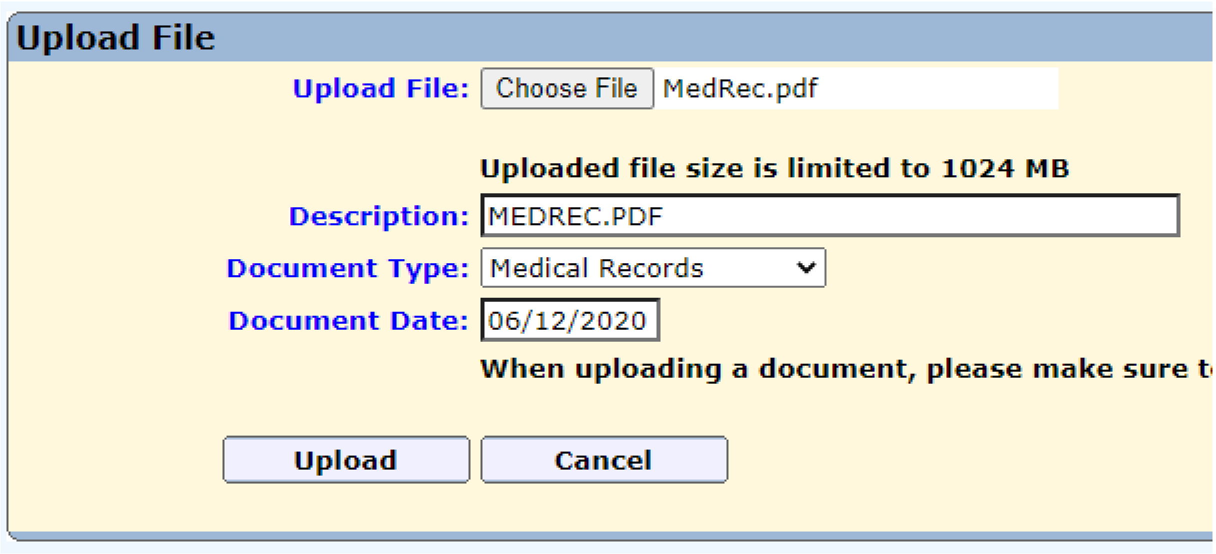
    - Select “New” to create a new note.
    - In the “Note Information” section, select the type of note, then write your text in the Notes field. Select “Save” when finished. Your note will then appear in the “Existing Notes” section.



- Upload any relevant documents to the case on the Documents screen. Relevant documents may include medical records, case report forms, death certificates, quarantine/isolation notices, etc.
    - Navigate to the "Documents" tab on the navigation menu on the left.



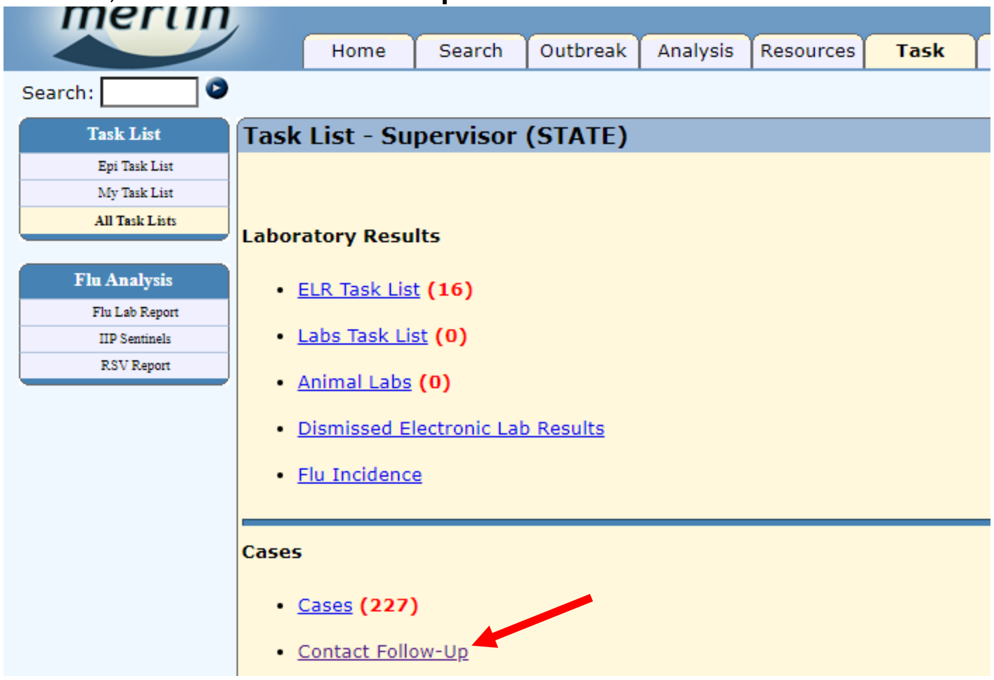
    - Select "Upload" to show the "Upload File" section.
    - In the "Upload File" section, choose the file to upload in the Upload File field. Type a description for the document in the Description field and select the document type. Select "Upload" to upload the document.



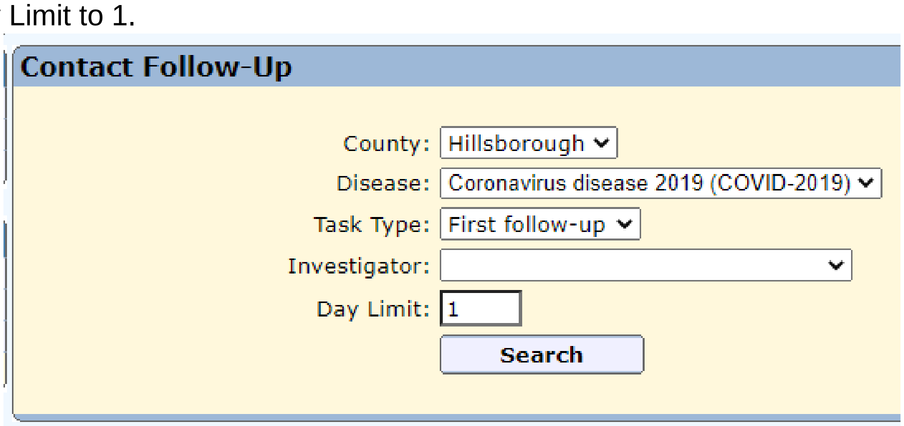
    - The document will then appear in the "Merlin Documents" section.

Contact Follow-Up Task List

- A new task list is available to keep track of contacts needing follow up. To navigate to the task list, select the “Task” tab at the top, then the “All Task Lists” tab from the navigation menu on the left, then “**Contact Follow-Up**” under Cases.



- The task list can be filtered by county, disease, task type, investigator, and day limit. These fields can also be left blank to see the full task list.
  - Currently, the only option for **Disease** is COVID-19.
  - There are two options for **Task Type**, first follow up and final follow up. First follow up indicates cases that need to be contacted for the first time. Final follow up indicates cases that need to be contacted for the final time after their monitoring period has ended.
  - **Investigator** is based on the investigator assigned to a case in the “Additional Case Information” section on the Basic Data screen.
  - **Day Limit** indicates how many days in the future you would like to see when cases need follow up. For example, a day limit of 2 would show cases that are due for follow up today or tomorrow. To only see cases are due for follow up today, set the Day Limit to 1.



- Select “Search” to see the resulting task list based on the filters. Selecting any of the column names will sort the list by that column. Selecting the Case ID for a given row will take you directly to the case to edit. The task list includes several key variables:
  - **Task** indicates the type of task, first or final follow-up, and the due date.
  - **Last date potentially exposed** determines the dates of the monitoring period. This field is based on the exposure date field that is required when adding a contact through the “People This Case Exposed” section on the Basic Data screen. Please see the section above in this document for guidance on how to add a contact.
  - **Day** indicates the number of days since the last date potentially exposed.
  - **End of monitoring period** indicates the date monitoring can be stopped for a person, which is 14 days after the last date potentially exposed.
  - **Date of last follow-up** indicates the last documented follow-up attempt for a case. Please see the Basic Data COVID-19-Specific Sections section in this document for guidance on how to document a follow-up attempt.

Search Results

Go to Page GO!

Case ID	DX status	Name	Date of birth	Task
1438786	Confirmed	HELLO, THERE		Final follow-up is due 06/11/2020

Last date potentially exposed	Day	End of monitoring period	FDOH notified date	Date of last follow-up
05/28/2020	5	06/11/2020	05/29/2020	05/30/2020

- **Cases will appear on the task list until a documented follow-up attempt has been made.**
  - Follow-up attempts should be documented in the “Follow-Up” section on the Basic Data screen. Please see the Basic Data COVID-19-Specific Sections section in this document for guidance on how to document a follow-up attempt.
  - The follow-up attempt must have an outcome of **contacted, no phone number available, or refused/don’t call back** in the appropriate timeframe for a case to be removed from the task list.
    - For a first follow-up task to be removed, a follow-up attempt must be made on or after the last date potentially exposed.
    - For a final follow-up task to be removed, a follow-up attempt must be made on or after the end of the monitoring period.
- The Contact Follow-Up task list is intended to replace the county-specific monitoring outbreaks previously used to keep track of persons being monitored. Therefore, **it is no longer necessary to attach cases to a county’s monitoring outbreak**.

Outbreak Module Guidance

Outbreak Definitions

- Long-term care facility (LTCF), skilled nursing facility (SNF), or assisted living facility (ALF) outbreaks
    - One or more facility-acquired laboratory-confirmed* COVID-19 case in a resident.
    - Two or more laboratory-confirmed COVID-19 cases in staff with epi-linkage† who do not share a household and are not listed as a close contact‡ of each other outside of the workplace during standard case investigation or contact tracing.
    - Two or more acute respiratory illness (ARI)§ cases among residents or staff within 72 hours with epidemiological linkage† who do not share a household and are not listed as a close contact‡ of each other outside of the workplace during standard case investigation or contact tracing.
- Correctional facility/juvenile detention center, adult or child day care, hospital, post-secondary school, shelter, workplace, primary or secondary school, or other setting type outbreaks
    - Two or more laboratory-confirmed COVID-19 cases among individuals with onset dates or specimen collection dates within a 14-day period, who are epidemiologically linked, and were not identified as close contacts of each other in another setting during standard case investigation or contact tracing.
    - Two or more ARI§ cases within 72 hours who are epidemiologically linked† and were not identified as close contacts‡ of each other in another setting during standard case investigation or contact tracing.

*Laboratory confirmation: detection of SARS-CoV-2 RNA in a clinical specimen using a PCR or antigen test.

†Epidemiological linkage: cases were present in the setting during the same time period (e.g. same classroom, school event, work shift or department) within 14 days prior to the event date (or the earliest date associated with a case) with no other more likely source of exposure for identified cases (e.g. same household).

‡Close contact: being within 6 feet of an infected person for at least 15 minutes for a cumulative total of 15 minutes or more over a 24-hour period starting 2 days before illness onset and during infectious period.

§ARI case is defined an individual with two or more of the following symptoms: coryza/runny nose, cough, difficulty breathing, fever, shortness of breath, sore throat, or wheezing.

Overview of Activities

- **Create an outbreak in Merlin's outbreak module within the same day of notification of an outbreak that meets the above definitions.**
    - Create new outbreaks for facilities when it has been greater than two incubation periods (28 days) between the last case's onset date or specimen collection date (whichever is later) and the new case's onset date or specimen collection date.
- **Link any confirmed or probable COVID-19 cases to the outbreak you create.**
    - Cases should be associated with an outbreak where they became a case (not where they were transferred if transferred to an isolation facility).
    - Close contacts associated with exposures at an outbreak location/facility should not be linked to the outbreak unless the contact becomes a confirmed or probable

COVID-19 case as a result of secondary transmission. The "Group Settings" section within the case can be used to track close contacts exposed at an outbreak location/facility for purposes of determining whether or not a case should be linked.

- **Add any acute respiratory illness (ARI) cases who have specimens collected for testing to the people roster in the outbreak.**
  - Adding people will prompt laboratory results to auto-attach to the outbreak as they become available in ELR.
- **Complete the following essential fields upon outbreak creation:**
  - Background section:
    - Outbreak name
    - FDOH notified date
    - Syndrome
      - Select "respiratory illness"
    - Disease
      - Select "coronavirus disease 2019 (COVID-2019) – 00342"
    - Outbreak
    - Investigated
  - Geographic location section:
    - County
    - Other counties affected: include counties that have outbreak associated COVID-19 cases linked to the outbreak, this will allow those county health departments to view the outbreak on the active outbreaks list for outbreak IDs.
  - Setting information section:
    - Setting type
    - Setting name
    - Setting address
    - Number potentially exposed
  - Transmission:
    - Primary mode of transmission
      - Select "direct – person to person or droplet"
  - Results section:
    - Total cases and total type
    - Total non-staff cases
    - Total staff cases
    - Total unknown cases
      - Leave blank or record "0" if you record staff and non-staff case counts
    - Number hospitalized and total type
    - Number died and total type
  - COVID-19 survey section (required fields):
    - Question 1 (number of cases with reported pneumonia) and total type
    - Question 2 (were viral agents identified outside of BPHL?) and table (if applicable)
    - Question 3 (outbreak related to extracurricular school activity?) and drop-down with text box (if applicable)
    - Question 4 (was secondary transmission identified in outbreak and State Leadership notified) with date notified

    - Question 5 (was onsite assessment performed by DOH in LTCF setting?) and AHCA notification date
    - Question 6 (was isolation and quarantine recommended for cases and close contacts?)
    - Question 7 (staff and non-staff received COVID-19 vaccine?)
    - Question 8 (COVID-19 vaccination information, if applicable)
    - Question 9 (influenza vaccinations offered to staff and non-staff in this setting?)
    - Question 10 (influenza vaccination status known for staff and non-staff?)
    - Question 11 (influenza vaccination information)
  - Clinical results section:
    - Symptoms
  - Laboratory results section:
    - Laboratory-confirmed human specimens
  - Conclusions/lessons learned section:
    - Recommendations/specific control measures provided to site/facility
    - Method of providing recommendations (select all that apply)
    - Recommendations implemented

- **Closing outbreaks:** Change the status of outbreaks in Merlin to closed if no new confirmed or probable COVID-19 cases identified after two incubation periods (28 days) have passed since the last known setting exposure from a case, or if that cannot be determined, the last case's onset date or specimen collection date (whichever is later).
- Outbreaks will not be accepted unless they're closed.
- **Submitting outbreaks for review:** Submit outbreaks for review **within one week of outbreak closure**. Before submission, ensure all required information (detailed above) has been recorded.
- **Outbreak deletion:** Duplicate outbreaks can be deleted by emailing the Merlin Helpdesk (Merlin.Helpdesk@flhealth.gov). Outbreaks that have been entered incorrectly do not need to be deleted but can be marked as not an outbreak by selecting "no" under the outbreak question in the Background Section. Outbreaks marked as not an outbreak will not be included in outbreak counts.

Plan for Review

- The BOE will review outbreaks to ensure consistent and complete outbreak documentation statewide and to track key elements that are standard in public health response. During the BOE review process, updates on any missing or inconsistent information may be requested.
  - **Any required information that has not been provided at the time of submission will be requested using the "needs information" and review comment features in the notes section of Outbreak Module in Merlin.**
  - The BOE will distribute an outbreak data quality check spreadsheet weekly for key outbreak data elements that need to be completed on every outbreak.

Filling Out the Background Section

- Required information in this section includes:
  - Outbreak Event/Name
    - This can be whatever you would like but should be specific to the affected setting.

        - Since there may be outbreaks in different areas of the same setting (ex. classroom outbreak and a sports team outbreak in the same school) the title is the best place to address these specifics.
    - CHD Notified Date
        - This is the date the outbreak was reported to the CHD. If the exact date isn't available, an estimate is okay.
    - Syndrome
        - Select Respiratory Illness for all COVID-19 and ARI outbreaks
    - Disease/Hazard
        - Select **Coronavirus disease 2019 (COVID-2019) – 00342** for all outbreaks of COVID-19 and ARI. Making this selection prompts the required Additional Information Section to automatically attach.

    - Estimated Ill at Initial Report
        - This refers to the number of ill individuals given by the person reporting the outbreak to the CHD. The investigating CHD may later determine the number of cases in the outbreak to be larger or smaller than the number recorded here.
    - Outbreak
        - Select **yes** if the event meets the definition of an outbreak. Selecting unknown will prompt follow-up from the BOE. For more information on what constitutes an outbreak of COVID-19 or ARI, visit FloridaHealth.gov/diseases-and-conditions/disease-reporting-and-management/disease-reporting-and-surveillance/_documents/covid-19-ari-outbreak-reporting-in-merlin.pdf
    - Investigated
        - If an investigation has been initiated for this outbreak, select **yes**.

Filling Out the Geographic Location Section

- County is the only required piece of information in this section.
    - Enter the county where the facility with the outbreak is located. If multiple counties are affected, that information can be included in this section.

Filling Out the Setting Information Section

- Adding the outbreak setting is required. Multiple settings can be added as needed, but only one setting should be marked as the primary setting.
    - If the outbreak is being reported in a skilled nursing facility, assisted living facility, or long-term care facility, select "long-term care facility (ALF, nursing home, ICF/IID)." Select the name of the facility from the drop-down list provided. This list includes all Agency for Healthcare Administration (AHCA) registered facilities.
        - Providing this information allows the BOE to more easily track facilities with multiple outbreaks reported in a given period and communicate more effectively with public health partners (like AHCA).

- If the outbreak is being reported in a school (public, private, or post-secondary) use the drop-down menu to select the name of the school.
- Selecting the name from the drop-down menu helps to match the setting of the outbreak to the group settings section on the case level.
- If unable to locate the name of a LTCF or school, email Merlin Helpdesk for assistance.

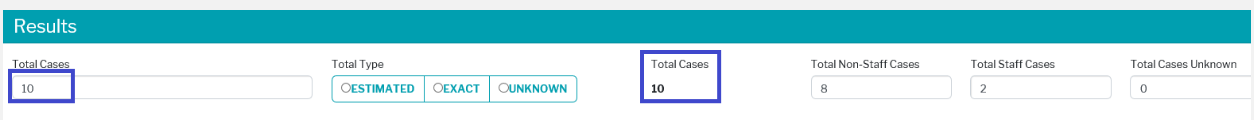
Filling Out the Transmission Section

- Primary Mode of Transmission is the only required piece of information in this section. For COVID-19 or ARI outbreaks, select Direct – Person to Person or Droplet.

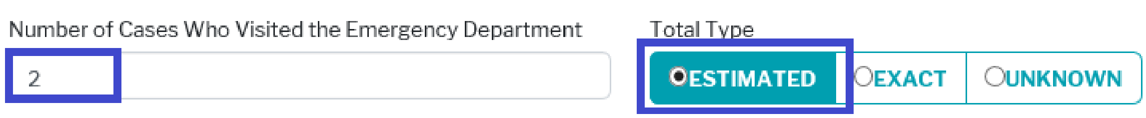
Filling Out the Results Section

- Everything included in this section is required.
- Enter the **total number of cases** and mark the **total type** (estimated, exact, or unknown). The total number of cases should be updated as cases are added, and the investigation progresses.
- Enter the **total number of staff and non-staff cases**. If it's unclear if cases are staff or non-staff, record them as unknown.

Data Quality Check: The number of non-staff cases, staff cases, and unknown cases, should add up to the total number of cases (see example below).



- If information on whether cases **sought treatment at emergency departments** is available, record the number of cases who visited the emergency department.
  - This information may only be available for a subset of the total number of cases. In that instance, check "estimated" under "total type."



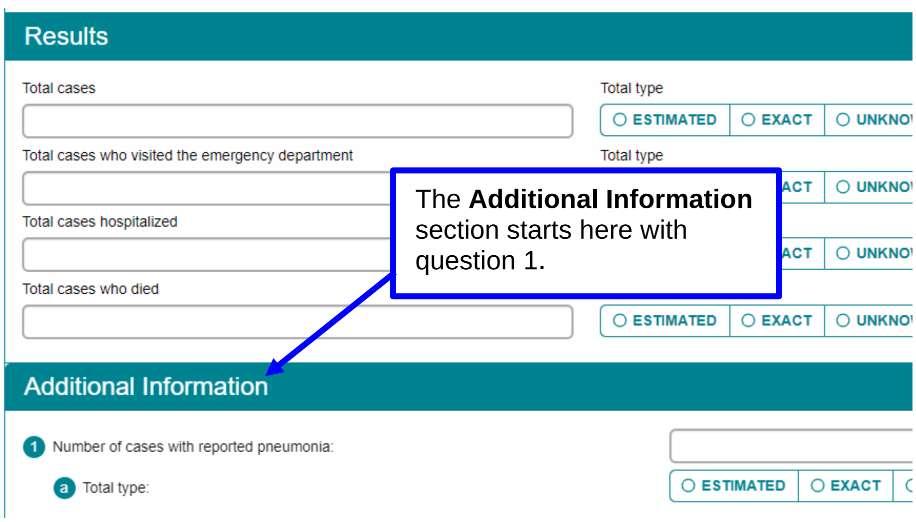
  - If this information is available for all cases, select "exact" under "total type."

  - **If it's unknown if any of the cases visited the emergency department,** check "unknown" under "total type" and don't record anything under "number of cases who visited the emergency department."

- If information on whether cases **were hospitalized** is available, record the number of cases who were hospitalized.
    - This information may only be available for a subset of the total number of cases. In that instance, check “estimated” under “total type.”
    - If this information is available for all cases, select “exact” under “total type.”
    - **If it is unknown if any of the cases were hospitalized,** check “unknown” under “total type” and don’t record anything under “number of cases hospitalized.”
- If information on whether cases **died** is available, record the number of cases who died.
    - This information may only be available for a subset of the total number of cases. In that instance, check “estimated” under “total type.”
    - If the information is available for all cases, select “exact” under “total type.”
    - **If it is unknown if any of the cases died,** check “unknown” under total type and don’t record anything under “number of cases who died.”

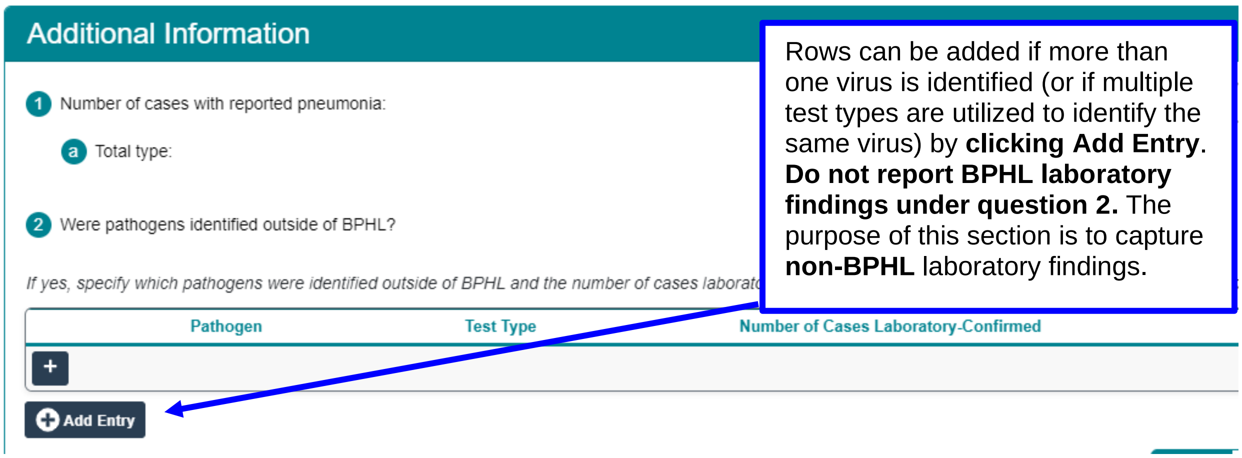
Filling Out the Additional Information Section

- **Complete the Additional Information section for all outbreaks.**
- Enter all available information at the time the outbreak is created in Merlin. Update information throughout the course of the investigation.
    - **Navigation:** The Additional Information section is located on the Outbreak Detail Screen below the Results section.

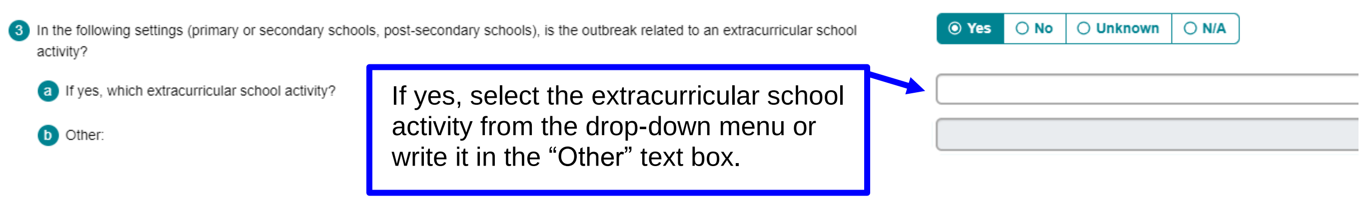


    - **Data Entry:**
        - **Question 1:** Number of cases with reported pneumonia
            - Enter the number and whether this is an estimated number, exact number, or unknown
        - **Question 2:** Were viral agents identified **outside of BPHL**?

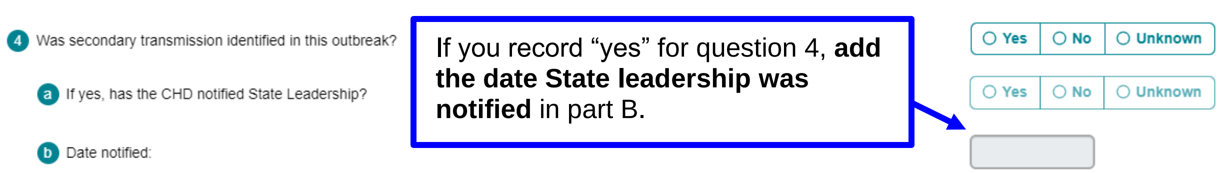
- If “yes,” select the virus, test type (“did not ask” may be selected as needed), and the number of cases who tested positive. Rows can be added if more than one virus is identified or if multiple test types were utilized by **clicking Add Entry.**
- **Do not report BPHL laboratory results under question 2.** The purpose of this question is to capture non-BPHL laboratory findings.
- For any COVID-19 results, please link the COVID-19 cases to the outbreak, do not include results here.



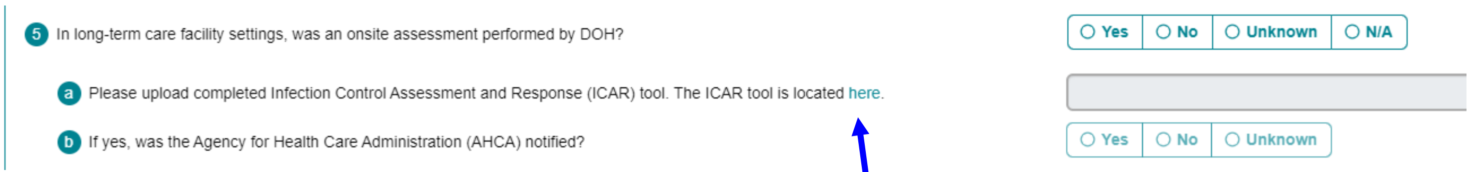
- **Question 3:** In primary or secondary school or post-secondary school settings, is the outbreak related to an extracurricular activity?
  - This question is referring to the specific setting of an outbreak, such as a sports team event or school competition, within the overall school setting.
  - In these settings, select if the setting was outside of the classroom.



- **Question 4:** Was secondary transmission identified in this outbreak?
  - This question refers to the identification of secondary transmission, meaning if a close contact of a case identified in this outbreak setting that became a case due to exposure in the outbreak setting.
  - If secondary transmission is identified, respond to part A for notification to State leadership.

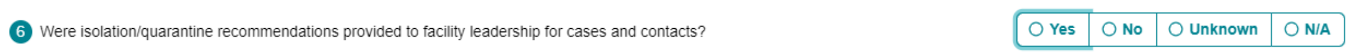


- **Question 5:** In long-term care facility settings, was an onsite assessment performed by DOH?
    - This question refers to completion of onsite assessments**.**
    - Select whether or not the Agency for Health Care Administration (AHCA) was notified and upload the completed ICAR assessment tool**.**



Use the link provided to upload completed ICAR tools.

- **Question 6:** Were isolation/quarantine recommendations provided to facility leadership for cases and contacts?
    - This question refers to recommendations made to the facility for isolation and quarantine of cases and contacts in the outbreak setting.
    - Select whether or not recommendations were provided.



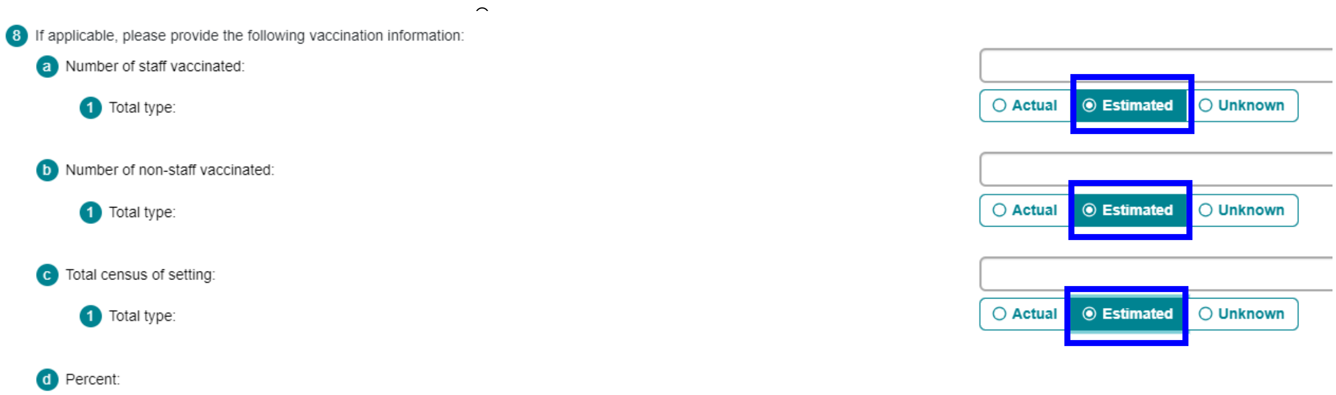
- **Question 7:** In group settings, have staff and non-staff received the COVID-19 vaccine?
    - This question refers to COVID-19 vaccination status for staff and non-staff within the outbreak setting.
    - Select whether or not the COVID-19 vaccine has been distributed.
    - If no, select whether or not there are plans to distribute the COVID-19 vaccine in this setting.

If the setting of the outbreak is one where the COVID-19 vaccine will be provided (such as a long-term care facility), mark whether staff and non-staff have received the vaccine. If they have not, mark whether or not the facility has plans to vaccinate.

- **Question 8:** If applicable, please provide the following vaccination information:
  - For this question, we're looking for the total number of staff and non-staff at the facility vaccinated with the COVID-19 vaccine and the facility census to calculate the facility's vaccination rate.
  - If this information is unavailable, select "unknown" for parts A, B, and C.

  - If non-staff vaccination data for the facility are available, select "actual" and enter the number of staff and non-staff vaccinated and the census for the facility.

  - If an estimate is available, select "estimated" and enter the estimated number of staff and non-staff vaccinated and the census for the facility.



- **Question 9:** Are influenza vaccinations offered to staff and non-staff in this setting?

- This question is referring to the ability of the outbreak setting to provide influenza vaccinations to the staff and non-staff.
- Select whether or not influenza vaccination is offered to staff, non-staff, both, neither, or unknown.

- **Question 10:** Is influenza vaccination status known for staff and non-staff in this setting?
  - For this question, we're looking for whether or not the influenza vaccination status for the current season's vaccine is known for staff and non-staff in this setting.

- **Question 11:** If applicable, please provide the following vaccination information:
  - For this question, we're looking for the total number of staff and non-staff at the facility vaccinated with the most recent seasonal influenza vaccine and the facility census to calculate the facility's vaccination rate.
  - If this information is unavailable, select "unknown" for parts A, B, and C.

- If non-staff vaccination data for the facility are available, select "actual" and enter the number of staff and non-staff vaccinated and the census for the facility.
- If an estimate is available, select "estimated" and enter the estimated number of staff and non-staff vaccinated and the census for the facility.

Filling Out Clinical Results Section

- Required pieces of information in this section include:
    - Symptoms
        - Select all known symptoms (not just respiratory symptoms)
        - If symptoms are reported that are not available as options in the drop-down menu, enter those under “other symptoms.”
    - First onset date
    - Last onset date

Filling Out Laboratory Results Section

- Laboratory-confirmed Human Specimens is the only required variable in this section.
    - Laboratory-confirmed Human Specimens **refers to specimens tested at BPHL or elsewhere** (including point of care testing). If there is one or more positive laboratory result for this outbreak, select yes. If specimens are pending testing, select unknown and update when testing is complete.
    - Likewise, Laboratory Testing Conducted refers to **testing conducted at BPHL or elsewhere** (including point of care testing).
    - Laboratory Testing Conducted, Number of Cases Laboratory Confirmed, and Laboratory Findings are all optional. If you do choose to complete these additional fields, please ensure the information is consistent with laboratory information reported in other sections.
    - For COVID-19 positive laboratory results, please make sure the COVID-19 cases are attached to the outbreak.

Data Quality Check: The information recorded in this section should be consistent with information provided in questions 2, 3 of the Additional Information section as well as with any cases or people attached to the outbreak with COVID-19 laboratory results. If results are recorded in question 3 of the Additional Information section, or if positive laboratory results are attached from cases, Laboratory-confirmed Human Specimens should be marked as “yes.”

Filling Out EpiCom Section

- This section can be used to generate an EpiCom post using the information provided in your outbreak post. EpiCom posts are optional. Nothing in this section is required.
- To submit an EpiCom post, select “New EpiCom Post” and fill out the required information.

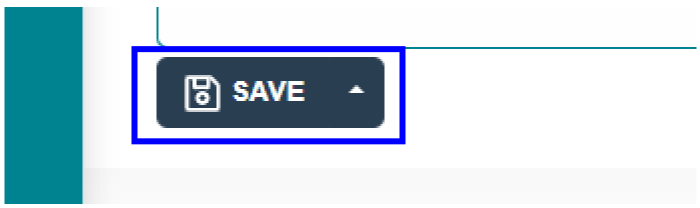
- Once the EpiCom post is structured as desired, click “Post” to submit the EpiCom post.

Filling Out Conclusions/Lessons Learned Section

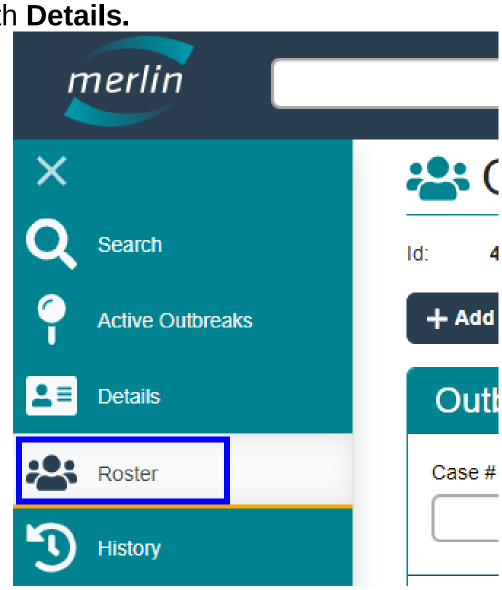
- “Recommendations/Specific Control Measures Provided to Site/Facility” is the only required question included in this section. The remaining questions in this section are optional.

How to Attach COVID-19 Cases to the Outbreak Roster

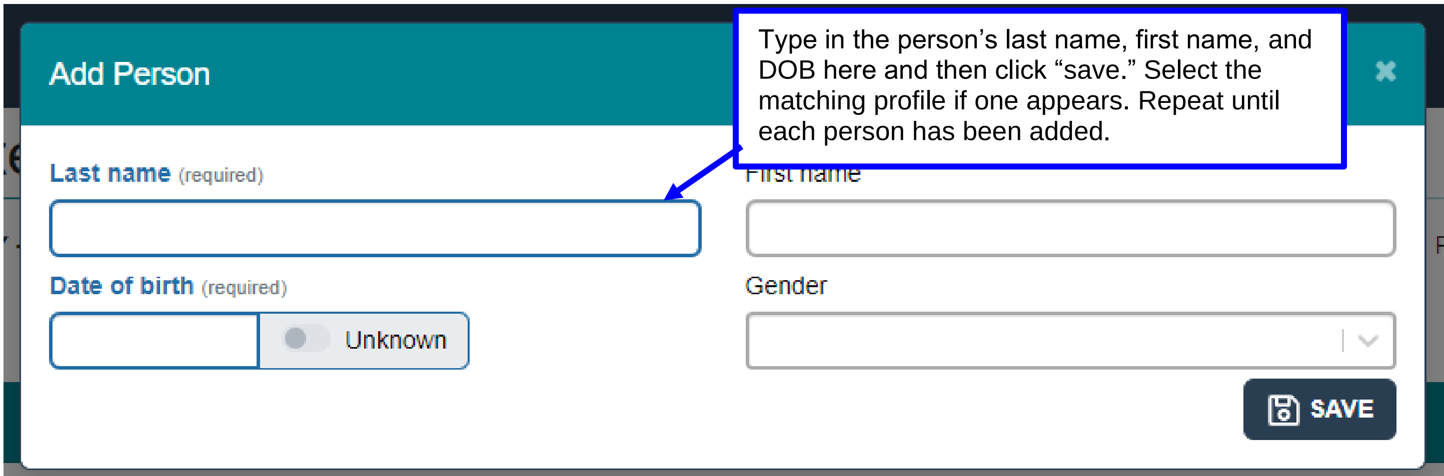
- **Before moving on to this task, be sure to save your outbreak by scrolling to the bottom of the page and clicking Save.**

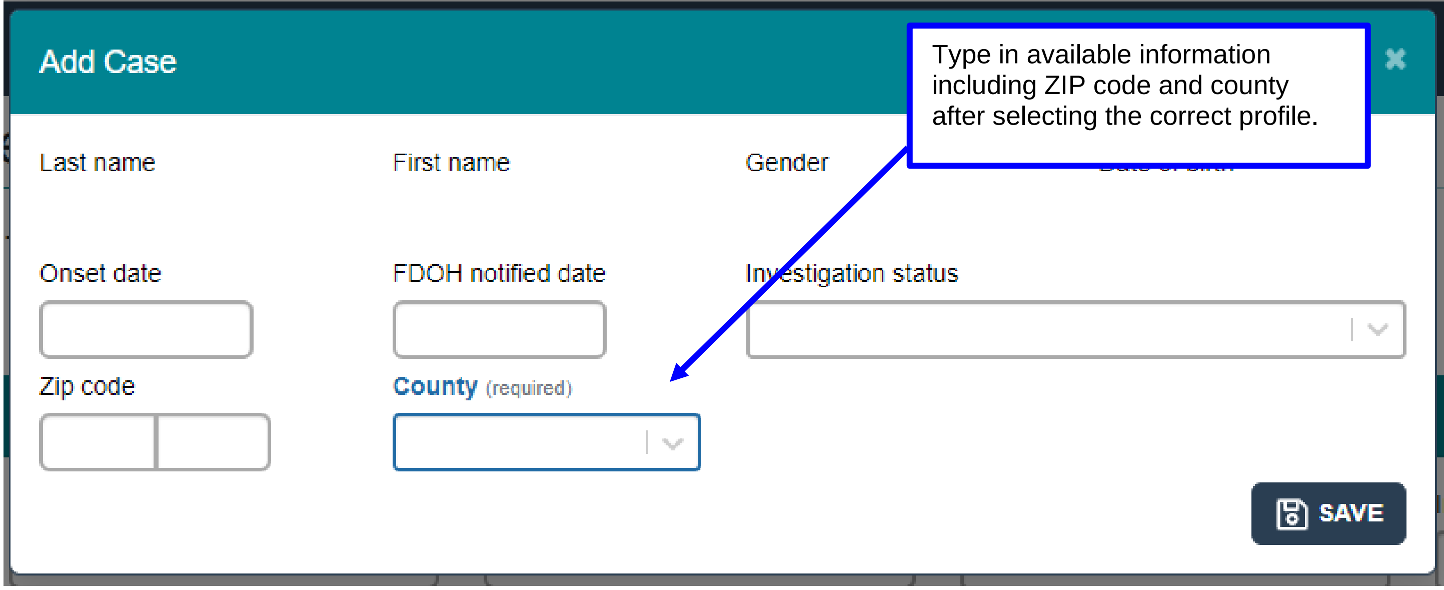


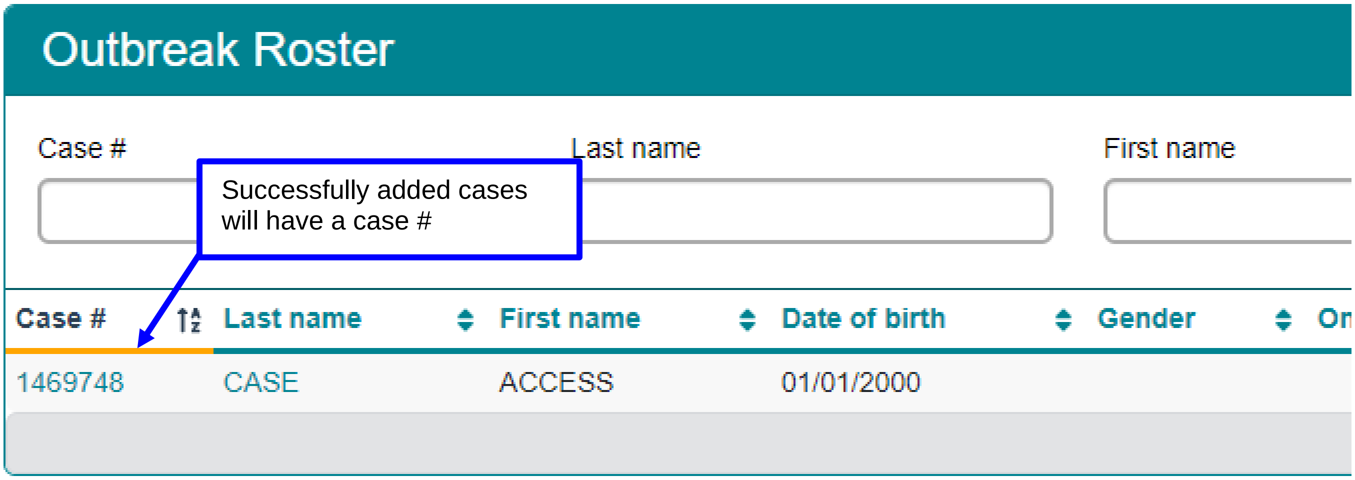
- **Required: Add all confirmed and probable cases of COVID-19 to the roster section of the outbreak**
    - Confirmed and probable cases associated with the outbreak and any ARI cases who have had specimens collected for testing should be linked to the outbreak.
    - Adding people to the outbreak will prompt the automatic attachment of any laboratory results once available in ELR
    - **Step-by-Step Instructions for Adding People awaiting BPHL testing:**
        - From the outbreak detail screen, on the left-hand side menu, click **Roster,** underneath **Details.**



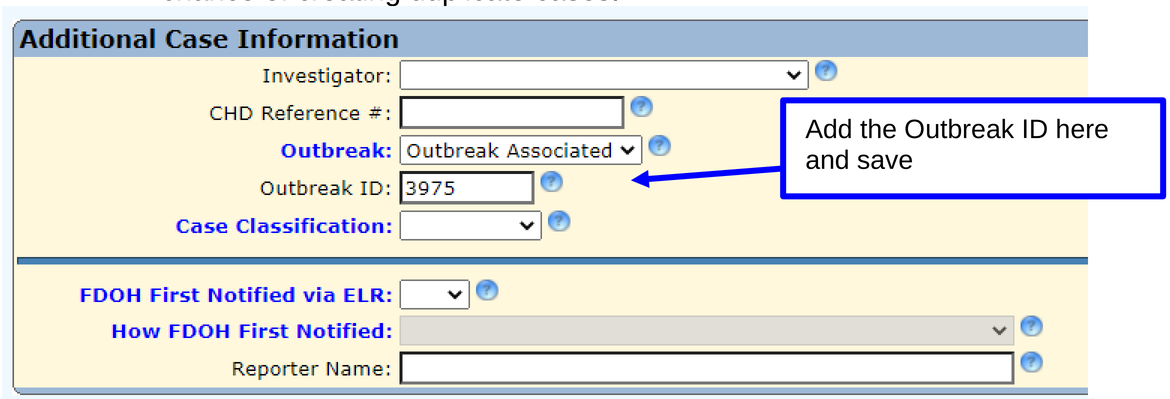
- Enter people in the **Outbreak Roster** section of the page by clicking **Add Person** and entering each person's **last name, first name, date of birth, county, and ZIP code** before clicking **Save.**
  - If the person doesn't immediately show up, refresh the page before adding the person a second time to avoid duplicate entries
- Repeat until each case has been added to the people roster

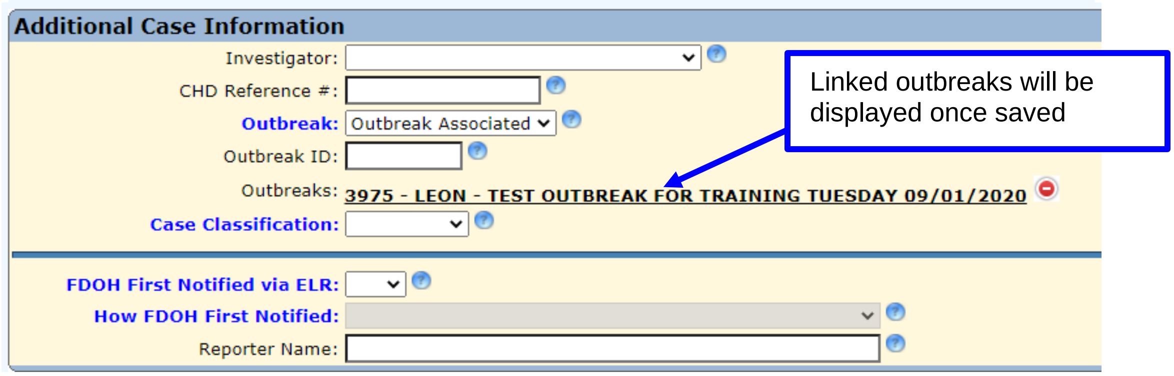


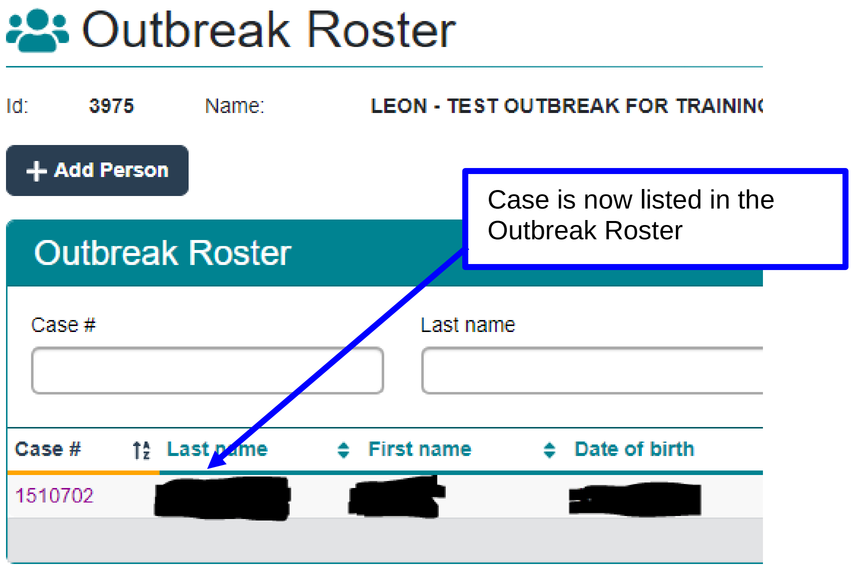




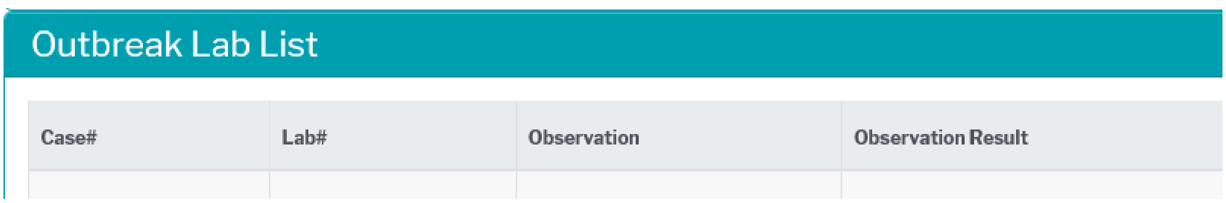
- **Step-by-Step Instructions for adding confirmed and probable COVID-19 cases:**
  - If there are already cases created for the individuals in the outbreak, add them to the outbreak roster by adding the Outbreak ID on the basic case screen of the specific case.
  - Select **outbreak associated** for the case and enter the **outbreak ID**.
  - Outbreaks should be linked from the case to the outbreak to remove the chance of creating duplicate cases.







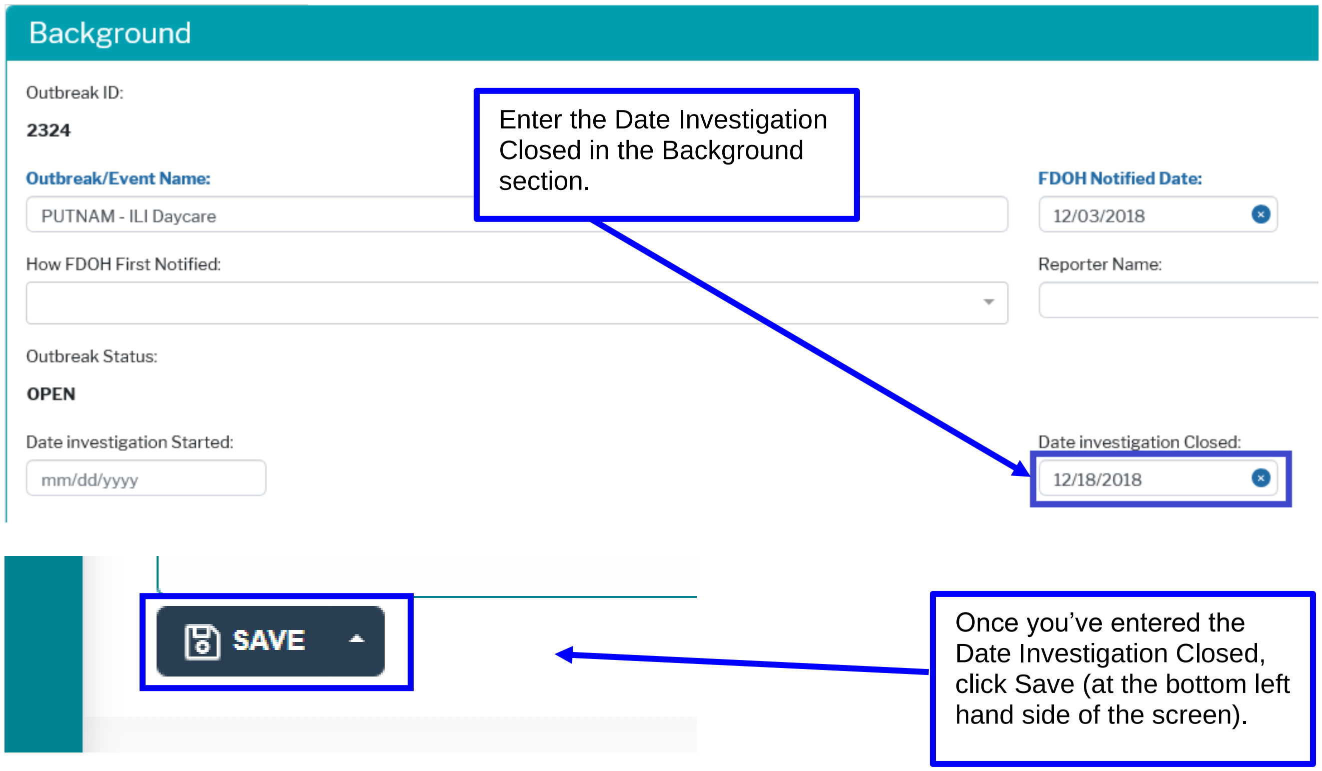
- All corresponding laboratory results for the people added to the outbreak module (as shown above) will automatically attach. Attached laboratory results can be viewed individually in each person's case or all together in the Outbreak Lab List (located below the Additional Information Section) on the outbreak detail screen.



- **All outbreak specimens submitted to BPHL will receive COVID-19, influenza, and extended respiratory panel testing.**
  - If laboratory results are available in ELR but haven't automatically attached after a few days, contact the Merlin Helpdesk (Merlin.Helpdesk@flhealth.gov) for additional assistance.

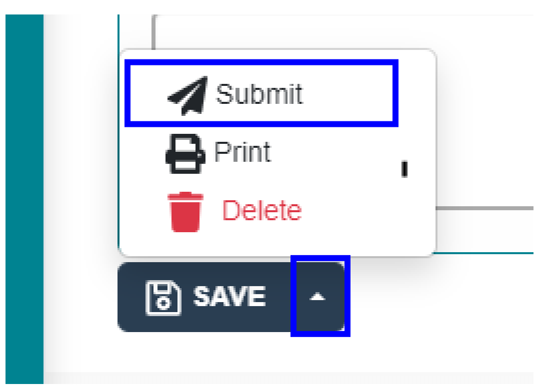
Closing the Outbreak

- **It is recommended that outbreaks be closed after two incubation periods (28 days) have passed since the last known setting exposure from a case, or if that cannot be determined, the last cases' onset date or specimen collection date (whichever is later). Outbreak closure is required for acceptance.**
  - **To close the outbreak,** navigate to the **Background** section located at the top of the outbreak detail screen.
  - Enter the **Date Investigation Closed** and click **Save.**
    - To reopen a closed outbreak, remove the Date Investigation Closed and click Save. Even if an outbreak is reopened, it will not be visible in the submitted for review section.



Submitting the Outbreak for Review

- **Submit completed outbreaks for a final review within one week of closure. Submitted outbreaks should include all required information.**
- Submitted outbreaks will undergo a final review and will be accepted or returned within 7 days of submission. Submitted outbreaks will be reviewed for both completeness and consistency. The reviewer will update the outbreak status to "**needs information"** and provide comments to prompt the entry of any missing information or the clarification of any inconsistent information. **Outbreaks in "needs information" will be sent to the CHDs each week in the Data Quality Check Review spreadsheet.**
  - Once changes have been made, **resubmit the outbreak** by clicking arrow next to **save** and clicking **"submit"** at the bottom left hand side of the screen.



Appendix A: COVID-19 Associated Death Classification

Deaths are classified based on the following criteria.

Inclusion criteria:

A death after January 19, 2020 in a PCR- or antigen-positive case of COVID-19 where exclusion criteria are not met and:

1. COVID-19/coronavirus is listed as the immediate or underlying causes of death or listed as one of the significant conditions contributing to death

OR

2. Decedent has PCR- or antigen-positive results within 30 days of death (based on lab report date)

Exclusion criteria:

A death should be excluded if an alternative cause of death can fully explain their cause of death (e.g., trauma, suicide, homicide, overdose, motor-vehicle accident, etc.).

Examples:

	Meets inclusion criteria	**Meets exclusion criteria**
Immediate/underlying causes of death: Hypertensive arteriosclerotic cardiovascular disease **Significant conditions contributing to death:** fall with skull fractures and subdural hematoma, COVID-19 positive, cirrhosis		Skull fractures with subdural hematoma fully explains the death.
Immediate/underlying causes of death: COVID-19 pneumonia **Significant conditions contributing to death:** dementia, hypertensive cardiovascular disease, closed head injury with intracranial hemorrhage sustained in a ground level fall	Although the fall was a contributor, COVID-19 pneumonia was listed as the cause of death.	
Immediate/underlying causes of death: acute respiratory distress syndrome, pneumonia, COVID-19 **Significant conditions contributing to death:** complications of traumatic brain injury, Alzheimer's dementia	ARDS, COVID-19 pneumonia was listed as a cause of death.	
Immediate/underlying causes of death: hanging **Significant conditions contributing to death:** none		Decedent was a confirmed case in Merlin, the ultimate cause of death was suicide and not COVID-19.
Immediate/underlying causes of death: Acute respiratory distress syndrome, pneumonia **Significant conditions contributing to death:** Diabetes mellitus	Decedent was a confirmed case in Merlin, date of death was <30 days from the lab report date, and ARDS and pneumonia were listed as a cause of death.	