

**NEDSS Training Exercises for**

**Module 5: Tuberculosis, TB Disease Only, & Comprehensive TB Treatment Details Tab**

**Overview:**

* This module contains three exercises, #7, 8, & 9.
* When you have finished, email your supervisor your responses.

**Instructions**

**Exercise #7, the Tuberculosis tab:**

Enter data in the Initial Evaluation section.

When you get to the question “TB Symptom Screening Performed”, select YES and enter a past date.

Next, select YES to “Is patient symptomatic?”

You have been provided the following data. Enter this in the Symptom Screening Repeating Block:

Cough (persistent x3 weeks) Onset April 3, 2023

Fever/chills Onset July 1, 2023

Weight loss (>10%) Onset July 1, 2023

1. Provide a screenshot of the updated Symptom Screening Repeating Block:

Screenshot should look like this, with those exact dates and s/s:



1. What is a quick, accurate way to enter “No” if the patient had no Medical Risk Factors noted under the Risk Factors section?

Enter “N” and then the tab key to quickly select No.

1. In the Chest Imaging section, enter any type of chest study with any date and any data results you choose. Add at least 2 and provide a screen shot of the “additional Chest Imaging” repeating block:

Review Screenshot of at least 1 of the 2 radiology results:



**Exercise #8, the TB Disease ONLY tab:**

1. Enter any past date in the “Date of Illness Onset or Symptom Start Date” field. Next, indicate Pulmonary as Site of TB Disease. Provide a screenshot of this.

Review screenshot of them selecting Pulmonary as site of TB disease



1. Under the Initial Treatment Information section, what happens when you select the grey box “Standard Regimen (4)”?

The first 4 medications are selected as Yes.

1. In the Case Outcome section, Sputum Culture Conversion Documented sub-section, what fields are not editable if you select “No” to the question “Sputum Culture Conversion Documented?” Select all that apply:

[x]  If YES, date specimen collected for FIRSST consistently negative sputum culture

[ ]  If No, reason for not documenting sputum culture conversion

[x]  *Other* if No, reason for not documenting sputum culture conversion

**Exercise #9, the Comprehensive TB Treatment Details tab:**

Enter an Initial Treatment Type as “Drug Susceptible TB (Known or Suspected). Provide dates in the Treatment Details subsection. Skip the Treatment Ordering Provider subsection. Now, list three drugs, a start and stop date, and dosage in the Medications subsection.

1. Provide a screenshot of the drugs in the repeating block:

Screenshot should have at least 3 medications with state/stop date and dosages:



1. If you noticed a mistake in the repeating block of drugs, what would you click on to easily delete the row?

The red X in the row to be deleted.