Notifiable Medical Conditions (NMC) Surveillance System

Enhanced COVID-19 Surveillance Case Notification Form Completion Guide

Note: Where faint grey italicised text is given in the response boxes, the response must be written on top of the grey font. This font is meant to inform the notifier as to what information goes into that respective box.

Data variable	Definition
Admission status	Describes the setting when the patient was diagnosed and treated for COVID-19 by a healthcare professional
Age	This field identifies the age of the patient.
Alternative contact number	A phone number that can be used to access a patient if the initial phone number is unavailable
Asymptomatic	When a patient has a laboratory confirmation of infection but is not showing symptoms of a disease
Case severity	Describes the intensity of illness at the point of consultation.
Citizenship	This field identifies the patient's nationality or country of origin.
Date of admission	The date on which a patient was admitted in hospital for clinical care
Date of birth	A date on which a patient was born
Date of death	A date on which a patient was declared dead from COVID-19 related complications, by authorized personnel.
Date of diagnosis	The date on which the first specimen that tested positive for SARS- Cov-2 (i.e. the COVID-19 virus) was collected from the patient.
Date of notification	The date upon which the healthcare worker reports/notifies a patient with a diagnosis of COVID-19 to the NMC surveillance system
Date of specimen collection	The date upon which the specimen was obtained or drawn from the patient.
Date of symptom onset	This field indicates the date the patient first noticed signs and symptoms of COVID-19.
Dates entered high care /ICU	A date upon which a hospitalized patient was signed into the High Care ward or the Intensive Care Unit for high level clinical care

Dates exited high care /ICU	A date upon which a hospitalized patient was signed out of the High Care ward or the Intensive Care Unit for high level clinical care
Employer/educational institution address	This field is meant to document the place where the patient spends most of their time other than their residential dwelling place. For employed adults this refers to their place of work. For minors who are enrolled in school, this refers to their school address.
Extracorporeal membrane oxygenation (ECMO)	A medical technique used to provide life support through a mechanical system that pumps and oxygenates a patient's blood outside the body, when there are problems with the lungs or the heart.
First name and surname	This field identifies the first name and surname of the patient as it appears on their identity document.
Gender	This field identifies the biological sex of the patient.
Health facility name	This field identifies the health facility as it is reflected on the DHIS org unit hierarchy where the NMC is being reported/notified.
Health laboratory worker	An individual employed in a medical laboratory where clinical pathology tests are performed
Health sub-district	This field identifies the Sub-District where the health facility that is reporting/notifying the diagnosed NMC is administratively located
History of close physical contact with confirmed COVID-19 case in past 14 days	This field identifies risk of exposure due to the patient having been in contact with a person who had or was suspected to have had COVID-19 disease.
Hospital outcome status	Status of hospitalized COVID-19 patients at the time of notification or on follow up (note: this field should be updated accordingly in the event that the status of the patient changes after an initial notification has been submitted).
Inpatient	A patient was admitted in hospital at the time of COVID-19 diagnosis.
Level of care	The intensity of clinical effort required in a hospital setting to treat a patient with confirmed COVID-19 disease.
Mechanical ventilation	A medical technique used to mechanically support movement of gas to and from the lungs using an external device.
Method of diagnosis	This field identifies the method of diagnosis for COVID-19. Methods of diagnosis include but are not limited to rapid testing, laboratory diagnosis, clinical signs and symptoms only, biopsy and X-rays.
Name of Source of person under investigation (PUI)	A name of the healthcare setting from which a patient was identified for COVID-19 testing.
Nasal cannula oxygen	A medical device used to deliver supplemental oxygen through the nostrils of a patient in need of respiratory support.
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Next of kin	A patient's closest living family member, relative or friend, who can be contacted for information about the patient when a need arises.
Outpatient	A patient was diagnosed with COVID-19 and treated without staying in hospital overnight
Passport number	This field identifies the patient's passport number. This must only be completed if the patient does not have a South African ID number.
Patient admission status	This field identifies whether the patient is an inpatient/outpatient or discharged at the time of notification.
Patient file/folder number	This field identifies the patient's registered file number within the health facility
Patient HPRS-PRN	This field identifies the Health Patient Registration System - Patient Registration Number.
Quarantine center	A place designated for separating asymptomatic persons who are exposed to disease from non-exposed persons
Residential address	This field refers to the street address, village, town or city where the patient physically resided at the time the diagnosis was made.
Room air	The patient can voluntarily breath on his/her own without medical intervention
Self-defined gender	A personal conception of oneself as neither male nor female
Source of person under investigation (PUI)	A setting from which a patient was identified or referred for COVID- 19 testing
South African identification (ID) number	This field identifies the 13-digit South African identity number of the patient.
Specimen barcode	This field uniquely identifies the specimen. For NHLS specimens, this refers to the NHLS pre-printed specimen barcodes that are provided with the specimen request form.
Start and end date of mechanical ventilation	A date on which a patient was put on a (start date) and removed from (end date) a mechanical gas exchange support
Start and end of ECMO	A date on which a patient was put on (start date) and removed from (end date) mechanical life support
Underlying factors/ comorbid conditions	Co-existing medical conditions with reference to COVID-19 at the time of diagnosis.