

INSTRUCTIONS FOR SURVEILLANCE FORM

MHSU-0003 MONKEYPOX CASE INVESTIGATION FORM

TO MEET THE HEALTH NEEDS OF INDIVIDUALS, FAMILIES AND THEIR COMMUNITIES BY LEADING A SUSTAINABLE, PUBLICLY ADMINISTERED HEALTH SYSTEM THAT PROMOTES WELL-BEING AND PROVIDES THE RIGHT CARE, IN THE RIGHT PLACE, AT THE RIGHT TIME.

— MANITOBA HEALTH AND SENIORS CARE

Epidemiology & Surveillance

Information Management and Analytics Branch
Resources and Performance Division
Manitoba Health and Seniors Care

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Let us know what you think. We appreciate your feedback! If you would like to comment of any aspects of this document please send an email to: outbreak@gov.mb.ca.

BACKGROUND

These instructions are intended to be used as a reference for Manitoba health care providers completing the **MHSU-0003 Monkeypox Case Investigation Form**.

This document provides form-specific instructions for completion, including some guidance for documentation in the Public Health Information Management System (PHIMS). Overall guidance on completion of surveillance forms is provided in the **USER GUIDE FOR COMPLETION OF SURVEILLANCE FORMS FOR REPORTABLE DISEASES**, available at <http://www.gov.mb.ca/health/publichealth/surveillance/forms.html>.

Please refer to the [Communicable Disease Management Protocol Monkeypox \(Orthopoxvirus\) Infection](#) document for additional information on case definitions, timeframes for investigation, and case management recommendations.

SUBMISSION OF FORMS TO THE MANITOBA HEALTH SURVEILLANCE UNIT (MHSU)

INVESTIGATION (MHSU-0003) CASE FORMS SHOULD BE COMPLETED AND FAXED TO THE SURVEILLANCE UNIT CONFIDENTIAL FAX (204-948-3044) WITHIN 24 HOURS OF THE INTERVIEW WITH THE CASE.

MHSU General Line: 204-788-6736

If you have any questions or concerns about the reportable diseases or conditions or you need to speak with a Medical Officer of Health, please call 204-788-8666 anytime (24/7).

FORM-SPECIFIC GUIDANCE

Overall guidance on completion of surveillance forms is provided in the [USER GUIDE FOR COMPLETION OF SURVEILLANCE FORMS FOR REPORTABLE DISEASES](#), which contains definitions and guidance for all data elements.

The following tables provide instructions of specific relevance to this form.

For users of the Public Health Information Management System (PHIMS), “breadcrumbs” (located at the top right-hand corner of sections) provide guidance on where to navigate in PHIMS to enter the information (e.g., subject>client details>client demographics).

As Monkeypox is an emerging pathogen within Canada, several characteristics of the infection are evolving and guidance on how to define and manage these aspects may change as new information becomes available. For the most up to date provincial public health guidance, refer to the [Communicable Disease Management Protocol Monkeypox \(Orthopoxvirus\) Infection](#).

Monkeypox investigations are to be created under the Communicable Diseases Encounter Group. Forms should be re-submitted if significant new information emerges after the initial investigation.

FORM HEADER

Data Element	Critical Field	Instructions on Use
Case Accession number; Additional accession numbers	*	The Accession Number for the first positive laboratory result associated with this investigation should be documented within the investigation header. Accession numbers for all additional positive laboratory results that are relevant to the investigation should be documented within the "additional accession numbers" box. All positive laboratory results for reportable diseases must be associated to an investigation.
Investigation ID		The investigation ID may also be documented within the investigation header. Clinical cases may not have laboratory accession numbers, and the investigation ID provides quick identification of the associated investigation in the absence of an accession number.
Case Name or Initials; Case PHIN	*	The name of the case or initials, and the case PHIN are additional identifiers listed on the header on the second and subsequent pages of the form to meet documentation standards for client identification. This ensures all pages can be identified and associated to the correct client should they become separated.
Form Updates		If the form is re-submitted, please indicate that this is an updated form, and the applicable date of update. Please CIRCLE in pen/pencil any updates, and initial beside the change. Note that highlighted areas cannot

		be seen after fax transmission, so please do not use this method. If filling out electronically, please note changes on the fax cover page.
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SECTION I - CASE IDENTIFICATION

Data Element	Critical Field	Instructions on Use
Boxes 12-16 Personal Contact Details	*	Demographic information, especially address (street/mailling address, city, province, postal code) and phone number must be updated in PHIMS at the time of first interview. This information is critical to facilitate case follow-up and the assignment of the case to the correct region for provincial reporting. Please also note on the client's PHIMS profile whether an interpreter is required for follow-up calls.
Boxes 17-18 Racial/Ethnic Identity	*	Public Health Nurses are required to ask clients about racial/ethnic identity as part of the public health follow-up of Monkeypox cases in Manitoba. The client is asked to answer the question. Responding is voluntary – and the client is encouraged to respond. If the client does not wish to answer the question, it should be documented as “Declined” on the Monkeypox Case Investigation Form. PHIMS data entry: <ul style="list-style-type: none"> • Select the appropriate response in the “Racial/Ethnic Identity”* field within Client Demographics • If the client responds Other: <ul style="list-style-type: none"> • Enter “Other” in the “Racial/Ethnic Identity” field • Provide details in the “Other Racial/Ethnic Identity” field • If the client has multiple responses: <ul style="list-style-type: none"> • Enter “Other” in the “Racial/Ethnic Identity” field • Provide details in the “Other Racial/Ethnic Identity” field <p>A script to guide the collection of Racial, Ethnic and Indigenous Identifiers can be found here.</p> <p>A training video on the collection of Racial, Ethnic and Indigenous Identifiers can be found at https://www.youtube.com/watch?v=CqvH7NyARSc&feature=youtu.be</p>
Boxes 19-20	*	Public Health Nurses are required to ask clients about Indigenous Identity and First Nation Status (as applicable) as part of the public health follow-up of Monkeypox in Manitoba.

Indigenous Identity Declaration First Nations Status		<p>The client is asked to answer the question. Responding is voluntary – and the client is encouraged to respond. If the client does not wish to answer the question it should be documented as “Declined” on the Monkeypox Investigation form.</p> <p>PHIMS data entry:</p> <ul style="list-style-type: none"> • Select the appropriate response in the “Indigenous Identity” and “First Nations Status” fields within Indigenous Information. • If multiple responses are applicable, enter these in full features. • The option of “declined” cannot be captured in PHIMS. The field should be left blank. • If using full features, “Effective From” date should be date of interview or form completion. <p>More information on the collection of Racial, Ethnic and Indigenous Identifiers can be found here.</p>
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SECTION II - INVESTIGATION INFORMATION

Data Element	Critical Field	Instructions on Use						
Box 22 Investigation Disposition	*	<p>The Investigation Disposition field is used to mark the progression of an investigation, including referring/redirecting within or across the regions and provinces.</p> <p>Investigation Dispositions can be post-dated, and the Investigation History hyperlink on the top right of Investigation Information allows users to view the history of disposition changes.</p> <p>Dispositions and definitions in the Monkeypox form (note that other dispositions may apply based on the status of the investigation – e.g., follow-up in progress).</p> <table border="1" data-bbox="602 1495 1520 1831"> <thead> <tr> <th data-bbox="602 1495 997 1549">Investigation Disposition</th> <th data-bbox="997 1495 1520 1549">Definition</th> </tr> </thead> <tbody> <tr> <td data-bbox="602 1549 997 1675">Follow up complete</td> <td data-bbox="997 1549 1520 1675">Investigation completed as per provincial protocol; this disposition is to be assigned when the investigation is closed.</td> </tr> <tr> <td data-bbox="602 1675 997 1831">Pending</td> <td data-bbox="997 1675 1520 1831">Default disposition assigned by MHSU when the investigation is created. Follow up has not yet started, or additional work is required by the region.</td> </tr> </tbody> </table>	Investigation Disposition	Definition	Follow up complete	Investigation completed as per provincial protocol; this disposition is to be assigned when the investigation is closed.	Pending	Default disposition assigned by MHSU when the investigation is created. Follow up has not yet started, or additional work is required by the region.
Investigation Disposition	Definition							
Follow up complete	Investigation completed as per provincial protocol; this disposition is to be assigned when the investigation is closed.							
Pending	Default disposition assigned by MHSU when the investigation is created. Follow up has not yet started, or additional work is required by the region.							

		Unable to complete	Investigation initiated but could not be completed due to inability to locate client or information required to complete investigation.
Boxes 25-26 Sensitive Environment/ Occupation And Environment/ Occupation Details	*	<p>Indicate if the case has any of the listed occupations/roles or has been present in any of the listed environments during the period of investigation, such as institutions or child care facilities.</p> <p>Specify details for all cases.</p> <p>In the details text box, collect the occupation and location details of all Monkeypox cases and record the occupation under “Sensitive Environment/Occupation Details” in the Investigation Information section <i>even if it is not considered to be a sensitive occupation.</i></p> <p>For examples of minimum information that needs to be captured for specific populations, please see Appendix A.</p> <p>PHIMS data entry:</p> <ul style="list-style-type: none"> Investigation > Investigation Details > Investigation Information > Sensitive Environment/Occupation. PHAC: document if client is a health care worker; enter type of health care worker and PPE use into Sensitive Environment/Occupation Details PHAC: document if client is NOT a health care worker in Sensitive Environment/Occupation Details Insert double semicolons (;;) between each new detail added 	

SECTION III - INFECTION INFORMATION

Data Element	Critical Field	Instructions on Use
Box 27-28 Disease Case Classification	*	<p>Document the current classification of the investigation – i.e., whether the case definition is suspect, probable, lab confirmed or not a case.</p> <p>Refer to Communicable Disease Management Protocol Monkeypox (Orthopoxvirus) Infection for information on case definitions.</p>

SECTION IV – SIGNS AND SYMPTOMS

Data Element	Critical Field	Instructions on Use
Box 30 Symptom onset	*	Select if case is symptomatic or asymptomatic. Only one option should be selected. If symptomatic, the onset date of first symptom should be completed . If asymptomatic, enter the test date . PHIMS data entry: <ul style="list-style-type: none"> • Within Signs and Symptoms, select Sign or Symptom = “Symptomatic” • Set Response = Yes • Check off “Onset Symptom” • Onset Date = Enter date of onset for first symptom (or test date if asymptomatic)
Box 30 Signs and Symptoms	*	If symptomatic, select relevant symptoms or complications from the list. Other symptoms or complications not on the list should be recorded as well under “other”. PHIMS data entry: <ul style="list-style-type: none"> • All signs and symptoms on the form are available PHIMS. • Navigate to “Signs & Symptoms” and see if desired response is in the list. • If sign or symptom is not found in drop down list, use Sign or Symptom = Other • Other Sign or Symptom = specify other symptom (free-text) Please note for surveillance reporting purposes, timeliness is prioritized over a full clinical picture which may require additional inquiry.

SECTION V – RISK FACTOR INFORMATION

Complete risk factors that are applicable to the disease under investigation. Note that “Additional Information” is a required field when the Response=Yes, and PHIMS will not allow the user to save until something is entered. Provide relevant details here. If no details exist, use “N/A”.

Data Element	Critical Field	Instructions on Use
Box 32 Contact with anyone presenting with symptoms or with a known suspect, probable or confirmed case of Monkeypox, or	*	Indicate if the person is a contact of a new or previously diagnosed case of Monkeypox. Refer to the Communicable Disease Management Protocol Monkeypox (Orthopoxvirus) Infection for information on definitions. <ul style="list-style-type: none"> • Include details under “Additional Information”. • More details can be provided in Section VI Acquisition Exposures.

with contaminated material		Specify location, mechanism of travel and dates from and to (YYYY-MM-DD)
Box 33-35 Exposure setting: outside Canada or outside province	*	Indicate if the person has travelled within the province, outside of Manitoba, or outside of Canada, in the five to 21 days prior to symptom onset (includes any day trips, travel and/or overnight visits). More specific travel information should be provided in Section VI – Acquisition Exposure.
Box 36 Social exposure setting/location	*	Indicate if the client reports lifestyle-based exposure or contact (e.g., saunas, bathhouses, gathering etc). PHIMS data entry: <ul style="list-style-type: none"> Set risk factor to “Yes” In Additional Information, specify
Box 38 Pregnant or if postpartum <6 weeks	*	Indicate if the person is pregnant at the time of diagnosis. <ul style="list-style-type: none"> Specify EDC (YYYY-MM-DD)
Box 40 Underlying illness	*	Indicate if the person has any underlying illnesses (e.g., by medication, by disease such as cancer, diabetes, immunocompromised condition, untreated HIV etc.). PHIMS data entry: <ul style="list-style-type: none"> Set risk factor to “Yes” In Additional Information, specify
Box 41 Born to infected mother	*	Indicate if the person is born to an infected mother (e.g., infant exposed to symptomatic mother during pregnancy or during/after birth). PHIMS data entry: <ul style="list-style-type: none"> Set risk factor to “Yes” In Additional Information, specify
Box 42 Previously diagnosed with HIV	*	Indicate if the person is previously diagnosed with HIV infection PHIMS data entry: <ul style="list-style-type: none"> Set risk factor to “Yes”
Box 43 Recent history of multiple or anonymous sexual partners	*	Indicate if the client reports recent history of multiple or anonymous sexual partners in the 5-21 days before onset of illness). PHIMS data entry: <ul style="list-style-type: none"> Set risk factor to “Yes” In Additional Information, specify

SECTION VI – ACQUISITION EXPOSURE (THE POTENTIAL SOURCE OF THE INFECTION)

Indicate the settings where the case may have likely acquired the illness during the incubation period, based on likely exposure to other cases or higher risk environments for exposures in the incubation period. Indicate if unknown. The exposure start date is required, based on the earliest incubation date and when the exposure to this setting occurred.

Data Element	Critical Field	Instructions on Use
<p>Box 45-49</p> <ul style="list-style-type: none"> • Exposure Setting Type • Exposure Setting Details • Exposure Start Date • Exposure End Date • Address • Suspect Mode of Transmission 	*	<p>Refer to Appendix B for the list of exposure setting types and exposure settings. Pertinent exposures are highlighted in yellow.</p> <p>Enter each setting as a separate acquisition event. Address is required on all exposures (AE and TE) where applicable to a defined setting; at a minimum, record street name (and number if available), city and province. Other address details can be inputted if available.</p> <p>PHIMS data entry for travel-related exposures:</p> <ul style="list-style-type: none"> • Exposure name = Transportation Type (Cruise, Plane, Conference/Event, Accommodation) • e.g. “Plane” • Acquisition start date = exposure start date • Acquisition end date = exposure end date • Location Name = Remaining information, as per form, dividing field with semi-colon (;) • e.g., “Air Canada AC492; Toronto; Winnipeg; 12D, 2020-03-10; 2020-03-10; Sat next to sick person” • Setting Type = Travel • Setting = Choose applicable option <p>In the case of a travel related exposure, use table on page 6 of the form to provide details on travel. Please fill in all fields, as information will be used for further contact tracing purposes. Regions are responsible for ensuring information is verified (i.e., flight numbers, routes). This information will need to be documented in PHIMS in the relevant areas within AE and TE areas.</p>

SECTION VIII – IMMUNIZATION HISTORY INTERPRETATION

Data Element	Critical Field	Instructions on Use
Box 57 Immunization History Interpretation	*	Immunization History Interpretation (at time of investigation) Select the interpretation of disease immunity reported by client at time of exposure: Fully immunized = client reports receiving smallpox immunization. Partially immunized Unimmunized = client has not received small pox vaccine. Unknown = smallpox immunization status of the client is unknown. PHIMS data entry: <ul style="list-style-type: none"> • Immunization History Interpretation is available under Subject. • Enter the Interpretation Date as the date of interview.

SECTION IX – OUTCOMES AT TIME OF INVESTIGATION

Data Element	Critical Field	Instructions on Use
Box 63-69 Investigation Outcomes	*	Investigation Outcome Enter fatal outcomes here and provide the date of death. The client will be marked as “deceased inactive” when the outcome is saved. Regional users are encouraged to enter a fatality in the Investigation Outcomes section as soon as possible. Manitoba Health will view the fatal outcome as part of the case review and enter it if not already recorded. PHIMS data entry: <ul style="list-style-type: none"> • The Investigation Outcomes is available in the full features of Investigation, under Outcomes. • For Outcome, use “Fatal” only. • Provide the outcome date as the date of death.

SECTION X – TRANSMISSION EXPOSURES - SETTINGS (THE POTENTIAL SPREAD OF THE INFECTION TO CONTACTS)

List all exposure settings where the case may have transmitted the infection to other contacts during the communicability period, and list the contacts by exposure setting. These pages of the form can be copied for additional settings. For example, if contacts were exposed in the home, and at a

common gathering (private function), two transmission settings should be identified, with the total number of contacts listed for each setting.

Refer to [Communicable Disease Management Protocol Monkeypox \(Orthopoxvirus\) Infection](#) for the definition of the period of communicability.

Data entry is the same as for Section VI – Acquisition Events.

SECTION XII – CONTACTS

For PHIMS users, out-of-region contacts may be directed through PHIMS – region to region. For out of province contacts, PHIMS users may redirect to the MHSU.

Use the [MHSU-0003B Monkeypox Contact Investigation Form](#) for:

- Out-of-region contacts (within MB): refer to appropriate region
- In-region contracts: responsible region should complete and document within PHIMS; if non-PHIMS region, complete form and submit to MHSU
- Out-of-province contacts: refer to MHSU
- Case unknown (i.e., contact is not linked to a known case, but perhaps an exposure setting such as a public venue or gathering)

Data Element	Critical Field	Instructions on Use
Box 83 Setting #		<p>Each contact should be associated with an exposure setting number, as defined in Section IX – Transmission Events.</p> <p>PHIMS data entry:</p> <ul style="list-style-type: none"> • Within each transmission event, link associated contacts to case investigation. • Click hyperlink into transmission event, and go to “Known Contact Search” to add each individual.
Box 84 Contact personal information		<p>This information must be completed after the client has been contacted, educated and contact details are confirmed. The integrity and accuracy of this information is important so that clients can be found in PHIMS and symptom monitoring is able to occur.</p> <p>Ensure phone contact information is available so the user can reach the client. If they are staying at an alternate address during isolation, include this address.</p> <p>PHIMS data entry:</p> <ul style="list-style-type: none"> • Phone numbers can be entered in Client Demographics • Temporary phone numbers to be used during isolation only can be added as “Temporary” with an Effective To date as the last day of isolation

		<ul style="list-style-type: none"> For “Address during isolation”, add this as a Temporary address. The effective dates should be the same as the isolation start and end dates.
Box 85-86 Earliest and most recent contact dates		Document exposure start and end dates.
Box 87 Interventions/Notes		<p>Isolation*</p> <p>Provide details of isolation intervention. Include intervention start date and end dates (or leave end dates until investigation is finished). This is crucial so users know when to end symptom monitoring daily calls.</p> <p>Select the type of isolation:</p> <ul style="list-style-type: none"> Facility isolation = isolation in hospital, long-term care facility or other facility setting Home isolation = isolation at place of residence Self-isolation (other location) = isolation at alternate location (e.g., hotel) <p>For PHIMS users, active daily monitoring follow-up events can be documented for isolation. Once the intervention type is selected, users can add follow-up events. For each event, users can select the outcome – e.g., no symptoms, symptoms – and keep a record of each event.</p> <p>Disposition</p> <p>This indicates that the region will continue to do daily monitoring of the client. If the client has already completed their intervention, and the region is providing information for reporting purposes, select “follow up complete”. The client will be documented in PHIMS but their investigation will be closed immediately.</p> <p>PHIMS data entry:</p> <ul style="list-style-type: none"> User must go to Contact Investigation of newly linked contacts. The Disposition is found in “Investigation Information”. It should be documented in the overall disposition of the investigation, not the disposition of the Isolation intervention. The Intervention should be added under “Treatment and Intervention”. <p>* For the purposes of PHIMS standardization and to match commonly used language in this response, the Isolation intervention is used. However, this is not true “isolation” as the person is not sick.</p>

Appendix A. Sensitive Environment/Occupation

PHIMS Section	PHIMS Field	Minimum Data Elements
Investigation > Investigation > Details > Investigation Information	Sensitive Environment/ Occupation	Choose the most applicable option, being as specific as possible.
	Sensitive Environment/ Occupation Details	<ul style="list-style-type: none"> • Connection to the sensitive environment/occupation (e.g., job title or student/patient/resident/inmate/attendee, etc.) • Company name, facility name, school name, etc. • Location (address or approximate address) • [Did/Did not] attend during period of susceptibility and/or communicability • Last attended

Sensitive Environment/Occupation Examples

Scenario	Sensitive Environment/ Occupation	Sensitive Environment/Occupation Details
Works with animals	Animal handler (abattoir, veterinarian, farmer, etc.)	Works as veterinarian at Fakename Veterinary Hospital (123 Makebelieve St, Storybook, MB). Client [did/did not] work during period of communicability. Last worked November 12, 2020.
Attends daycare Works or volunteers at a daycare	Child care – work/ volunteer/attendee	<p>Attends Fakename Daycare (123 Makebelieve St, Storybook, MB). Client [did/did not] attend during period of communicability. Last attended January 8, 2021.</p> <p>Works at Fakename Daycare (123 Makebelieve St, Storybook, MB) as Director. Client [did/did not] work during period of communicability. Last worked January 8, 2021.</p>

Scenario	Sensitive Environment/ Occupation	Sensitive Environment/Occupation Details
Inmate/youth resident of a provincial or federal correctional facility	Correctional centre – resident	Inmate at Fakename Correctional Centre (123 Makebelieve St, Storybook, MB). Lives in Unit 2. Works in Kitchen. Worked during POC.
Works as a correctional officer, manager, instructor, elder, etc. at a provincial or federal correctional facility	Correctional centre – work/volunteer	Correctional Officer at Fakename Correctional Centre (123 Makebelieve St, Storybook, MB). Works in Kitchen. Client [did/did not] work during period of communicability. Last worked January 8, 2021.
K-12 students Post-secondary students	Education (student)	Grade 2 student at Ecole Fakename (123 Makebelieve St, Storybook, MB). Client [did/did not] attend during period of communicability. Last attended November 12, 2020. Note: for all school-aged children, please also indicate in the sensitive environment/ occupation details if the child did <u>not</u> attend any school (e.g. home-schooled).
K-12/post-secondary staff and volunteers including teachers, principals, faculty, school bus drivers, education assistants, custodians, etc.	Education (work/volunteer)	Grade 2 teacher at Fakename Elementary (123 Makebelieve St, Storybook, MB). Client [did/did not] work during period of communicability. Last worked November 12, 2020.
Works in a bar, restaurant, fast food establishment, food truck, bakery, deli, etc.	Food handler – work/volunteer	Waitress at Fakename Restaurant (123 Makebelieve St, Storybook, MB). Client [did/did not] work during infectious period. Last worked November 12, 2020.
Patient in a hospital	Health care facility – resident/patient	Patient at Fakename General Hospital, unit 3X4-7 (123 Makebelieve St, Storybook, MB). Was admitted prior to infection. Note: specifying the hospital unit is very important for linking cases to outbreaks.
Works as a health care aide, nurse, doctor,	Health care facility – work/volunteer	Nurse at Fakename General Hospital, unit XH4 (123 Makebelieve St, Storybook, MB).

Scenario	Sensitive Environment/ Occupation	Sensitive Environment/Occupation Details
housekeeper, dietary aide, security, volunteer, etc. in a hospital.		Client [did/did not] work during period of communicability. Last worked January 14, 2021. Note: specifying the hospital unit is very important for linking cases to outbreaks.
Works in a laboratory where specimens are processed, e.g. Cadham Provincial Laboratory, National Microbiology Lab.	Laboratory worker	Laboratory technician, Fakename Laboratory (123 Makebelieve St, Storybook, MB). Client [did/did not] work during period of communicability. Last day worked January 14, 2021.
<p>Assisted Living Facilities</p> <p>Resident of an assisted living facility.</p> <p>Work or volunteer at an assisted living facility.</p> <p>Group Homes</p> <p>Resident of a group home.</p> <p>Work or volunteer at a group home.</p> <p>Other Workplaces</p> <p>Work in construction.</p> <p>Work at a factory.</p>	Other congregate setting – work/volunteer/ resident/attendee	<p>Assisted Living Facilities</p> <p>Resident at Fakename Assisted Living Facility.</p> <p>Health care aide at Fakename Manor Assisted Living Facility (123 Makebelieve St, Storybook, MB). Client [did/did not] work during period of communicability. Last worked on January 8, 2021.</p> <p>Group Homes</p> <p>Resident of Fakename Group Home (123 Makebelieve St, Storybook, MB).</p> <p>Direct Support Worker at Fakename Group Home (123 Makebelieve St, Storybook, MB). Client [did/did not] work during period of communicability. Last worked November 12, 2020.</p> <p>Other</p> <p>Works on de-boning line at Fakename (123 Makebelieve St, Storybook, MB). Client [did/did not] work during period of</p>

Scenario	Sensitive Environment/ Occupation	Sensitive Environment/Occupation Details
<p>Work at a mine/mill/hydro project.</p> <p>Work in an office environment.</p> <p>Work in a retail store (e.g., grocery store, clothing store, furniture store, pharmacy).</p>		<p>communicability. Last worked November 12, 2020.</p>
Resident of a PCH/LTCF	Personal care home – resident	Resident at Fakename Personal Care Home (123 Makebelieve St, Storybook, MB)
Works as a health care aide, nurse, doctor, housekeeper, dietary aide, security, volunteer, etc. at a PCH/LTCF.	Personal care home – work/volunteer	Health care aide at Fakename Personal Care Home (123 Makebelieve St, Storybook, MB). Client [did/did not] work during period of communicability. Last worked on January 8, 2021.
Use for all individuals experiencing homelessness, regardless of whether they report visiting a shelter.	Shelter – resident	Homeless in downtown area. Stayed at Fakename Shelter (123 Makebelieve St, Storybook, MB). Last attended Jan 8, 2021.
<p>Works or volunteers in a shelter.</p> <p>Works with people experiencing homelessness outside of a shelter environment.</p>	Shelter – work/volunteer	<p>Works at Fakename Shelter (123 Makebelieve St, Storybook, MB).</p> <p>[Does/Does not] have contact with clients.</p> <p>Client [did/did not] work during period of communicability. Last worked Jan 8, 2021.</p>

Appendix B. Exposure Setting Type and Exposure Settingⁱ

Exposure Setting Type	Exposure Setting	Example
Animal/Agricultural locations	<ul style="list-style-type: none"> • Animal Care and Supply (e.g., kenneling and grooming organizations, feed supply, dog day cares, animal rescue/shelters) • Animal/Food processing plant • Farm • Petting zoo • Temporary foreign workers • Veterinary clinic • Other 	<p><i>Exposure Location Name:</i> FakeName Hatchery; works in deboning; medical mask and eyeshields worn</p> <p><i>Exposure Setting Type:</i> Animal/Agricultural locations</p> <p><i>Exposure Setting:</i> Animal/Food processing plant</p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>
Health Care Services Setting	<ul style="list-style-type: none"> • Laboratory • Community health care setting/clinic (e.g., doctor's office, primary care/community clinics, access centres, nursing stations, testing sites, addiction/detox clinics) • Acute care setting (e.g., hospital emergency department, inpatient stay, urgent care centre) • Long term care/personal care home • Support programs for persons living with disabilities/day programs (e.g., in home services, day programs) • Allied health care services (e.g., dental office, chiropractor office, naturopathy, physiotherapy, occupational therapy, massage therapy, speech language pathology etc.) • Public health inspection/environmental health officer services • Home care services (e.g., laundry, cleaning, bathing) • Public Health Nursing services 	<p><i>Exposure Location Name:</i> A New Day Support Services Day Program; attends M-F 0800-1600 hrs</p> <p><i>Exposure Setting Type:</i> Health Care Services Setting</p> <p><i>Exposure Setting:</i> Community health care setting/clinic</p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>

Exposure Setting Type	Exposure Setting	Example
	<ul style="list-style-type: none"> • Other (e.g., footcare services, wellness checks for elders, immunization clinic at the grocery story pharmacy) 	
<p>Congregate/communal living settings [not including health care]</p>	<ul style="list-style-type: none"> • Assisted living/senior’s independent housing/retirement residence • Correctional facility provincial • Correctional facility federal • Dormitory • Group home • Military base • Rooming house/residential hotel • Shelter • Short term residential facility (includes alternative isolation accommodations, fire and flood evacuees, addiction/detox clinic stays) • Communal living (e.g., colony) • Other 	<p><i>Exposure Location Name:</i> Addictions Support Services; staff member at Women’s In-House Program</p> <p><i>Exposure Setting Type:</i> Congregate/communal living settings</p> <p><i>Exposure Setting:</i> Short term residential facility</p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>
<p>Emergency Services</p>	<ul style="list-style-type: none"> • Emergency Medical Service • Fire/wildfire services • Police services • Security services • Military services • Other (volunteer, Red Cross) 	<p><i>Exposure Location Name:</i> Apprehension by Bacon Ridge Police Services</p> <p><i>Exposure Setting Type:</i> Emergency Services</p> <p><i>Exposure Setting:</i> Police Services</p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p> <p>*****</p> <p><i>Exposure Location Name:</i> Police officer for Bacon Ridge Police Services; patrol of Green Bay neighborhood</p>

Exposure Type	Setting	Exposure Setting	Example
			<p><i>Exposure Setting Type: Emergency Services</i></p> <p><i>Exposure Setting: Police Services</i></p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>
Food service establishments	<ul style="list-style-type: none"> • Bar/tavern • Cafeteria • Farm – direct to consumer (farmer’s market, farm to table) • Grocery/retail store • Mobile canteen/food truck • Pastry/bakery shop • Restaurant • Vending Machine • Other 	<p><i>Exposure Location Name: The Neighborhood Eatery; attended with friends, masks worn when not at table</i></p> <p><i>Exposure Setting Type: Food Service Establishments</i></p> <p><i>Exposure Setting: Restaurant</i></p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>	
Household exposure	<div style="border: 2px solid red; padding: 5px; width: fit-content; margin: 0 auto;"> <p>PLEASE USE THIS OPTION IF EXPOSURE IS TO/FROM CLIENT’S <u>HOUSEHOLD</u></p> </div>		
Events Private/Public	<ul style="list-style-type: none"> • Conference • Funeral • Weddings • Banquets/Socials • Concerts • Festivals/Fairs • Religious (e.g., baptism, bar mitzvah etc) • Sacred/spiritual events 	<p><i>Exposure Location Name: Funeral for friend @ Main Street Funeral Home & Cemetery</i></p> <p><i>Exposure Setting Type: Events – Private/Public</i></p> <p><i>Exposure Setting: Funeral</i></p>	

Exposure Setting Type	Exposure Setting	Example
	<ul style="list-style-type: none"> • Other (e.g., family reunion, block party, private functions such as birthdays and/or holiday get-togethers) 	<p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>
Public Facilities and Workplaces	<ul style="list-style-type: none"> • Bathhouse • College/university/vocational (not including dormitory) (e.g., UM, RRC, film school, aestheticians) • Convention centre • Daycare/day home • Hotel/Motel • Nightclub • Place of worship • Preschool • School – K to 12 • Shopping centre/retail • Spa • Truck stop/gas station • Vacation resort • Personal services (Hair salon/Barber, Nail Salon, Tattoo Parlour) • Pharmacy • *Public Utility Service Workers • *Postal Workers and Local Couriers • Support centres for persons living with disabilities • Workplace— DO NOT USE • Office setting/business centre • Industry/manufacturing (mining) • Construction/renovation/contractors • Trucking, courier, and freight industry • Other workplace, not otherwise classified • Other public facilities (not otherwise classified) 	<p><i>Exposure Location Name: Rainbow and Unicorn Day Nursery Green Bay; staff member in the infant A room</i></p> <p><i>Exposure Setting Type: Public Facilities and Workplaces</i></p> <p><i>Exposure Setting: Daycare/Day Home</i></p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>
Recreational Facilities setting/location	<ul style="list-style-type: none"> • Campground • Community centre/arena • Cultural centre • Fitness centre • Forested area 	<p><i>Exposure Location Name: ABC Fitness Centre; staff member; works front desk; cloth mask worn</i></p>

Exposure Type	Setting	Exposure Setting	Example
	<ul style="list-style-type: none"> • Hot tub • Other • Park (e.g., municipal, provincial, national) • River/lake/ocean • Water park (e.g., splash pad, wading pool, swimming pool, water park) • Museum/gallery/theatre/performance arts • Festival • Amusement Park (indoor or outdoor) • Casino • Day Camps/Overnight Camps • Recreational sporting Event/Tournament (non-ticketed) • Professional sporting event (ticketed) 	<p><i>Exposure Setting Type: Recreational Facilities setting/location</i></p> <p><i>Exposure Setting: Fitness Centre</i></p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>	
Sexual exposure setting/location	<ul style="list-style-type: none"> • Bar/tavern • Bathhouse • Correctional facility - provincial • Correctional facility - federal • Friends/family • Hotel/motel • House party • Other • Other communities in Manitoba • Other Province in Canada • Outdoors • Outside Canada • Shopping centre/retail • Work/school • Internet app - Grindr (specify location of first physical meeting) • Internet app - Facebook (specify location of first physical meeting) • Internet- other apps/sites (specify name and location of first physical meeting) 		
Travel	<ul style="list-style-type: none"> • None • Outside of Canada/United States • Outside of home Province/Territory but Within Canada • Within home Province/Territory • Within United States 		

Exposure Setting Type	Exposure Setting	Example
Type of Community Contact	<ul style="list-style-type: none"> • Casual • Close non-household • House party • Household – DO NOT USE • Other • Regular Partner (for STBBI) • School - DO NOT USE • Social network • Visiting friends and relatives • Widespread • Social gathering • Workplace DO NOT USE 	<div style="border: 2px solid red; padding: 5px; width: fit-content; margin: 10px auto;"> <p style="text-align: center; margin: 0;">PLEASE USE THIS OPTION IF EXPOSURE IS VISITING FRIENDS & NON-HOUSEHOLD RELATIVES IN ANY PRIVATE RESIDENCE</p> </div> <p><i>Exposure Location Name:</i> Grandparents visiting from Calgary</p> <p><i>Exposure Setting Type:</i> Type of Community Contact</p> <p><i>Exposure Setting:</i> Visiting Friends and Relatives</p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>
Transportation	<ul style="list-style-type: none"> • Carpool • Bus (transit bus, school bus, charter bus etc) • Taxi/ride-share service • Plane • Train/Rail 	<p><i>Exposure Location Name:</i> Work carpool from Bacon Ridge to Applecrest with 3 co-workers</p> <p><i>Exposure Setting Type:</i> Transportation</p> <p><i>Exposure Setting:</i> Carpool</p> <p><i>Please note that address is required on all exposures (AE and TE) where applicable to a defined setting - at minimum, record Street name (and number if available), City, and Province. Other address details can be documented where available.</i></p>

¹ Code table used across all investigations (e.g., CD, STBBI, COVID)