

# Your documentation efforts impact public health

Ensuring data quality is vital for making informed decisions and responding to public health concerns in a timely manner. Public health surveillance efforts are **driven** by provider documentation. This flyer explains what syndromic surveillance is, how public health uses syndromic surveillance data, and how providers can collaborate with public health to improve data quality and intervention actions.

## Overview of Syndromic Surveillance

Syndromic Surveillance (SyS) is a nationwide effort in which Emergency Department and clinic data are monitored in near-real time to detect outbreaks and emerging health threats earlier than is possible through traditional EMR data analysis methods.

## What are the benefits?



**Ability to search the chief complaint and triage notes.** In addition to using diagnosis codes, epidemiologists at the state and ANTHC use text fields to search for real-time issues.

**Near real-time monitoring.** Initial visit data are available in the SyS system within ~24hrs of when coders enter the data in the EMR, with testing and post-diagnostic codes updated as they are reported.

## Examples of early detection using SyS

### EVALIs (E-cigarette & vaping related injuries)

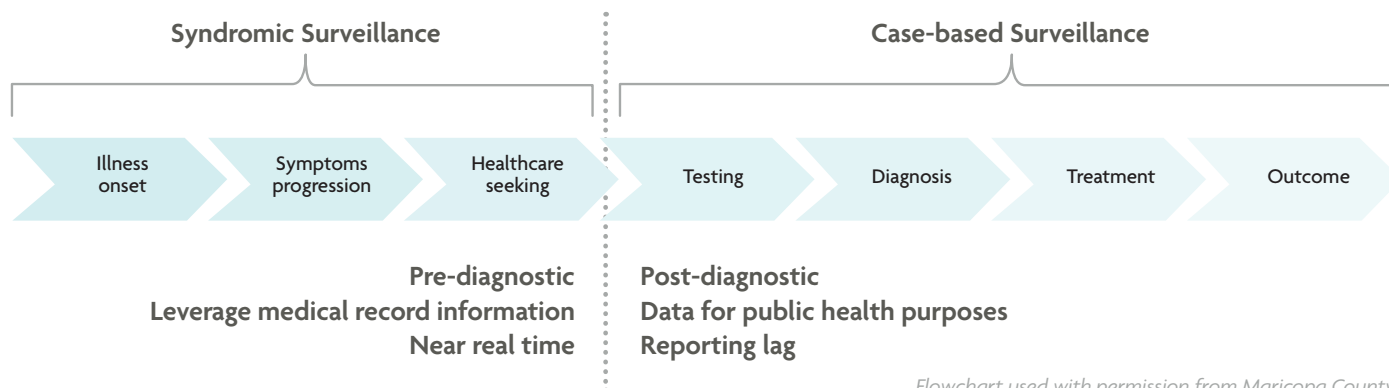
A cluster of severe lung injuries was initially detected in Wisconsin using syndromic surveillance. A query was developed that searched for words related to vaping, and combined this with ICD-10-CM codes related to lung injury, allowing public health to determine the scope of the outbreak. The link to smoking/vaping, noted in the example chief complaint field below, led to the discovery of EVALIs that would otherwise have gone unrecognized.

### Suicide-related ED visits

A study to evaluate the usefulness of SyS to monitor suicide-related visits to ED discovered that 37% were found solely in the chief complaint field. This illustrates the importance of the text fields such as the chief complaint to evaluate the state of public health concerns such as suicide.

#### EXAMPLE DATA

Date and Time of Visit	08May211650
Facility Name	Sample Hospital Name
Chief Complaint	BIBA pt c/o headache, fever, SOB, chest pain on inspiration, smoker/vape use
Category (Syndrome)	ILI; Respiratory; Other [EVALIs]
Discharge Diagnosis (ICD10)	J18.9 (Pneumonia, unspecified); F1.210 (Nicotine dependence)
Medical Record Number	123456
Age, DOB, Sex, Ethnicity	Female, 27, 1993-10-16, AN/AI
Initial Pulse Oximetry	94%
Discharge Disposition	01 (Discharged to Home/Self Care)



Flowchart used with permission from Maricopa County

ANMC participates in the State of Alaska's Syndromic Surveillance Program, which is part of the National Syndromic Surveillance Program. The Alaska Native Epidemiology Center helps Tribal health partners in Alaska use syndromic surveillance through customized reports, training, and technical assistance.