**Employee Name: Job Title:**

**Program: Communicable Disease – STI Start date in program:**

**Supervisor:** Wendy Zieker

|  |  |  |
| --- | --- | --- |
| **Communicable Disease Investigation – Syphilis**  |  | Employee initial/date with PHN/EPI |
| **STI Disease Investigation Basics** |  |  |
|  | Staff discuss difference between Syphilis and GC investigation  |  |  |
|  |  | Resources for consultation – OHA, Health Officer, Supervisor, |  |  |
|  |  | HE2 role in Syphilis investigations  |  |  |
|  |  | PHN role in Syphilis monitoring, and oversight of HE2 |  |  |
|  |  | PHN role in syphilis investigation |  |  |
|  |  | Use of ORPHEUS to manage cases |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Self-Study | Employee initials/date |  |
|  | OHA Syphilis Investigative Guidelines – obtain online and review |  |  |
|  | Review the fields in ORPHEUS to understand the information needed from the investigation |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Syphilis Skills Training / Competencies** | Date #1  | Preceptor Initials | Date#2 | Preceptor Initials  |
|  |  |  |  |  |
| Observe PHN perform two investigations of Syphilis cases , including follow-up with provider and documentation |  |  |  |  |
| Follow-up with provider and phone case investigation for **two cases** under PHN observation |  |  |  |  |
| Document two Syphilis case investigations in ORPHEUS and have PHN review |  |  |  |  |
| Have supervisor review two examples of documentation |  |  |  |  |
| Check with supervisor to determine if more training is needed |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Completed**

Supervisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_