

# West Virginia Electronic Disease Surveillance System (WVEDSS) Confidentiality and Use Agreement

The West Virginia Department of Health and Human Resources, Office of Epidemiology and Prevention Services has developed a statewide electronic disease surveillance system to be used for the reporting of certain diseases and conditions, unusual health events, and clusters or outbreaks of disease in accordance with the West Virginia Reportable Diseases, Events, and Conditions Legislative Rule, 64CSR7. Patient specific information is only available to users at authorized participating facilities and to West Virginia Office of Epidemiology and Prevention Services staff.

As a condition of being granted access to the West Virginia Electronic Disease Surveillance System (WVEDSS), the undersigned agrees to do the following:

- 1) Conduct disease reporting activities according to the guidelines in Legislative Rule 64CSR7.
- 2) Enter accurate and timely data in accordance with 64CSR7 categories for required reporting.
- 3) Only use WVEDSS data in the course of fulfilling job duties and not share data with unauthorized users.
- 4) Safeguard the assigned user ID and/or password against unauthorized use.

User's Printed Name \_\_\_\_\_

Facility \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

County: \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

E-mail Address \_\_\_\_\_

System Role: (circle one)      LHD Data Entry      LHD Epi      Regional Epi      State Epi

Disease Groups: (circle all that are needed)      All    Enteric    Zoonotic    VPD    IBD    TB    Hep C    STD    HIV/AIDS    MDRO

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please mail or fax this completed form to:

WVDHHR/OEPS

WVEDSS Project

350 Capitol Street, Room 125, Charleston, WV 25301-3715

Fax (304)558-1899 or (877)408-8927

Questions regarding this form should be directed to the WVEDSS Help Desk at (877)408-8930.