

INFECTIOUS DISEASE NOTIFICATION via CDLENS

Surveillance and Response Branch

SCOPE

1. Infectious Diseases to notify for

2. Login

- i) CDLENS Login
- ii) SingPass Login
- iii) Welcome screen for superuser & ordinary user
- 3. Submit New Form A/B
- 4. Update the recovery date and doctor's information in Form A/B
- 5. Print Form A/B

6. Users Account Management

- i) Create education institution ordinary users
- ii) Update Education Institution
- iii) Inactivate the education institution ordinary users
- iv) Reset password for education institution ordinary users
- v) Change password for user's own account
- 7. Statistics displayed on welcome page

INFECTIOUS DISEASES TO NOTIFY FOR

Infectious diseases to be notified if there are TWO or more cases:

• Hand, Foot and Mouth Disease (HFMD)

Infectious diseases to be notified if there are ONE or more cases:

- Mumps
- Measles
- Rubella
- Diptheria
- Poliomyelities
- Meningitis
- Tuberculosis

For outbreaks involving an unusually high number of children/staff with similar symptoms such as vomiting, diarrhoea or fever, please contact MOH at our 24 hour duty phone at 98269294.

SUPER USERS & ORDINARY USERS

- Each educational institution shall have one super user and one alternate super user (same rights as super user).
- A super user is typically the principal/operator/supervisor of the centre while an ordinary user could be an administrative officer/teacher.
- The super user and alternate super user will be managed (create/update/delete) by MOH officer. Ordinary users will be managed by the super user of the institution.
- Each educational institution can have a maximum of 3 active ordinary users at any point of time. If an ordinary user leaves the institution, super user can choose to inactivate that user and create a new one for the person who is taking over.

CDLENS LOGIN

- To start using the CDLENS Form A/B, please key in your "User Name" and "Password".
- Click "LOGIN" and you will be directed to the welcome screen.



SINGPASS LOGIN

- Click "LOGIN HERE With Your SingPass" and you will be directed to SingPass Authentication Service page.
- To start using the CDLENS Form A/B, please key in your "SingPass ID" and "SingPass".
- Click "Submit" and you will be directed to the welcome screen.

Sing	Pass	si	ngapore Personal Access	
Secure			Terms of Use EAQs Help About Us	
This is a n	w SingPass S	creen		
Welc to SingPas	ome s Authentication	Service		
	SingPass ID	e.g. \$12345670, 012345670	(Erter your Identification.Mamber)	
	SingPass		(8-24 characters, CASE-SENSITIVE)	
		Tick here to change you	r SingPass	
		Submit Cancel (Click here	for fips on Online Security)	
		Do not have a SingPass? Ap	ply here.	1
		Forgot your Password? Rese	t here.	

SINGPASS LOGIN

- Only super users who have registered their NRIC with MOH can login with their SingPass ID.
 Please fill in the form provided in your handout and return it to us before leaving the theatre
- For ordinary users who wants to use SingPass login, superusers can add their NRIC when they create accounts for ordinary users.

WELCOME SCREEN

- The ordinary user and super user will have different welcome pages.
- If the user is linked with multiple Education Institutions they need to select the appropriate institution and click 'Go'.

MINISTRY OF HEALTH SINGAPORE	AMUNICABLE DISEASES	ENS Ihanced Surveillance	Singapore Government Integrity • Service • Excellence Contact Info Feedback	
Home Logout				
EDU_SUPERUSER	Education Institution Su	peruser, Welcome to CDLENS!		
DtherLink HPB FAQs on common diseases MOH Infectious Disease Guidelines MOH Infectious Diseases Bulletin	Select Institution:	Select Select ABC Child Care Centre XYZ Child Care Centre		
Best viewed using IE 5.0+ or Netsca	pe 6.0+			
Privacy Statement Terms of Use			Copyright © 2006 Ministry of Health. All rights reserved	
ê			Local intranet	

ORDINARY USER WELCOME PAGE

• This is the welcome screen for Education Institution Ordinary user.



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Local intranet

SUPERUSER WELCOME PAGE

- This is the welcome screen for Education Institution Super user.
- A link to User Account Management Module will be provided in the left menu.
- Other links in the left menu will be the same as Ordinary users.



POINTS TO NOTE

- If the user is linked with multiple Education Institutions and wants to login as a different education institution, they need to click the 'Home' Link in the header menu. (This 'Home' link will be visible only for users with multiple Education Institutions).
- The 'Welcome Page' link will allow the user to navigate to the Welcome page from other pages.

SUBMIT NEW FORM A/B

- The Education Institution user can submit electronic Form A/B to MOH.
- Click 'Submit New Cases' on the left menu



SUBMIT NEW FORM A/B

- Every Form A/B has 3 main parts
 - Institution details (name, add, tel no etc)
 - Class details (K1, K2, N1 etc)
 - Case details (Name, IC etc of sick child/staff)

SUBMIT NEW FORM A/B (Institution Details)

- The Institution details will auto-populate (Institute name, type, tel no, fax no, contact person, add)
- If any of the institution details are wrong and need to be updated, click the 'Update Institution'. Fill in the new details in the popup box that opens.
- Click 'Submit' in the Update Education Institution Popup screen.

me Welco	ome Page Logout		
J_SUPERUSEF	R Form A		
ubmit New Case	Cluster Notification Form		
Update Educ	ational Institute - Microsoft Internet Explorer		
Update Educa	ational Institute		
Educational Institute	XYZ Child Care Centre	re Update Institution	
Name * : Educational		253	
Institute	Kindergarten	Floor No - Unit No : #12 - 10 pourFront Center Building Name : Maritime Square	
Tel No:	63792267		
Fax No:	62712088		
Contact Person:	Mr. Jamesh		
Block No:	98		
Floor No:	12	s To yrs	
Unit No:		,PA ,PCF (MOE)	
Street			
Name:	HarbourFront Center		
Building Name:	Maritime Square	Teacher(s) 0 Cook(s) 0	
Postal	099253	Others 0	
10001	Landau and L		
Postal Code:	099253		

SUBMIT NEW FORM A/B (Class Details)

- If you have previously submitted cases to MOH, the class details will autopopulate based on the latest submission.
- The class details can be modified. Select the class details check box and click 'Update'. A popup will open and allow the user to update the selected class details.
- New class details can be added by clicking 'Add Class'. A popup will open and allow the user to enter the new class details.

Submit New Cases	Cluster	Notification Form									
Update the Recovery date & Doctor's Information	Date o	of Notification:	18/12/200	7							
Print Submissions dmin	Diseas	se *:	Select	Select							
User Account Management Change Password thert ink	Institu	ition *:	XYZ Child	XYZ Child Care Centre Update Institution							
HPB FAQs on common dise MOH Infectious Disease Guidelines	ases Institu	ition Address:	Postal Coo Block/Hou Street Nar	le: 099253 se No:98 ne: Harbour	rFront Center	Floor No - Ur Building Nam	nit No :#12 - ne : Maritim	10 ie Square			
MOH II	oft Internet Expl	orer					_				
		Class *		No. of Childr	ren Enrolled	No. of Child	ren Infected	1			
NO.	eg. K1, K2,	K3, N2, Playgroup		Male	Female	Male	Female				
1.											
3.											
4.											
5.											
							,	ok(s)			
			Save					Uniter a			
	Note:Ple	ase remember to c	lick the final s	ubmit button	after saving d	etails		x			
ļ	First 0	ase :									
	No. of	Children Affected	1: 2								
	No. of	Staff Affected :									
	Class D	etails/Population o	f Entire Institu	tion and Infe	ected Children	Population					
		Cl No. eq. K1, K2, K3	ass * 3, N2, Playgrou	ID м:	No. of Children	Enrolled	N	lo. of Childre Male	n Infected Female		
			К1	. 16	2	remaie	2	1	Temate		
	Undat		d Class								

SUBMIT NEW FORM A/B (Class Details)

 Please note that total No. of children enrolled is auto-calculated from class details. Therefore it is important to key in all the classes in your school.

E.g For Child care centre: PG, N1, N2, K1, K2 For Primary school: Primary 1, Primary 2, etc

MOH CDLENS - Communicable	Diseases Live & ENhanced Surveil	lance - Microsoft Internet Explorer	
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Address 🙋 https://www.cdlens-uat.mo	h.gov.sg/cdlens/createFormAB.do	💌 🄁 😡	Links »
🔊 🝷 Search web	🔎 🔸 🛅 🝷 😨 🔹 📢	- Favorites 🔹 🕖 PC Health 🛛 Spaces 🔹 🖃 🔹 🖓 🔹 🗊 Blocked (94) 🔹 🛐 🔹 😨 🕡 🔹	
 Submit New Cases Update the Recovery date & Doctor's Information 	Date of Notification:	17/01/2008	
Print Submissions dmin User Account Management	Disease *:	Select 💌	
 Change Password ItherLink 	Institution *:	XYZ PRIMARY SCHOOL Update Institution	
HPB FAQs on common diseases MOH Infectious Disease Guidelines	Institution Address:	Postal Code : 123456 Block/House No : Floor No - Unit No :# - 1 Street Name : xyz road Building Name :	
MOH Infectious Diseases Bulletin	Contact Person :		
	Tel Number :	61234567	
	Fax Number :		
	Total No. of Children Enrolled :		
	Age Group of Children Enrolled :	From yrs To yrs	
	Agency Center Registered With :		
	Approved Enrollment No. :		
	Staff Population:	Principal Teacher(s) Cook(s) Cleaner(s) Others	
	Onset of Illness of The First Case :		
	No. of Children Affected :		
	No. of Staff Affected :		
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SUBMIT NEW FORM A/B (Case Details)

- To enter cases' names in Form B, click 'Add Individual Details 'and key in case details in the popup box that appears.
- For clinic details, user can click on the search icon to view a popup screen with list of clinic names and contact numbers. Click on the appropriate clinic name.
- After entering necessary fields click 'Save' in the popup Form B.

No. NRIC */ Name *	Sex/ Ethnic Group	Tel No./ DOB	Class/ Last Date at Center	Date of Onset */ Date Recovered	Date Vaccinated#1	Doctor Name/ MCR NO.	linic Name */ Contact No *	
1.	Male Chinese		Select 💌				•	
2.	Male 💌 Chinese 💌		Select 💌				•	
3.	Male 💌 Chinese 💌		Select 💌				•	
4.	Male 💌 Chinese 💌		Select 💌				•	
5.	Male 💌 Chinese 💌		Select 🗾				•	
6.	Male 💌 Chinese 💌		Select 💌				®	
7.	Male		Select -				•	T T
	Form B		UPDATI	E TO COMMUNICABLE Ministry of (Fax No. 62215528	E DISEASES DIVIS HEALTH OR 62215538)	ION		
		NRIC *	Sex Tel	No. Class	Date of Onset * Vac	Date Doct cinated Nan	tor Clinic ne Name	Remarks
	NO	Name *	Ethnic Group DO	B Last Date at Center	Date Recovered	MCR	No Contact No No	

SUBMIT NEW FORM A/B

- The case details can be modified. The user needs to select the check boxes next to the cases they wish to update and click 'Update'. A popup will open where the new details can be entered.
- The user can delete the case by selecting the check box next to the case and click 'Delete'.
- Please note there are there are three mandatory fields when keying in case details. 1) NRIC 2) Name 3) Date of Onset
- After entering all the necessary details in the Form A/B the user can submit it by clicking 'Submit'.

SUBMIT NEW FORM A/B

 After successfully submitting a Form A/B, an Acknowledgment screen will appear. The Form A/B Notification Id will be shown in this page.



PRINT SUBMITTED FORM A/B

- Users can print their submitted Form A/B immediately after submission by clicking 'Print' in the Acknowledgment screen.
- The printable page will popup. It will be in 'Landscape' format so users should change their page set-up property before printing.
- The user can print the page by clicking print submenu of the File header menu in the explorer.

File Edit View Favo	ites Tools Help				► → ≫ 🔘 Settings -	
Form A						
Date of Notification :	18/12/2007					
Disease :	Hand and Foot Mou	th Disease				
Institution :	XYZ Child Care Ce	ntre				
Institution Address:	Postal Code : 09 Block/House 98 No : Street Name : Ha	9253 rbourFront Center	Floor No - Unit No : Building Name :	#12 - 10 Maritime Square		
Contact Person :	Mr. Jamesh					
Tel Number :	63792267					
Fax Number :	62712088					
Total No. of Children Enrolled :	4					
Age Group of Childre Enrolled :	From 20 yrs To 3) yrs				
Agency Center Registered With :	CCC(MCYS) ,Other	s ,PA ,PCF (MOE)				
Approved Enrollment :	No. 23234567					
Staff Population:	Principal 1 Cleaner(s) 2		Teacher(s) 4 Others 3	Cook(s)	1	
Onset of Illness of Tl First Case :	e 18/12/2007					
No. of Children Infec	ed: 2					
No. of Staff Affected	1					
No.	Class *	No. o	of Children Enrolled	No. of Cl	hildren Infected	
1,	K1	, Male	2 Female	2 Male	Female 1	1
Form B						
	u	PDATE TO COMMUNI MINIST (FAX NO. 6221	CABLE DISEASES DIVISIO RY OF HEALTH 5528 OR 62215538)	N		

- Please notify MOH promptly if there are two or more cases of HFMD in your institution within a period of ten days. You do not need to wait to see the child's MC
- Doctor's information and recovery date can be updated later.

- Click the 'Update the Recovery date & Doctor's Information' link on the left menu.
- Select the disease type and other search filters to search for Notification which needs to be updated.

MINISTRY OF HEALTH SINGAPORE	MMUN Dis	ICABLE SEASES Live & EN	ENS Thanced Surveillance		Singapore Integrity • Se	Government rvice • Excellence act Info Feedback
EDU_SUPERUSER	Sear	ch Form A/B				
Form AB Submit New Cases Update the Recovery date & Doctor's Information Print Submissions Admin User Account Management Change Password DtherLink HPB FAQs on common diseases MOH Infectious Disease	Dise Date Noti * Man	ase Type * : e of Notification: fication ID: datory Field	Hand and Foot From 18/12/2 CDLENS -	: Mouth Disease ▼ 007 1 🖮 ⊤₀ 18/12/200	17 📠	
Guidelines MOH Infectious Diseases Bulletin	No.	Date of	Created By	No. of Cases	Notification ID	
	1	18/12/2007	EDU_SUPERUSER	1	CDLENS-2007-00267	
	2	18/12/2007	EDU_SUPERUSER	1	CDLENS-2007-00268	
	3	18/12/2007	EDU_SUPERUSER	1	CDLENS-2007-00269	

 By Clicking the Notification ID Link in the 'Search Form A/B Screen', user can open the relevant Form A/B to update the Recovery date and the doctor information.

Home Welcome Page L	ogoul												
EDU_SUPERUSER	Forn	A											
Form AB Submit New Cases	Clust	er No	tification Fo	rm									
Update the Recovery date & Doctor's Information	Not	ificat	ion Id:		CDLENS-2007	-00269							
 Print Submissions Admin 	Dat	e of N	otification		18/12/2007								
User Account Management Change Password	Dis	ease	*:		Hand and Foo	t Mouth Di	sease						
OtherLink	Ins	titutio	on *:		XYZ Child Car	e Centre							
MOH Infectious Diseases Guidelines MOH Infectious Diseases Bulletin	Ins	titutio	on Address	:	Postal Code : Block/House N Street Name :	099253 lo :98 Harbou	rFront Center	Floor No Building	- Unit No :#1: Name : Mar	2 - 10 itime Square			
	Cor	tact	Person :		Mr. Jamesh								
	Tel	Numl	er:		63792267								
	Fax	Num	ber :		62712088								
	Tot Enr	al No. olled	of Childre :	n	4								
	Age Enr	Grou olled	ıp of Childı :	en	From 20 yrs	From 20 yrs To 30 yrs							
	Age Wit	ncy (h:	Center Reg	istered	CCC(MCYS),	Others ,PA	,PCF (MOE)						
	App	rove	d Enrollme	nt No. :	23234567								
	Sta	ff Pop	ulation:		Principal : Cleaner(s) :	L 2	Te Oti	acher(s)4 ners 3		Cook	:(s) 1		
	Onset of Illness of The First Case :				18/12/2007								
	No.	o. of Children Affected :			2								
	No. of Staff Affected :			d:	1								
	Popu	lation	of Entire II	nstitution	and Infected Children Population						-		
		NO	eg. K1, K	Class 2, K3, N2	• 2, Playgroup	M	ale	en Enrolled Femal	e	Male	F	emale	
	_	1.		К1			2		2		1		
	Forn	ъВ											
					OPDAT	MI (FAX NO.	NISTRY OF H 62215528 0	EALTH R 62215538)				
		No	NRIC *	Sex	Tel	NO.	Class	Date of Onset *	Date Vaccinated	Doctor Name	Clinic Name	Rem	
			Name *	Ethni Group	c Di	эв	Last Date at Center	Date Recovered		MCR No	Contact No		
		1.	G5819068W Mr. San	Male Chines	234 e 18/12	5678 /1977	K1 18/12/2007	18/12/2007 18/12/2007	18/12/2007	Dr.Ramesh 04175C	B H TAN MEDICAL CLINIC 64681204	Rem	
	Up #1 Ap mum #2 Co Su	date oplicabl ps, me ase not bmit	e only to infe asles and rub ification shou	ctions whe ella. Id be diag	re vaccinations nosed and certi	are coverec fied by a g	l under the chi eneral practitic	ldhood immui ner	nization progra	mme e.g.			

- The user needs to select the check boxes next to appropriate cases and click 'Update'. A popup will open to allow the user to update the selected Individual's Recovery date and Doctor's information only.
- After updating the fields click 'Save'. The popup will be closed and the Form A/B will be refreshed with the updated field values. Click Submit.



 After successfully submitting the updated Form A/B, an Acknowledgment screen will appear. The Form A/B Notification Id will be shown in this page.



PRINT UPDATED FORM A/B

- Users can print their updated Form A/B immediately after submission by clicking 'Print' in the Acknowledgment screen.
- The printable page will popup. It will be in 'Landscape' format so users should change their page set-up property before printing.
- The user can print the page by clicking print submenu of the File header menu in the explorer.

	Toolo Itale	jier of mab.do.notil y10 -		0209 - Microsore		C-Winner	
	Tools Help					Sectings V	
orm A							-
Date of Notification :	18/12/2007						
Disease :	Hand and Foot N	1outh Disease					
Institution :	XYZ Child Care	Centre					
Institution Address:	Postal Code : Block/House No : Street Name :	099253 98 HarbourFront Center	Floo Buil	r No - Unit No : ding Name :	#12 - 10 Maritime Square		
Contact Person :	Mr. Jamesh						
Tel Number :	63792267						
Fax Number :	62712088						
Total No. of Children Enrolled :	4						
Age Group of Children Enrolled :	From 20 yrs To	o 30 yrs					
Agency Center Registered With :	CCC(MCYS) ,Ot	hers ,PA ,PCF (MOE)					
Approved Enrollment No. :	23234567						
Staff Population:	Principal Cleaner(s)	1 2	Teacher(s) 4 Others 3		Cook(s)	1	
Onset of Illness of The First Case :	18/12/2007						
No. of Children Infected :	2						
No. of Staff Affected :	1						
No	Class *	No	of Children E	nrolled	No. of C	hildren Infected	
eg. K1, K2	, K3, N2, Playgr	oup Male		Female	Male	Female	
L.	к1		2		2	1	1
		UPDATE TO COMMU MINIS (FAX NO. 62	NICABLE DISE TRY OF HEAL 215528 OR 62	ASES DIVISIO (H 215538)	N		
			-				_

PRINT SUBMISSIONS

- Users can print their submitted Form A/Bs at any time by clicking 'Print Submission' link on the left menu.
- Select the disease type and other search filters to search for Notifications which need to be printed. More than 1 notification can be selected using the check boxes.

MINISTRY OF HEALTH SINGAPORE	Logout	d	Live & ENhance	d S urveillance		<u>Contact Info</u> <u>Feedbac</u>					
DU_SUPERUSER	Sear	ch For	m A/B								
rm AB Submit New Cases	Dise	ease T	ype * :	Hand and Foot Mout	th Disease 💌						
Ipdate the Recovery date & loctor's Information rint Submissions	Date	e of No	otification:	From 18/12/2007 🖾 To 18/12/2007 🛍							
nin ser Account Management	Noti	ficatio	on ID:	CDLENS -							
change Password erLink PB FAQs on common diseases	* Mar	ndatory	Field	Search							
IOH Infectious Disease auidelines	Sear	ch Res	ult - 3 records foun	d for Hand and Foot Mo	uth Disease						
IOH Infectious Diseases Bulleti	n	No.	Date of Notification -	Created By▲	No. of Cases	Notification ID					
		1	18/12/2007	EDU_SUPERUSER	1	CDLENS-2007-00267					
		2	18/12/2007	EDU_SUPERUSER	1	CDLENS-2007-00268					
		3	18/12/2007	EDU SUPERUSER	1	CDLENS-2007-00269					

PRINT SUBMISSIONS

- The printable page will be popup after selecting the notifications check box and clicking 'Print' in the Search Form A/B.
- The printable page will be in 'Landscape'. The users should change the page set-up property before printing.
- The Education Institution user can print the page by clicking print submenu of the File header menu in the explorer.

MINISTRY OF HEALTH SINGAPORE		-	Liv	ve & ENhanced S	Surveillance	1				Contact Info Feedback				
Home Welcome Page I	.ogout													
EDU_SUPERUSER	Sear	ch For	m A/B		-									
 Submit New Cases Update the Recovery date & 	Dise	ase T	ype * :		Hand ar	nd Foot Mout	h Disease 💌							
Doctor's Information Print Submissions	Date	e of No	otificati	ion:	From	18/12/2007	то 18/	12/2007	1					
dmin • User Account Management	Noti	ficatio	on ID:		CDLENS -	CDLENS								
Change Password therLink	* Mar	ndatory	Field											
HPB FAQs on common diseases MOH Infectious Disease	Sant	ch Ree	ult - 3 r	ecords found t	Search	nd East Mar	th Disease							
Guidelines MOH Infectious Diseases Bulletin	Jean	No.	Date	of	Create	d By⊾	No. of Ca	ises	Notification ID					
			Notifi	ication .	EDU. CU	DEDUCED			CDI ENC 2007 00267					
		2	18/12/	/2007	EDU_SU	PERLISER	1		CDLENS-2007-00267					
	-	3	18/12/	/2007	EDU SU	DEDIISED	-		CDI ENS-2007-00250					
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			Form A	\									- I	1
			Diseas	se:		Hand and Foo	ot Mouth Disea	se						
			Institu	ution :		XYZ Child Ca	ire Centre							
			Institu	ution Address:		Postal Code : Block/House Street Name	: 099253 No :98 : HarbourFr	ont Center	Floor No - Un Building Nam	iit No : #12 - 10 e : Maritime Square				
			Contac	ct Person :		Mr. Jamesh								
			Tel Number : Fax Number :			63792267								
						62712088								
			Total Enroll	No. of Children ed :	•	4								
			Age Gr	roup of Childre	en	From 0 yrs To 0 yrs								
			Agenc	y Center Regis	stered	CCC(MCYS) ,Others ,PA ,PCF (MOE)								10
			Appro	ved Enrollmen	t No. :									1
			Staff I	Constiant		Principal	0		Teacher(s) 0	Cook((s) 0			
			Stanr	opulation.		Cleaner(s)	0		Others 0					
			No. of	Children Infe	ted :	3								
			Form B				LIBD			SDIVISION				
							5.5	(FAX NO.	ISTRY OF HEALTH 62215528 OR 62215	538)				
				NRIC	Sex	Tel No.	Class	Date of Onset	Date	Doctor Name	Clinic Name		Date of	1 11
			No.	Name	Ethnic Group	DOB	Last Date at Center	Date Recovered	¥accinated#1	MCR No.	Contact No.	Remarks	Notiofication	
			1	G5819068W	Male		К1	18/12/2007	18/12/2007	Dr.Ramesh	B H TAN MEDICAL CLINIC	Remarks	18/12/2007	
				Jamesh	Chinese		18/12/2007	18/12/2007		04452C	64681204			
			2	DSAD adsadsad	Male Chinese			18/12/2007					18/12/2007	
			3	G5819068W	Male	2345678	К1	18/12/2007	18/12/2007	Dr.Ramesh	MEDICAL CLINIC	Remarks	18/12/2007	

USERS ACCOUNT MANAGEMENT

- Will be showed only to Super users
- Click 'User Account Management' on the left menu



CREATE ORDINARY USERS

- Click 'Create User' in the User account management screen.
- The Super User can link more than one Education Institutions for an ordinary user by selecting the Institution Name in the left side Education Institution selection box and click the '>' Button.
- If an ordinary user want to login via SingPass, NRIC of that user can be filled in the NRIC field.

_SUPERUSER	User Accounts -> Create L	Jser
n AB brnit New Cases data the Decouver data S	User ID * :	EDU_ORDINARY_USER
ate the Recovery date a stor's Information nt Submissions	User Name * :	Education Institution Ordinary User
in er Account Management ange Password	Password * :	•••••
rLink 3 FAQs on common diseases	Confirm Password * :	•••••
MOH Infectious Disease Guidelines MOH Infectious Diseases Bulletin	NRIC :	
	Email :	
	Status :	
	Education Institution * :	[Select one or more Institute Name] ABC Child Care Centre

CREATE ORDINARY USERS

- After filling the necessary fields, click 'submit' to create a new user. ۲
- This Acknowledgment screen will appear next. ${\bullet}$
- If the Education institution super user wants to create another user they can click 'Create Another User'. •



Home | Welcome Page | Logout

EDU_SUPERUSER

CDLENS User Accounts -> Create User

Statistics (Statistics) (Sta
Form AB
Submit New Cases
Update the Recovery date &
Doctor's Information
Print Submissions
Admin
User Account Management
Change Password
DtherLink
HPB FAQs on common diseases
MOH Infectious Disease
Guidelines
MOH Infectious Diseases Bulletin
-2010 (5.00) (610) (500) (610) (500) (616) (500) (616)

User successfully created !				
User ID Information				
User ID :	EDU_ORDINARY_USER			
User Name :	Education Institution Ordinary User			
User Type :	Education Instituion(Ordinary User)			
Email :				
Status :	Active			
Institute Name :	XYZ Child Care Centre			
	Create Another User			

Singapore Government

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UPDATING ORDINARY USERS

- The super user is allowed to only have 3 <u>active</u> ordinary users for a particular Education Institution at any point of time.
- If an ordinary user leaves your institution, you can either inactivate the old user for the Education Institution (or) remove the Education Institution from the old user's list
- Click the hyperlink for 'Update User' in the User account management screen.
- Select the user which needed to be updated and click 'Submit'.



UPDATING ORDINARY USERS

- This Update User screen will appear next.
- The Super user can update the User Name, NRIC, Email, and Status of the Education Institution ordinary user. They also can remove the Education Institution from the ordinary user's list by selecting the Institution Name in the right side Institution name selection box and click the '<' Button.

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_SUPERUSER	CDLENS User Accounts -	-> Update User
1 AB bmit New Cases	User ID * :	EDU_ORDINARY_USER
date the Recovery date & ctor's Information nt Submissions	User Name * :	Education Institution Ordinary User
n er Account Management ange Password	NRIC :	
Link FAQs on common diseases	Email :	
H Infectious Disease delines	Status :	Active O Inactive
10H Infectious Diseases Bulletin	Institute Name * :	[Select one or more Institute Name] ABC Child Care Centre

UPDATING ORDINARY USERS

- After changing the necessary details click 'Submit'.
- This Acknowledgment screen will appear next.
- If the super user wants to update another user they can click 'Update Another User'.

COMMUNICABLE DISEASES MINISTRY OF HEALTH SINGAPORE Twe & ENhanced Surveillance Thome Welcome Page Logout			
EDU_SUPERUSER	CDLENS User Accounts -> Update User		
Form AB Submit New Cases Update the Recovery date & Doctor's Information Print Submissions		User successfully updated !	
Admin	User ID Information		
 User Account Management Change Password 	User ID :	EDU_ORDINARY_USER	
DtherLink HPB FAQs on common diseases MOH Infectious Disease Cuidelines	User Name :	Education Institution Ordinary User	
	User Type :	Education Instituion(Ordinary User)	
 MOH Infectious Diseases Bulletin 	Email :		
	Status :	Active	
	Institute Name :	XYZ Child Care Centre	
		Update Another User	

INACTIVATING ORDINARY USERS

- The super user can inactivate an ordinary user by selecting the Inactive in the status field of the Update user screen.
- After changing the status click 'Submit'. The Acknowledgment screen will appear next.

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U_SUPERUSER	CDLENS User Accounts -	> Update User
m AB ubmit New Cases pdate the Recovery date &	User ID * :	EDU_ORDINARY_USER
octor's Information rint Submissions nin	User Name * :	Education Institution Ordinary User
ser Account Management hange Password	NRIC :	
erLink PB FAQs on common diseases 10H Infectious Disease	Email :	
Guidelines MOH Infectious Diseases Bulletin	Status :	C Active • Inactive
	Institute Name * :	[Select one or more Institute Name] [Select one or more Institute Name] ABC Child Care Centre XYZ Child Care Centre

RESET PASSWORD FOR

ORDINARY USERS

- If the super user wants to reset the password for the selected ordinary user then they can click the 'Reset Password' in the Update user screen.
- A popup will open to allow the Education institution super user to reset the password of ordinary education institution user.

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orm AB Submit New Cases Update the Recovery date & Dector's Information	User ID * :	EDU_ORDINARY_USER		
Print Submissions	User Name * :	Education Institution Ordinary User		
New Password * :		ive		
Confirm new Password	* :	pre Institute Name]	[Select one or more Institute Name]	
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CHANGE PASSWORD FOR USER'S OWN ACCOUNT

- Click 'Change Password' Link on the left menu
- After entering all the necessary fields click submit.

MINISTRY OF HEALTH SINGAPORE	OGOUT	Singapore Government Integrity • Service • Excellence Contact Info Feedback
EDU_SUPERUSER	Update Password	
Form AB Submit New Cases Update the Recovery date & Doctor's Information Print Submissions Admin User Account Management Change Password	Old Password * :	
 OtherLink HPB FAQs on common diseases MOH Infectious Disease Guidelines MOH Infectious Diseases Bulletin 	Submit Re	eset

CHANGE PASSWORD FOR USER'S OWN ACCOUNT

- After entering all the necessary fields click submit.
- This Acknowledgment screen will appear next.



POINTS TO NOTE

- If you are a Super user and you forget your password, please contact Ministry of Health to reset it for you.
- Tel No: 1800 3258451
- Email moh_ens@moh.gov.sg

STATISTICS DISPLAYED ON WELCOME PAGE

- Be updated with the number of active HFMD clusters in Singapore
- Keep track of your institution's existing cluster(s)

User Name, Welcome to CDLENS!

XYZ Child Care Centre

Your last login was 27/11/2007, 18:15:15 Singapore Time.

<u>Note:</u> If any Super user is no longer with the assigned institution, please inform MOH moh_ens@moh.gov.sg within 3 working days.

Overall statistics in Singapore as of 27/11/2007

Total number of active Hand and Foot Mouth Disease clusters - 43

Overall statistics from your institution

Total number of cluster notified by your institution this year (as of today date) - 1

No. of active cluster - 1

No. of cases for all active clusters - 1

The latest onset date of cases from your institution - 27/11/2007

POINTS TO NOTE

• If the user wants to logout the system they need to click the 'Logout' Link in the header menu. If the user didn't logout properly, they can't login the system for next 30 minutes.



- What do I do if I have forgotten my password?
 - If you are an ordinary user, ask your super user to reset your password
 - If you are a super user, contact MOH

- What do I do if I submitted wrong information in the Form A/B accidentally?
 - You can submit a fresh form with the correct information.
 - Pls indicate in the remarks column that this is a replacement

- I already have to submit information to another authority (eg MCYS/MOE). Why do I have to do it again to MOH?
 - The information MOH requires (case details) is different from other ministries

- Why does a error message appear when I try to login?
 - You must click on the 'logout' button after you finish your work. If you close the screen without logging out properly, you can't login the system for next 30 minutes
 - This is necessary for security reasons

- Do I have to report a child who is only suspected to have HFMD?
 - Yes. But please indicate at the remarks column that it is a suspect case.

