

Public Health Management of Communicable Disease Case Investigations in Unidentified Clients

Final

Provincial Population & Public Health Guideline

Regional and Clinical Supports, Population and Public Health Services Branch

Date approved: December 8, 2025

Deadline for next review: December, 2028

Contents

1. Abbreviations	2
2. Purpose.....	2
3. Scope	2
4. Definitions	3
5. Background	3
5.1. Testing Facility	4
5.2. Cadham Provincial Laboratory (CPL)	4
5.3. Manitoba Health Surveillance Unit (MHSU)	4
6. Procedure for Regional Public Health	5
6.1. Initial Assessment of Investigation	5
6.2. Confirmation of Identity	5
6.2.1. Request to Amend Requisition Information Form	5
6.2.2. Receipt of Corrected Lab Report	6
6.2.3. Merging Client Records in PHIMS	6
6.3. Unable to Confirm Identity.....	6
7. Validation and References	7
8. Additional Resources	7

1. Abbreviations

CD	Communicable disease
CPL	Cadham Provincial Laboratory
DOB	Date of Birth
MHSU	Manitoba Health Surveillance Unit
MRN	Medical Record Number
PH	Public Health
PHIMS	Public Health Information Management System
PHIN	Personal Health Identification Number

2. Purpose

To describe a consistent and standardized process for the assessment and management of communicable disease (CD) case investigations by public health (PH), when the client was unidentified at the time of testing.

3. Scope

This document applies to regional PH staff who are involved in the management of CD investigations. This may include PH nurses, CD technicians, CD coordinators and other PH nursing roles. For this document, these roles will be collectively referred to as “PH staff”. While the document refers to related processes at external organizations (e.g. testing facilities, laboratory), it is not intended to direct the practice of non-PH staff. This document does not apply to scenarios where a client has purposely received de-identified testing via a designated lab process (e.g. anonymous or non-nominal HIV testing).

4. Definitions

Testing facility: Testing facility refers to the care location where testing was ordered. For the purpose of this document, this will generally be an acute care facility and commonly includes locations like emergency rooms or urgent care centres where time sensitive care is provided, without readily available health card information.

Unidentified client: For the purpose of this document, an unidentified client is a health service recipient for whom two client-specific identifiers (e.g. full name, date of birth, personal health identification number [PHIN]) have not been confirmed.

Clients can be tested for communicable diseases without confirmed identity for a variety of reasons including lack of consciousness, medical conditions impeding communication (e.g. delirium, psychosis, injuries caused by physical trauma) or the influence of substances (both licit and illicit). While lack of confirmed identity can add complexity to a CD investigation, it is important to approach these investigations with the principles of health equity and harm reduction in mind.

5. Background

This document supplements the guidance provided to PH staff in infection specific protocols, Public Health Information Management System (PHIMS) documentation resources and region-specific workflow guidance documents.

Successful identification of unidentified cases and the subsequent reconciliation of associated medical records holds many benefits, including the ability to complete a more robust CD investigation, offering greater opportunity to impact transmission and improved outcomes for the client, as well as improved data for PH surveillance. Thus, competency in navigating these complex investigations is important for PH staff.

Testing may be initiated on a client who is unidentifiable at the time of assessment by the testing facility, however client identity may be confirmed at one of several junctures within the health care system:

- During the care episode at the testing facility
- Prompted by laboratory request for updated demographic information
- During regional PH investigation

The following sections describe the roles and functions of the different health care organizations/ departments who play a role in the investigation of unidentifiable cases.

5.1. Testing Facility

When a client with unconfirmed identity presents at a healthcare facility and testing for a CD is clinically indicated, the testing facility will proceed with submitting a sample.

The lab sample and requisition are labelled based on the testing facility's naming convention. Commonly this will be "First Name: Unknown, Last name: Unknown, Date of Birth (DOB): 1900/01/01", however variations will occur such as a blank DOB or the first name field reflecting an alphabetic variation such as AA, BB, etc.

5.2. Cadham Provincial Laboratory (CPL)

Lab samples from unidentified clients are processed and entered using routine facility processes by CPL. Client information is recorded exactly as reported by the testing facility. The CPL data clerk will submit a Request to Amend Requisition Information Form to the testing facility to obtain updated demographic information. Samples and results for an unidentified client are identified by CPL using the medical record number (MRN)/ chart number, in the absence of other unique identifiers. The MRN generally can be located in the Alternate Identification field on a lab result report.

5.3. Manitoba Health Surveillance Unit (MHSU)

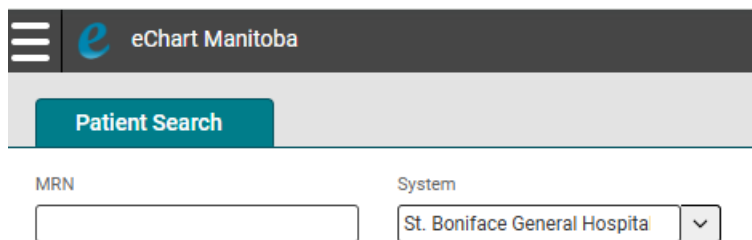
If a positive result for a reportable infection occurs prior to receiving updated identifying information from the testing facility, the report is automatically sent to MHSU with the unidentified client information on record. MHSU will search the MRN in Enterprise Viewer to check if the client identity has been confirmed by the testing facility. If a match is found, the lab results will be added to the profile of the client with the matching MRN and the MHSU clerk will add a note to the investigation explaining why the lab result was added to this client profile despite the unmatched demographics on the report. If no match is found, MHSU creates a new PHIMS client profile to house the result/ associated case investigation (for more detail see [Create Client-QRC](#)) using the client information exactly as reported by CPL. The investigation is referred to the appropriate PH region based on testing facility address, which will be added to the demographic section, address type "MHSU" (for further guidance about assignment to region, see [Documenting Geography for Communicable Disease Investigations in the Public Health Information Management System](#)).

6. Procedure for Regional Public Health

6.1. Initial Assessment of Investigation

Upon receipt by regional PH, process may differ depending on region specific and infection specific processes. Due to the limited information available, it can be challenging to determine the best course of action to pursue additional information. The following options can assist in gathering additional information about the client and scenario:

- Search Enterprise Viewer or eChart based on hospital MRN and selecting facility name (system) indicated on lab result.



If the client has been identified by the testing facility, this search will often link to a nominal client record.

- If an eChart search is unsuccessful, attempt to request a copy of the health record from the testing facility. When requesting the record, it is important to include details about the date of visit. Inclusion of the MRN/ chart number will also be key, as there will be no demographic information to search by.
- Depending on regional access, searching the MRN on other electronic medical record platforms (such as the Emergency Department Information System [EDIS]) may be helpful.
- In some situations, particularly for smaller testing facilities, a phone call to the testing location may elicit additional information.

6.2. Confirmation of Identity

6.2.1. Request to Amend Requisition Information Form

If PH staff can confirm client identity, contact the Health Records department at the testing facility to ensure that they are aware and to encourage the facility to submit the Request to Amend Requisition Information Form to CPL (form can be requested from CPL), if this has not already occurred. (Note: CPL will not accept forms completed by PH staff directly, only from the testing facility). When a corrected lab report is issued by

CPL, it will include a comment indicating the name of the staff at the testing facility who confirmed the client identifiers, and a copy of the corrected report is automatically sent to MHSU for all reportable infections. Regional PH staff should not need to request a copy directly from CPL.

6.2.2. Receipt of Corrected Lab Report

When a corrected report with new/ different client identifiers is sent to MHSU, it will not routinely be attached to the existing investigation in the unidentified client profile, rather a new investigation will be created to house the lab within the client's profile which matches the demographics on the lab report. Based on regional processes, this may result in the newly created investigation being assigned to a different PH investigator, who will be unaware of the existing investigation. PH staff are reminded to note the result status on a lab report when reviewing newly assigned investigations and to investigate further if the status is "corrected", without previous labs within the investigation. If PH staff is looking for a duplicate investigation, it can be identified by searching the lab accession number in the "search lab" section on the left-hand navigation bar.

Lab [Hide Lab](#)

[Lab Summary](#)

	Specimen Collection Date	Specimen Type / Description	Result Name	Interpreted Result; Result	Flag	Accession No.	Etiologic Agent	Epi Markers	PH Received Date	Result Status
⊕	2025 Jan 1	Serum / -	HIV p24 antigen + HIV-1/2 antibody (CMIA)	Positive;		5687456	-		2025 Nov 7	Corrected

6.2.3. Merging Client Records in PHIMS

If identity is confirmed after an unidentified client profile has been created, a [merge request](#) should be submitted by regional PH staff. Following the completion of the client profile merge, it is the responsibility of regional PH staff to merge/ delete redundant investigations (see <https://phimsmb.ca/files/review-client-merge.pdf> for additional detail).

6.3. Unable to Confirm Identity

In some scenarios, such as if the client leaves the testing facility unexpectedly or is deceased following the care episode, it may not be possible to confirm the client's identity. If unable to confirm identity, the client profile in PHIMS will remain labelled with the unidentified demographics listed on the lab report. Classification and staging will depend on the specific clinical scenario, but due to the limited information that will be

available, it is beneficial to discuss the scenario with the regional CD Coordinator prior to closure.

7. Validation and References

Documenting Organizations and Geography for Communicable Disease Investigations in the Public Health Information Management System

https://www.gov.mb.ca/health/publichealth/surveillance/cds/docs/documenting_geography.pdf

PHIMS QRC for Surveillance Unit client creation:

<https://phimsmb.ca/files/create-new-unmatched-client.pdf>

PHIMS Client Merge Request Form

<https://phimsmb.ca/files/request-to-merge-client.docx>

PHIMS Document Review Following Client Merge

<https://phimsmb.ca/files/review-client-merge.pdf>

8. Additional Resources

Cadham Provincial Laboratory

Patient Inquiry: 204-945-6611

Guide to Services: <https://sharedhealthmb.ca/wp-content/uploads/guide-to-services.pdf>

PHIMS user resources

<https://phimsmb.ca/support-tools/public-health/>