TIER.net HIV Electronic Register Training Guide

BACK CAPTURING OF DATA INTO TIER.NET

CLAUDINE HENNESSEY & THEUNIS HURTER
Capturing from the Paper Register
This step by step guide will help you locate data that is needed for the TIER.net from the paper register or

During this time, you will still need to account for the number of new patients started on a monthly basis and submit to your M&E team.

Although all clinics should be entering information in the same manner, there may be some discrepancies, please contact your M&E coordinator with questions.
To Log in, Open the TIER.net icon on your desktop.

In the log in screen, enter your *Username* and *Password*, click *OK*.

The main display page will appear.
Choose your clinic
From the main display page

- Select *Tools*, then *Options*
  - this is where you will select options if you are capturing in ‘back capture’ or ‘live’ mode
‘back capturing’ or ‘live’ mode?

**Back Capture Mode**
- Check first 2 boxes
- This mode will be used when capturing historical data – either from the register or the patient folder
- Check Ignore Clinicom folder check*

**Page Size**
- Allows you to determine how many patients you want to see on a page at a time. To see all patients on the list, enter a number greater than the number in the system.
Entering a Patient

- From main display, select **New**
  - A new patient ART file will open

- The patient file page is divided into 5 sections.
  - Patient details
  - ART
  - Outcomes
  - Treatment Visits
  - Notes
Patient Details
Folder Numbers
Alternate Number
Patient Name and Surname
Date of Birth
Identification Number
Gender
Patient Supporter
• This information can be found in the section marked *Folder #* in the paper register.

- Enter the 8-10 digit number into the section marked *Folder/CliniCom Number* in the TIER.net.

If a number is already in use by another patient, an alert will appear on the screen asking you to change or verify the number.
- This information can be found above the *Patients Folder #* column in the paper register.

- Please be sure to verify *Name* and *Surname* when entering into the TIER.net.

**Patient Name & Surname**

**Van Der Merwe, Mary**

**Van Der Merwe**
You will find this information in the field marked ID in the paper register.

The 1st 6 digits of a SA ID is the DOB in (YYMMDD) format.

In the TIER.net you will enter the day, month and year.

Verify that the Date of Birth is correct.

A Date of Birth must be entered in order to continue.
The ID number can be found in the column marked *ID* (same place at the DOB)

South African ID’s are 13 digits long

ID numbers are NOT required in order for a patient to receive ARV treatment.
- This information is found in the **Age** and **Gender** column
  - Female: F marked under Adult Female
  - Male: M marked under Adult Male

- In the TIER.net, click on the circle next to Male for a male patient and Female for female patients
Although this is important information, it is not available in the older versions of the paper register, so for now, just leave this section blank in the TIER.net.
This information can be found in the first column in the paper register under *Date Started* (DD/MM)

- The year will be found under *Cohort*

- Enter the year in the *ART Start Date*
- Enter in *dd/mm/yyyy* format
This information can be found in the column

**Prior ART (P)MTCT/(H)AART/PEP**

<table>
<thead>
<tr>
<th>Cohort</th>
<th>Date started</th>
<th>Patient's Name, Surname, folder number and ID number</th>
<th>Outcome</th>
<th>Age &amp; Gender</th>
<th>CD4 Count</th>
<th>WHO stage</th>
<th>ART</th>
<th>Vital Load</th>
<th>Viral Load</th>
<th>ETOH</th>
<th>NUC Rx</th>
<th>NRT Rx</th>
<th>NNRT Rx</th>
<th>CCR5 Rx</th>
<th>DIH Rx</th>
<th>Diagnosed with TB</th>
<th>Rx Started</th>
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<tbody>
<tr>
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</table>

**ART**

- **ART Start Date**
- **Prior ART**
- **Method into ART**
- **Transferred/Moved In Date**
- **From Location**
- **Pregnant on ART Start**
- **Stage at ART Start**
- **TB Rx Started**
New and Transfer In
- If the patient is a *New* patient then they will be entered into the paper register at the top of the page
- Select *New* from the drop down box in the TIER.net
If the patient is a *Transfer In*, the transfer in box should be checked in the paper register.

Usually the *New* patients and the *Transfer In* patients are separated with from each other and highlighted.

- separate TFI register.
- What does your clinic do?
If the patient is a *Transfer In*, this information can be found under *Date Started*, column and the year can be found under *Cohort*.
Transfer In Location

- Clinic from where they were transferred.

- From the *From Location* drop down menu select the name of the clinic where the patient *Transferred In* from, if unknown, select *Unknown*.

- If left blank the patient won’t be counted in your reports.

- When back capturing select *Other* if no location is written in the paper register (notes section).
What is this folder telling me??

NAIVE

PMTCT

Prior ART

Transfer In?

PRIOR ART AND PMTCT

NEW
* ALWAYS try to get information on previous treatment and original ART start date, and enter patients who have previously been on ART as transfers. If entered as NEW they will be double-counted, once at the original clinic and again at your clinic.
- This information can be found in the column *Pregnant When Starting ART*

- In most cases either a *Y* or *N* will indicate whether or not a woman was pregnant at the start of her treatment.

- If you are not sure of the patient's pregnancy status, select *Not Sure* and verify once you have the folder in front of you.
This information can be found under the column *WHO Stage* in the paper register.

If this information is blank, select *Unknown*, but please flag and pull the folder to verify.
Although this is important information, it is not available in the paper register, so for now this information will not be captured in the TIER.net.

Select Unknown when capturing from the paper register.
- Select Unknown when capturing from the paper register if your register doesn’t have this information.
On CPT at ART Start

- Select Unknown when capturing from the paper register if your register doesn’t have this information
Outcomes
Died (RIP)
Transfer/Moved Out (TMO)
Lost to Follow up (LTF)
Outcomes & Outcome Dates

- The outcome feature is used to identify patients that have **Died (RIP)**, are **Lost to Follow Up (LTF)**, or who have **Transferred / Moved Out (TMO)**.

- This information can be found in the column marked **Outcome** next to the patient name.

- In some cases, this information will not have been entered in the **Outcome** column, but can be found in the **Visit Month** & in the **Summary Months** column.

- This information can be found underneath the specific **Outcome** at the beginning of the page, next to the **Patient Name**.

<table>
<thead>
<tr>
<th>Cohort</th>
<th>Date entered</th>
<th>Patients Name, Surname, folder number and ID number</th>
<th>Died / Lost / TFO Date</th>
<th>Age &amp; Gender</th>
<th>Outcome</th>
<th>HIV DNA Viral Load</th>
<th>CD4 Count</th>
<th>Starting regimen</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1/1/05</td>
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<td></td>
<td></td>
<td>LTF</td>
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</tr>
</tbody>
</table>

- At 3 months; report on average between starting ARV and 3 months

- At 6 months; report on events between 3 & 6 months

**Outcome Date**

LTF
It is very important to enter the **Outcome** prior to entering the treatment visit information when capturing in back-capture mode.

**Remember:** it is ok to have a patient start treatment and have an outcome in the same month...you must enter the **Outcome** first.
Treatment Visits
Date of Visit
Regime
Months Prescribed
Viral Load
CD 4 count
Stopped
Clear
Did Not Attend
No of months prescribed
Next Clinical Appt
Date
In back capture mode this function will default to a specific date.

The paper register does not specify day of visit just month and year. You can find this information written in the month format under the sequential numbering columns.
In the paper register each visit date indicates 1 month of treatment.

Anything more than 1 month prescribed will only be used when capturing data directly from the patient folder.

You do not need to enter the Next Clinical Appt Date when back capturing.
Regimen

- In the paper register the regimen can be found under *Starting Regime*
- CANNOT be left blank, if the *Starting Regime* is missing, pull the patient folder.
- In back capture mode when selecting the regimen, select *Old Coding* – the new coding will be highlighted.
- If the regimen in the paper register is 1n or 2n, you must pull the folder to verify the specific drugs as the TIER.net does not recognize 1n or 2n.

<table>
<thead>
<tr>
<th>Starting regimen</th>
<th>1a</th>
<th>1a</th>
<th>1a</th>
<th>1a</th>
</tr>
</thead>
<tbody>
<tr>
<td>June '00</td>
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<tr>
<td>July '00</td>
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<td></td>
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<tr>
<td>August '00</td>
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</tr>
</tbody>
</table>

![Image of treatment visit details](image-url)

- At 3 months: Report on events between starting ARVs & 3 months
- At 6 months: Report on events between starting ARVs & 6 months
## Drug Regimens - Adults

### First Line Adults

<table>
<thead>
<tr>
<th>1T3E</th>
<th>1T3N</th>
<th>1S3E</th>
<th>1Z3E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tenofovir (TDF)</td>
<td>Tenofovir (TDF)</td>
<td>Stavudine (D4T)</td>
<td>Zidovudine (AZT)</td>
</tr>
<tr>
<td>Lamivudine (3TC)</td>
<td>Lamivudine (3TC)</td>
<td>Lamivudine (3TC)</td>
<td>Lamivudine (3TC)</td>
</tr>
<tr>
<td>Efavirenz (EFV)</td>
<td>Nevirapine (NVP)</td>
<td>Efavirenz (EFV)</td>
<td>Efavirenz (EFV)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1Z3N</th>
<th>1 TFE</th>
<th>1 TFN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zidovudine (AZT)</td>
<td>Tenofovir (TDF)</td>
<td>Tenofovir (TDF)</td>
</tr>
<tr>
<td>Lamivudine (3TC)</td>
<td>Emtricitabine (FTC)</td>
<td>Emtricitabine (FTC)</td>
</tr>
<tr>
<td>Nevirapine (NVP)</td>
<td>Efavirenz (EFV)</td>
<td>Nevirapine (NVP)</td>
</tr>
</tbody>
</table>

**LAMZID** – is a combination drug of Zidovudine (AZT) and Lamivudine (3TC)

**COMBIVIR** – is a combination drug of Zidovudine (AZT) and Lamivudine (3TC)

### Second Line Adults

<table>
<thead>
<tr>
<th>2T3L</th>
<th>2Z3L</th>
<th>2TFL</th>
<th>2ZdL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tenofovir (TDF)</td>
<td>Zidovudine (AZT)</td>
<td>enofovir (TDF)</td>
<td>Zidovudine (AZT)</td>
</tr>
<tr>
<td>Lamivudine (3TC)</td>
<td>Lamivudine (3TC)</td>
<td>Emtrictabine (FTC)</td>
<td>didanosine (ddl)</td>
</tr>
<tr>
<td>Lopinavir/ritonavir (LPV/r)</td>
<td>Lopinavir/ritonavir (LPV/r)</td>
<td>Lopinavir/ritonavir (LPV/r)</td>
<td>Lopinavir/ritonavir (LPV/r)</td>
</tr>
</tbody>
</table>

Lopinavir/ritonavir is also called KALETRA or ALUVIA
Paediatric Drug Regimen’s

**First Line Paeds (dependent on weight)**

<table>
<thead>
<tr>
<th>1A3L</th>
<th>1A3E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abacavir (ABC)</td>
<td>Abacavir (ABC)</td>
</tr>
<tr>
<td>Lamivudine (3TC)</td>
<td>Lamivudine (3TC)</td>
</tr>
<tr>
<td>Lopinavir/Ritonovir (LPV/r)</td>
<td>Efavirenz (EFV)</td>
</tr>
</tbody>
</table>

**Lopinavir/ritonavir** is also called KALETRA or ALUVIA

**Second Line Paeds (dependent on weight)**

<table>
<thead>
<tr>
<th>2ZdL</th>
<th>2A3L</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zidovudine (AZT)</td>
<td>Abacavir (ABC)</td>
</tr>
<tr>
<td>Didanosine (ddl)</td>
<td>Lamivudine (3TC)</td>
</tr>
<tr>
<td>Lopinavir/ritonavir (LPV/r)</td>
<td>Lopinavir/ritonavir (LPV/r)</td>
</tr>
</tbody>
</table>

**LAMZID** – is a combination drug of Zidovudine (AZT) and Lamivudine (3TC)

**COMBIVIR** – is a combination drug of Zidovudine (AZT) and Lamivudine (3TC)
Stops & Did Not Attend

- When capturing in the TIER.net in back capture mode, the *Lost to Follow up* is the last month that the patient was seen in the clinic after 90 days.

- If a *Stop* is for medical reasons (S2, S3, S4 etc), select *Stopped* in the TIER.net.

- If a patient did not attend the clinic (S or * in the paper register) select *Did Not Attend* in the TIER.net.
The Viral Load can be found in the Viral Load column.

No baseline Viral Load.

In the paper register LDL indicates a Lower than Detectable Limit, LDL must be written as 124.

If there is a number value below 124 write in that number (although suppressed VL = 400).

Be sure not to write in the log value.
In the Paper Register the **CD4** can be found in summary months column

The **baseline CD4** count can be found in the **first CD4 count** column

If the patient is a *Transfer In*, the baseline CD4 must be the **first CD4 count** taken, not the CD4 count when the patient transferred to your clinic
For the months between when the patient started treatment and when they transferred in, select *Did Not Attend*.

Transfer in month – regimen selected.

Starting Regimen when Patient first Started Treatment
• This section is for the data capturers to use!

• Good communication tool between staff

• If there is missing information – note it

• If the file is Up To Date – write $UTD$ and your initials

• If there is missing information in the paper register document it in the notes section and then write $UTD$
To back up a file onto the desk top:
• On File tab, select Back Up
• Select Desk Top from the left hand column
• Select TIER.net Back Up Files folder and Open
• Click Save
Backing up onto the flash drive

- Be sure to keep the Flash Drive in a safe and secure place – away from the computer
- It’s a good idea to keep the flash drive with the Sister in Charge

- Open the Desk top folder titled ‘TIER.net v1 back up files’
- Right click on the mouse
- Select Send To
- Select Removable Disk (E:)
- This information will be saved to your flash drive
WHEN DO YOU BACK UP??????

EVERY DAY

BREAKFAST, LUNCH & DINNER
Where do you keep the flash drive?

- In my pocket
- I take it home
- I give it to a patient for safe keeping
- I leave it in the computer
- I don't back up
- I give it to the Sister in Charge or the Facility Manager to lock up
PLEDGE...I pledge to

Respect my patients
Treat them as I want to be treated
Complete the tasks I am assigned
Take pride in my work
Ask, if I am not sure how to do something
Tell, if something is not being done the way it should be done
Work as a team
PRACTICING ENTERING INTO REGISTER
Paper Register
| Date started (DD/MM) | Date (DD/MM) | Patient's Name, Surname, folder number and ID number | Died/Lost to follow-up | Age & Gender | Outcome | CD4 Count | Viral Load | WHO stage | PrEP when starting ARV | ARVs when starting ARV | Staging regimen | 1 | 2 | 3 | 4 | 5 | July | Aug | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 1/6                  | Hennessey, Claudine | 1223344 | 6 | 11 | N | N | 4 | 135 | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a |
| 4/6                  | Jackson, Michael | 2334455 | 8 | 01 | O | 2 | 2 | 90 | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b |
| 12/6                 | White, Catherine | 3344556 | 7 | 00 | D | 0 | 2 | 220 | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b |
| 24/6                 | Osler, Meg | 45678911 | 7 | 11 | 4 | 9 | 22 | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b | 1b |
| 18/6                 | Hurter, Theunis | 1234567 | 6 | 01 | 0 | 1 | 2 | 9 | 68 | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a | 1a |

Note: The table contains data for patients starting ARVs at 3 months, with additional columns for outcomes, gender, age, and CD4 counts.
Next phase: Capturing ‘live’, cleaning the data & running reports.....

QUESTIONS SO FAR?
CALL CLAUDINE HENNESSEY AT 021 406 6760
079 277 8313
OR EMAIL: CLAUDINE.HENNESSEY@UCT.AC.ZA