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# Missouri Disease Reporting Online Portal (MODROP) User Guide

Quick Reference Guide



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# Overview



## What is MODROP?

In early 2020, the Missouri Department of Health and Senior Services (MODHSS) developed an online reporting portal for healthcare providers to report suspect and confirmed cases of COVID-19.

The online dropbox, the Missouri Disease Reporting Online Portal (MODROP), allows providers to securely and confidentially submit patient information and laboratory testing online without the need of manually faxing or digitally uploading the Missouri Communicable Disease Case Report (CD-1) form. In addition, MODROP allows providers to keep records of disease reports for tracking purposes. Using the online portal allows for automated integration into the MODHSS disease surveillance system, EpiTrax, so that public health officials can respond faster to implement control measures. Submitting reports through the MODROP fulfills COVID-19 reporting requirements under 19 CSR 20.20-020.

Reports can be submitted to the online portal individually. Bulk upload functionality, which allows each facility to upload a CSV (comma delimited) file for submission, is coming soon.

MODHSS will continue implementing future upgrades to improve the functionality of the online reporting portal. To access the portal and enroll visit <https://modrop.health.mo.gov/>

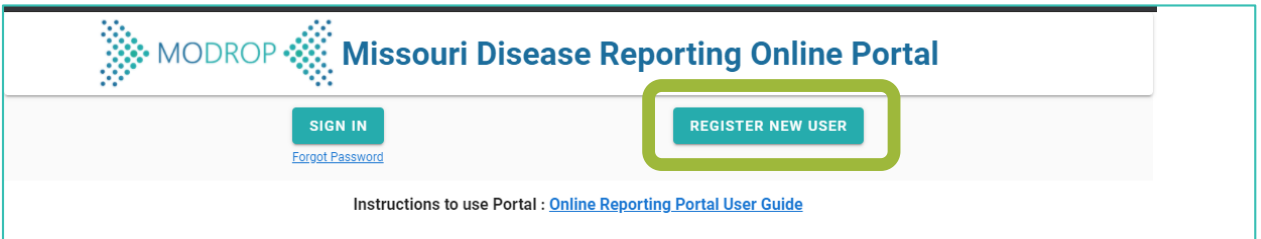
# MODROP Enrollment

## Users

Any reporter can enroll in just a few minutes by completing the enrollment process. Enrolling users is simple and can be completed in just a few minutes. Users can enroll for an account online by selecting 'Register New User' at the main MODROP hub <https://modrop.health.mo.gov/>

## To Enroll

1. From the main MODROP hub, select 'Register New User'.



2. Enter all requested details in the pop-up box. Use the dropdown box to select your facility. If your facility is not already in MODROP, then type in your facility name.

DO NOT use abbreviations for your facility– use the complete, full name. For example, you would not enter 'MCMO' instead enter 'Medical Clinic of Missouri'.

Select facility from dropdown or enter facility name if not listed.

The screenshot shows a 'Create New User Account' form. It includes the following fields: 'Facility Name \*' (a dropdown menu with the placeholder 'Select your Facility or create a new one'), 'Facility Type \*' (a dropdown menu), 'Street \*', 'Unit', 'City \*', 'State \*' (with 'MO' selected), and 'Zip \*'. Below these are 'Ph. Area \*' and 'Phone Number \*'. Further down are 'Last Name \*' and 'First Name \*'. The 'Email Address \*' field is a single line. At the bottom are 'Password \*' and 'Confirm Password \*' fields. A note below the password fields states: '(Password should be minimum 8 characters, contain a letter, number and special character [!,%,\$])'. At the very bottom are 'CANCEL' and 'SIGN UP' buttons.

Use your work email address and not your personal email.

# Creating a New Report

Securely submit patient information and laboratory testing results



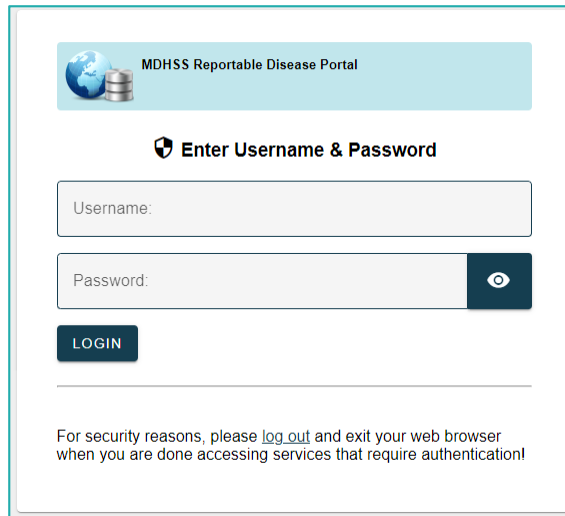
# Creating a New Report

## Sign in to the MODROP

Enrolled users will be able to sign in to the system with the user name and password used during the enrollment process.

1. Enter login credentials to access the portal after selecting SIGN IN.

(Username will be in lowercase.)



The screenshot shows the login interface for the MDHSS Reportable Disease Portal. At the top, there is a header with a globe icon and the text "MDHSS Reportable Disease Portal". Below this is a section titled "Enter Username & Password" with a shield icon. There are two input fields: "Username:" and "Password:". The password field has a toggle icon to the right. Below the fields is a "LOGIN" button. At the bottom, there is a security notice: "For security reasons, please [log out](#) and exit your web browser when you are done accessing services that require authentication!"

## Enter Information and Results

1. From the main Dashboard, select NEW REPORT.

Do not submit multiple reports for the same patient, unless there is a new test/lab result. If you submit a report in error or need to correct a submitted report, please email [epitrax@health.mo.gov](mailto:epitrax@health.mo.gov).



The screenshot shows the dashboard of the Missouri Disease Reporting Online Portal (MODROP). The header includes the MODROP logo and the text "Missouri Disease Reporting Online Portal". There are two main navigation buttons: "DASHBOARD" and "NEW REPORT", with "NEW REPORT" highlighted by a green box. The user's name "Whitney Coffey" and a "LOGOUT" button are visible in the top right. Below the navigation is a section for "Instructions to use Portal" with a link to the "Online Reporting Portal User Guide". There is a "SEARCH CRITERIA" section with an "Enter Last Name" field, "From" and "Date" date pickers (set to 01/25/2021 and 02/25/2021), and "CLEAR" and "SEARCH" buttons. Below this is a section for "PATIENT CASE NOTIFICATIONS - TUNAS TESTFACILITY" with a table of patient records.

Name	DOB	Condition	Facility Name	County	Lab	Collection Date	Created
<a href="#">KINGTEST, LINDATEST</a>	07/22/1990	Coronavirus Disease 2019 (COVID-19)	KDHE	Johnson	Private	05/01/2020	05/01/2020

# Creating a New Report

## 2. Complete the REPORTER INFORMATION section.

Fields marked with a \* are required.

**REPORTER INFORMATION**

Name: Tunas TestFacility | Facility Type \*: Residential Summer Camp | Reporter Last Name: Coffey | Reporter First Name: Whitney

Street \*: 1 Stonehaven Rd | Unit: | City \*: Tunas | State \*: MO | Zip \*: 65764

Area Code: 573 | Phone Number: 7516285

Set to facility used at account registration.

## 3. Complete the PATIENT INFORMATION section.

**PATIENT INFORMATION**

Last Name \* | First Name \* | Middle Name | Date of Birth \* (If unavailable please enter 01/01/1921)

Street \* | Unit | City \* | State \*: MO | Zip \*

Phone Type: Home | Area Code | Phone Number

Sex \* | Race (Select one or Select Other for multiple races): Unknown | Ethnicity: Unknown | County of Residence\*

Resident/Staff in a Congregate Care Setting | Employed in healthcare?

Was the Patient Hospitalized? | Admit Date (MM/DD/YYYY format) | Discharge Date (MM/DD/YYYY format) | ICU? | Pregnant?

## 4. Complete the ORDERING INFORMATION section.

Check this box to input your facility information.

**ORDERING INFORMATION**

Auto fill reporter details

Facility Name \*: Select your Facility or create a new one | Facility Type \*

Street \* | Unit | City \* | State \* | Zip \*

Area Code \* | Phone Number \*

Provider Last Name \* | Provider First Name \*

Specimen ID \* (auto generated): SIKLLBN93Q334 | Specimen Source \* | Specimen Collection Date \* (MM/DD/YYYY format) | Date Test Ordered \* (MM/DD/YYYY format)



# Creating a New Report

5. Complete the ILLNESS, SYMPTOMS AND TREATMENT section.

ILLNESS, SYMPTOMS AND TREATMENT

Disease \*  
COVID-19

Is the patient deceased ?    Is patient symptomatic ?    Onset Date  
MM/DD/YYYY format

6. Complete the LABORATORY REPORTING section.

Enter your facility's CLIA waiver (Clinical Laboratory Improvement Amendments) number, if it is known.

LABORATORY REPORTING

Auto fill reporter details

Testing Lab \*  
Select your Lab or create a new one

Street    Unit    City    CLIA if known

Area Code    Phone Number    State MO    Zip

Accession #    Date Test Performed \*  
MM/DD/YYYY format

Test Type \*    Test Result \*

Lab test results are required for complete submission of this record.

7. Select SUBMIT to submit report through this drobox to MODHSS. If successful, a black box will momentarily appear at the top of the screen noting that the case has been submitted.

RESET    SUBMIT

Select RESET to cancel/start over.

# Creating a New Report

After successful submission of the report, a printable page with the report information is auto-generated.

**MODROP Missouri Disease Reporting Online Portal**

**DASHBOARD NEW REPORT** Whitney Coffey **LOGOUT**

Instructions to use Portal : [Online Reporting Portal User Guide](#)

**PRINT REPORT**  
NOTIFICATION SUBMITTED  
Please print for your records

**REPORTER INFORMATION**

Name	Tunas TestFacility	Facility Type *	Residential Summer Camp	Reporter Last Name	Coffey	Reporter First Name	Whitney		
Street *	1 Stonehaven Rd	Unit		City *	Tunas	State *	MO	Zip *	65764
Area Code	573	Phone Number	7516285						

**PATIENT INFORMATION**

Last Name *	Testcase	First Name *	MaryDee	Middle Name		Date of Birth *	02/27/1988		
							(If unavailable please enter 01/01/1921)		
Street *	920 Wildoodtest Dr	Unit		City *	Jefferson Citytest	State *	MO	Zip *	65109
Phone Type	Work	Area Code	573	Phone Number	7330103				
Sex *	Female	Race (Select one or Select Other for multiple races)	White	Ethnicity	Not Hispanic or Latino	County of Residence*	COLE		
Resident/Staff in a Congregate Care Setting	No	Employed in healthcare?	No						
Was the Patient Hospitalized?	Yes	Admit Date	02/15/2021	Discharge Date	02/18/2021	ICU?	No	Pregnant?	No
		MM/DD/YYYY format		MM/DD/YYYY format					

# Reviewing Submitted Reports

Verify accuracy via the MODROP Dashboard



# Reviewing Submitted Reports

Users will be able to review all reports that have been submitted to the online portal. To access submitted reports, navigate to the MODROP dashboard. Select the relevant search criteria from the dashboard to view the reports that meet your desired criteria.

Enter search criteria to view applicable submitted records.

**MODROP** Missouri Disease Reporting Online Portal

**DASHBOARD** NEW REPORT

W. Coffey **LOGOUT**

Instructions to use Portal : [Online Reporting Portal User Guide](#)

SEARCH CRITERIA

Enter Last Name  From  Date

MM/DD/YYYY format MM/DD/YYYY format **CLEAR** **SEARCH**

PATIENT CASE NOTIFICATIONS - TUNAS TESTFACILITY

Name	DOB	Condition	Result	County	Collection Date	Created
<a href="#">Testcase, MaryDee</a>	02/27/1988	COVID-19	Positive	COLE		02/25/2021

< 1 >

Select patient name to see details of submitted report or print the report.

# Troubleshooting

Assistance is available



# Troubleshooting

If you are unable to sign in (e.g. password reset, website error, etc.) contact the EpiTrax Help Desk for troubleshooting assistance by emailing [epitrax@health.mo.gov](mailto:epitrax@health.mo.gov) .

# Looking for help?

Contact the EpiTrax Helpdesk with questions:  
Telephone: (573) 526-9533  
Email: [EpiTrax@health.mo.gov](mailto:EpiTrax@health.mo.gov)

