

东北大学师生健康信息上报平台

Northeastern University Health Information Reporting Platform

使用说明

Instruction Manual

信息化建设与网络安全办公室

Information Construction and Network Security Office

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1 用户登录（user login）

1.1 电脑登录方式（Computer login method）

师生可以通过使用浏览器【建议使用火狐、IE（9.0 及以上）、谷歌、360 浏览器（极速模式）】登录东北大学办事服务大厅（网址 <https://ehall.neu.edu.cn>），在推荐服务中选择“健康信息上报”服务，点击“我要办理”按钮，经过统一身份认证登录，登录师生健康信息上报平台。

Teachers and students can use the browser [recommended to use Firefox, IE (9.0 and above), Google, 360 browser (speed mode)] to log in to the service hall of Northeastern University (website <https://ehall.neu.edu.cn>), Select the "Health Information Reporting" service from the recommended services, click the "apply" button, log in with unified identity authentication, and log in to the teacher and student health information reporting platform.



1.2 手机登录方式（Mobile login method）

师生也可以通过智慧东大 APP 或东北大学微信企业号登录师生健康信息上报平台。

Teachers and students can also log in to the teacher and student health information reporting platform through the Smart Dongda App or the WeChat Enterprise Account of Northeastern University.



2 上报人基本信息（Basic information of the reporter）

登录平台后，需要选择是否本人上报还是代人上报，代人上报一般是上报人不具备填报条件，可委托他人进行代为填报。

对于首次填报，需要填写上报人基本信息，对于学校数据中心已有的数据，由系统实现自动填报，该部分数据无法修改。其他数据需要上报人或代报人填写。当上报人第二次上报时，平台自动读取，不必再填写。

After logging in to the platform, you need to choose whether to submit the report in person or on your behalf. Generally, the person who reports on behalf of the reporter does not have the qualifications to fill in the report.

For the first time, you need to fill in the basic information of the reporter. For the data already in the school data center, the system will automatically complete the report. This part of the data cannot be modified. Other data needs to be filled in by the reporter or the reporter. When the reporter submits the report for the second time, the platform reads it automatically and does not need to fill it in again.

上报人基本信息包括：学工号、姓名、性别、出生日期、证件类型、证件号码、联系电话、所属单位/学院、身份类型、职务（教职工、聘用人员、其他人员等填写）、所属班级（本科生、硕士研究生、博士研究生等填写）、紧急联系人姓名（不能为上报人）、紧急联系人电话（不能为上报人）。

Basic information of the reporter includes: student ID, name, gender, date of birth, certificate type, certificate number, contact phone number, affiliation / college, identity type, position (filled by faculty, staff, other personnel, etc.), class (Fill in for undergraduate students, graduate students, doctoral students, etc.), name of emergency contact (cannot be reporter), telephone number of emergency contact (not reporter).

请注意：标有*的数据项为必填项，请务必填写，否则，无法上报。(以下各项相同)

Please note: The data items marked with * are required fields, please be sure to fill them, otherwise, they cannot be reported. (The following items are the same)

3 上报人健康信息（Reporter's health information）

上报人需要选择目前身体状况类型，按照实际情况填写上报人健康信息。

目前身体情况类型包括：正常、呼吸道可疑症状、未发热且隔离、发热且隔离、疑似、确诊、疑似转排除、已治愈。

The reporter needs to select the type of current physical condition and fill in the health information of the reporter according to the actual situation.

The current types of physical conditions include normal, suspicious respiratory system, non-fever and isolated, fever and isolated, suspected, confirmed, suspected but ruled out, and cured.

上报人健康信息 The Health Information of the Reporter 收起

目前身体状况(Status)*必填 (required)

☐ 正常(Normal)

☐ 呼吸道可疑症状(Suspicious respiratory system)

☐ 未发热且隔离(No fever and Quarantined)

☐ 发热且隔离(Quarantined with a fever)

☐ 疑似(Suspected Case)

☐ 确诊(Confirmed Case)

☐ 疑似转排除(Excluded from a Suspected Case)

☐ 已治愈(Cured)

隔离方式(Quarantine Type)*必填 (required)

☐ 自我隔离(Self Quarantine)

☐ 强制隔离(Forced Quarantine)

隔离时间(The Starting Time of the Quarantine)*必填 (required)

隔离地点(The Location of Quarantine)*必填 (required)

隔离地点(The Location of Quarantine)*必填 (required)

☐ 居家隔离(Home Quarantine)

☐ 集中隔离(Collective Quarantine)

当前体温(Current Body Temperature)*必填 (required)

☐ ≤37.3°C ☐ >37.3°C

持续时间(Duration of this Temperature)*必填 (required)

是否咳嗽(Do you Cough?)*必填 (required)

☐ 是(Yes) ☐ 否(No)

密切接触人员信息(Information of the Close Contact)*必填 (required)

上报人当前位置信息 Reporter current location information 收起

3.1 正常 (normal)

当选择目前身体状况为“正常”时，无需上报其余健康信息。

When the current physical condition is selected as "normal", there is no need to report the remaining health information.

上报人健康信息

收起

The Health Information of the Reporter

目前身体状况(Status)*必填 (required)

☒ 正常(Normal)

☐ 呼吸道可疑症状(Suspicious respiratory sy

☐ 未发热且隔离(No fever and Quarantined)

☐ 发热且隔离(Quarantined with a fever)

☐ 疑似(Suspected Case)

☐ 确诊(Confirmed Case)

☐ 疑似转排除(Excluded from a Suspected C

☐ 已治愈(Cured)

3.2 呼吸道可疑症状、未发热且隔离、发热且隔离(suspicious respiratory system , non-fever and isolated, fever and isolated)

当选择目前身体状况为“呼吸道可疑症状”、“未发热且隔离”或“发热且隔离”时，上报人健康信息包括：隔离方式（“自我隔离”或“强制隔离”二选一）、隔离时间（指开始隔离的时间）、隔离地点（“居家隔离”或“集中隔离”二选一）、当前体温、持续时间、是否咳嗽、密切接触人员信息（可新增多条信息）。

When the current physical condition is selected as "suspicious respiratory system, not-fever and isolated" or "heaty and isolated", the health information of the reporter includes: isolation method (either "self-isolation" or "forced isolated"), isolation time (referring to the isolation Time), quarantine location (choose one of "home quarantine" or "collective quarantine"), current temperature, duration, cough, and close contact with personnel information (multiple pieces of information can be added).

解释：强制隔离为被医学单位、政府机构强制要求的隔离，自我隔离为个人或应学校要求在家、寝室或指定地方的观察隔离。

Explanation : Mandatory quarantine is quarantine required by medical units and government agencies, and self-isolation is observation quarantine at home, in a bedroom or at a designated place by an individual or at the request of a school.

上报人健康信息 收起
The Health Information of the Reporter

目前身体状况(Status)*必填 (required)

☐ 正常(Normal)

☒ 呼吸道可疑症状(Suspicious respiratory symptoms)

☐ 未发热且隔离(No fever and Quarantined)

☐ 发热且隔离(Quarantined with a fever)

☐ 疑似(Suspected Case)

☐ 确诊(Confirmed Case)

☐ 疑似转排除(Excluded from a Suspected Case)

☐ 已治愈(Cured)

隔离方式(Quarantine Type)*必填 (required)

☐ 自我隔离(Self Quarantine)

☐ 强制隔离(Forced Quarantine)

隔离时间(The Starting Time of the Quarantine)*必填 (required)

隔离地点(The Location of Quarantine)*必填 (required)

隔离地点(The Location of Quarantine)*必填 (required)

☐ 居家隔离(Home Quarantine)

☐ 集中隔离(Collective Quarantine)

当前体温(Current Body Temperature)*必填 (required)

☐ ≤37.3°C ☐ >37.3°C

持续时间(Duration of this Temperature)*必填 (required)

天(Day)

是否咳嗽(Do you Cough?)*必填 (required)

☐ 是(Yes) ☐ 否(No)

密切接触人员信息(Information of the Close Contact)*必填 (required)

上报人当前位置信息 收起
Reporter current location information

3.3 疑似(suspected)

当被医学机构认定为新型冠状病毒感染的肺炎疑似病例，请选择“疑似”，上报人健康信息包括：隔离方式、确认疑似时间、就诊医院、当前体温、持续时间、是否咳嗽、密切接触人员信息（可新增多条信息）。

When the reporter is suspected to be infected with a new type of coronavirus is identified by a medical institution, please select "Suspect". The health information of the person reporting includes isolation method, time of confirmation, hospital, current temperature, duration, cough, close contact information (Multiple pieces of information can be added).

上报人健康信息

The Health Information of the Reporter

收起

目前身体状况(Status)*必填 (required)

☐ 正常(Normal)
 ☐ 呼吸道可疑症状(Suspicious respiratory symptoms)
 ☐ 未发热且隔离(No fever and Quarantined)
 ☐ 发热且隔离(Quarantined with a fever)
 ☒ 疑似(Suspected Case)
 ☐ 确诊(Confirmed Case)
 ☐ 疑似转排除(Excluded from a Suspected Case)
 ☐ 已治愈(Cured)

隔离方式(Quarantine Type)*必填 (required)

☐ 自我隔离(Self Quarantine)
 ☐ 强制隔离(Forced Quarantine)

疑似时间* (必填)

When were you identified as a suspected case* (required)

选择日期时间

就诊医院* (必填)

就诊医院* (必填)

The hospital where you received treatment* (required)

当前体温(Current Body Temperature)*必填 (required)

☐ $\leq 37.3^{\circ}\text{C}$
☐ $> 37.3^{\circ}\text{C}$

持续时间(Duration of this Temperature)*必填 (required)

天(Day)

是否咳嗽(Do you Cough?)*必填 (required)

☐ 是(Yes)
 ☐ 否(No)

密切接触人员信息(Information of the Close Contact)*必填 (required)

上报人当前位置信息

Reporter current location information

收起

3.4 确诊(confirmed)

当被医学机构认定为新型冠状病毒感染的确诊病例，请选择“确诊”，上报人健康信息包括：隔离方式、确诊时间、确诊医院、症状、就诊基本情况、当前体温、持续时间、是否咳嗽、密切接触人员信息（可新增多条信息）。

When confirmed by a medical institution as a confirmed case of a new type of coronavirus infection, please select "confirmed". The health information of the reporter includes isolation method, confirmed time, confirmed hospital, symptoms, basic information of the visit, current temperature, duration, cough, Close contact with personnel information (multiple pieces of information can be added).

上报人健康信息

The Health Information of the Reporter

收起

目前身体状况(Status)*必填 (required)

☐ 正常(Normal)
☐ 呼吸道可疑症状(Suspicious respiratory sy
☐ 未发热且隔离(No fever and Quarantined)
☐ 发热且隔离(Quarantined with a fever)
☐ 疑似(Suspected Case)
☒ 确诊(Confirmed Case)
☐ 疑似转排除(Excluded from a Suspected C
☐ 已治愈(Cured)

隔离方式(Quarantine Type)*必填 (required)

☐ 自我隔离(Self Quarantine)
☐ 强制隔离(Forced Quarantine)

确诊时间(When were you confirmed) *必填 (required)

确诊医院* (必填)

The hospital where you were

确诊医院* (必填)

The hospital where you were confirmed* (required)

症状、就诊基本情况* (必填)

Basic information about your symptoms and treatment* (required)

当前体温(Current Body Temperature)*必填 (required)

☐ $\leq 37.3^{\circ}\text{C}$
☐ $> 37.3^{\circ}\text{C}$

持续时间(Duration of this Temperature)*必填 (required)

天(Day)

是否咳嗽(Do you Cough?)*必填 (required)

☐ 是(Yes)
☐ 否(No)

密切接触人员信息(Information of the Close Contact)*必填 (required)

3.5 疑似转排除(suspected but ruled out)

当被医学机构认定为排除新型冠状病毒感染的肺炎疑似病例嫌疑，请选择“疑似转排除”，上报人健康信息包括：隔离方式、确诊时间、确诊医院、症状、就诊基本情况、当前体温、持续时间、是否咳嗽、密切接触人员信息（可新增多条信息）。

When a medical institution determines that a suspected case of pneumonia that excludes a new type of coronavirus infection is suspected, please select "suspect transfer" and report the health information of the person including: isolation method, diagnosis time, confirmed hospital, symptoms, basic conditions of the visit, current temperature, continuous Time, cough, close contact with personnel information (multiple pieces of information can be added).

上报人健康信息

The Health Information of the Reporter

收起

目前身体状况(Status)*必填 (required)

☐ 正常(Normal)
 ☐ 呼吸道可疑症状(Suspicious respiratory symptoms)
 ☐ 未发热且隔离(No fever and Quarantined)
 ☐ 发热且隔离(Quarantined with a fever)
 ☐ 疑似(Suspected Case)
 ☐ 确诊(Confirmed Case)
 ☒ 疑似转排除(Excluded from a Suspected Case)
 ☐ 已治愈(Cured)

隔离方式(Quarantine Type)*必填 (required)

☐ 自我隔离(Self Quarantine)
 ☐ 强制隔离(Forced Quarantine)

疑似转排除时间* (必填)

When were you excluded from the suspected cases* (required)

当前体温(Current Body Temperature)*必填

(required)

☐ ≤37.3°C
 ☐ >37.3°C

持续时间(Duration of this Temperature)*必填

(required)

天(Day)

是否咳嗽(Do you Cough?)*必填 (required)

☐ 是(Yes)
 ☐ 否(No)

密切接触人员信息(Information of the Close Contact)*必填 (required)

3.6 已治愈(cured)

当被医学机构认定为治愈出院的，请选择“已治愈”，上报人健康信息包括：隔离方式、治愈时间、已治愈说明、当前体温、持续时间、是否咳嗽、密切接触人员信息（可新增多条信息）。

When the medical institution determines that the patient can leave the hospital, please select "cured". The health information of the reporter includes isolation method, time of cure, description of cure, current temperature, duration, cough, and information on close contacts (can be added Multiple messages).

The screenshot displays the 'Reporter Health Information' (上报人健康信息) and 'Recovery Statement' (已治愈说明) sections of the reporting platform.

上报人健康信息 (The Health Information of the Reporter):

- 目前身体状况(Status)*必填 (required):**
 - ☐ 正常(Normal)
 - ☐ 呼吸道可疑症状(Suspicious respiratory symptoms)
 - ☐ 未发热且隔离(No fever and Quarantined)
 - ☐ 发热且隔离(Quarantined with a fever)
 - ☐ 疑似(Suspected Case)
 - ☐ 确诊(Confirmed Case)
 - ☐ 疑似转排除(Excluded from a Suspected Case)
 - ☒ 已治愈(Cured)
- 隔离方式(Quarantine Type)*必填 (required):**
 - ☐ 自我隔离(Self Quarantine)
 - ☐ 强制隔离(Forced Quarantine)
- 治愈时间(Time of Recovery)*必填 (required):**

📅 选择日期时间
- 已治愈说明(Recovery Statement)*必填 (required):**

已治愈说明(Recovery Statement)*必填 (required):

当前体温(Current Body Temperature)*必填 (required):

☐ ≤37.3°C ☐ >37.3°C

持续时间(Duration of this Temperature)*必填 (required):

天(Day)

是否咳嗽(Do you Cough?)*必填 (required):

☐ 是(Yes) ☐ 否(No)

密切接触人员信息(Information of the Close Contact)*必填 (required):

+ 添加密切接触人员 (Enter More Close Contact Person)

上报人当前位置信息 (Reporter current location information):

4 上报人当前位置信息(Reporter current location information)

上报人需要选择位置是否有变化，如“无变化”，默认为首次录入的位置信息；如“有变化”，需要额外填写“当前位置信息”。

The reporter needs to choose whether the location has changed, such as "no change", the default is the location information entered for the first time; if "has changed", it is necessary to additionally fill in location information of the day".

提示：对于首次上报时，需要录入本人当前位置信息(国家、省、市)。

Tip: For the first time to report, you need to enter your current location information (country, current province / city).

上报人当前位置信息

收起

Reporter current location information

国家(Country)*必填 (required)

请选择

▼

当前所在省市* (必填)

Current Province / City* (required)

当前所省市(Current Province / City)

5 上报人昨日行程信息(Reporter Yesterday's itinerary information)

上报人昨日是否有跨市行程，默认为“无”。如果有请点击“有”。

If the reporter has any cross-city itinerary yesterday, the default is "none". If so, click "yes".

如果有昨日行程，请输入昨日行程的信息（可新增多条），行程信息包括：出发地、离开日期、目的地、抵达日期、交通工具、车次/航班号/车牌号。

If there is a change of location on the yesterday, please enter the information of the yesterday's itinerary (multiple items can be added). The itinerary information includes: departure, departure date, destination, arrival date, transportation, train number / flight number / number plate.

上报人昨日行程信息

收起

Reporter Yesterday's Itinerary Information

昨日是否有跨市行程(Is there a cross-city itinerary yesterday)*必填 (required)

☒ 无(No)

☐ 有(Yes)

⊕ 添加昨日行程详细信息

(Add More Yesterday's Travel Information)

出发地(Departure From)*必填(required)

请选择

离开日期(Departure date)*必填(required)

目的地(Destination)*必填(required)

请选择

抵达日期(Arrival date)*必填(required)

交通工具(Transportation)*必填(required)

请选择

车次/航班号/车牌号(Train number / Flight number / The number of the automobile)*必填(required)

6 其他需要说明的事项(Other things to explain)

如上报人有其他需要说明的事项，可在下方表格处填写。

If the reporter has other matters that need to be explained, they can fill in the form below.

7 上报(Escalation)

上报人信息填写完毕后，点击“上报”按钮进行提交，提示“上报成功”即可。

After the information of the reporter is filled in, click the "Report" button to submit, and it will prompt "Report successful".

如提示“上报失败”，应按照页面中红色提示信息进行修改。

If the message "Report failure" is displayed, modify it according to the red prompt on the page.

8 其他(Other)

如使用中有不详之处，请与信息化建设与网络安全办公室联系,联系电话：024-83687240

If there is any unknown in use, please contact the Information Construction and Network Security Office at 024-83687240.