

DAVE™
One Integrated System for All
Your Vital Record Business Needs



Database Application for Vital Events
A LexisNexis® Product

LexisNexis VitalChek Network, Inc.
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Brentwood, TN 37027

Maine
Death Module
Medical Facility User
Training Exercises

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Section 1: General DAVE™ Navigation

Exercise 1.1 – Logging Into DAVE™

Skill Learned: How to log into the **DAVE™** application.

1. Double click the **DAVE™** icon on your desktop or select **DAVE™** from the Favorites Bookmark) from within your web-browser.
2. Enter your **User Name** and **Password**.
3. Click the **Login** button.



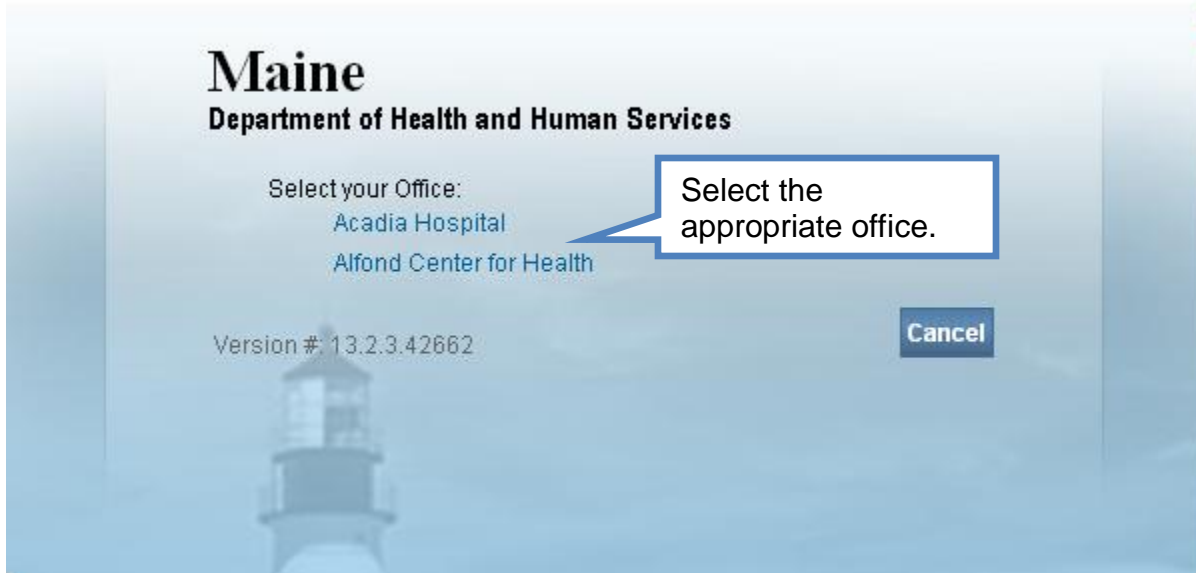
Maine
Department of Health and Human Services

Username: Password:

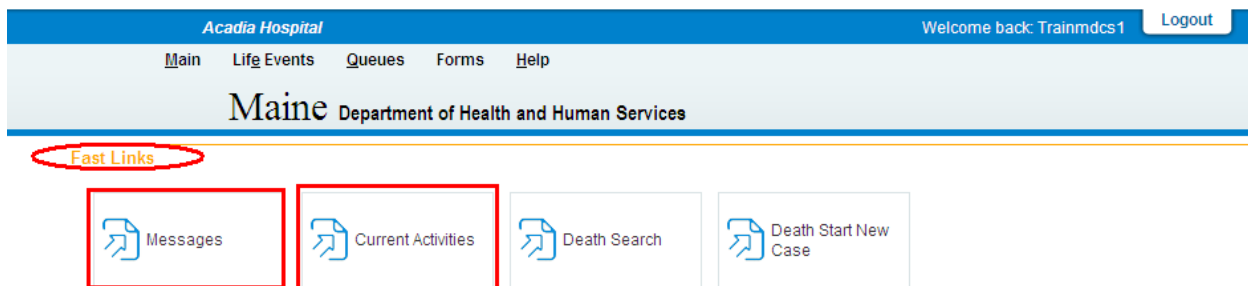
Version #: 13.2.3.42662 [Login](#)

[Forgot your password?](#)

4. If your **User Name** is associated with more than one office or location, then you must also make a selection from the office list if you are associated with more than one office.



5. You should now be logged into the **DAVE™** application **Home** page with the **Current Activities** and **Messages** Fast Links displayed.



Exercise 1.2 – Messages

Skill Learned: Basic Navigation within the **Messages** window.

The **Messages** Fast Link is one of two Fast Links that displays upon logging into **DAVE™**. Select the **Messages** fast link to open the **Messages** window. Some **Messages** are text messages sent from one system user to another, while others are automatically system generated during the registration process.

The **Messages** window is a grid that displays all of the messages that have been sent to the user or current office (the office selected at login.) To read a message, click the blue hyperlink in the **From** column. The **Message Text** column displays all or a portion of the message that was sent, depending on message length. **Date Sent** displays the date and time the message was sent. Notice that the **Remove from List** button is initially grayed out or disabled.

1. Click any of the blue hyperlinks in the **From** column of the **Messages** window to read that particular message.

Messages Send Message Remove from List

From	Message Text	Date Sent	<input type="checkbox"/>
Cecile Sprout	Case 37837 - Approved Martin Mann	9/9/2013 8:38:23 AM	<input type="checkbox"/>

Total records : 1

2. The **Message** window is a popup that appears on top of the **DAVE™** page. After reading the message, click the **Close** button.

Message ×

Message

From: Cecile Sprout
 Sender Office: Office of Vital Records
 Subject: Registration Registered
 Date Sent: Monday, September 09, 2013
 Message Text: Case 37837 - Approved Martin Mann

Close

3. Place a checkmark in the checkbox next to the **Date Sent** column header.

Messages Send Message Remove from List

From	Message Text	Date Sent	<input checked="" type="checkbox"/>
Cecile Sprout	The amendment submitted for: 54415 ; David Drake, Event Date: Aug-21-2014 has been Approved.	8/21/2014 12:31:35 PM	<input checked="" type="checkbox"/>
Cecile Sprout	An Amendment has been submitted for approval for: Case Id: 54415 ; David Drake, Date of Death: Aug-21-2014.	8/21/2014 12:31:09 PM	<input checked="" type="checkbox"/>

4. Notice that the **Remove from List** button is now active. Clicking the **Remove from List** button with the **Date Sent** checkbox selected will delete all selected messages from the list.

Note: Deleted messages cannot be restored. Do not delete messages unless you are sure that you will not need them.

- Remove the checkmark from the checkbox next to the **Date Sent** column header and place a checkmark in any of the boxes next to a single message.
- Click the **Remove from List** button to remove a single message from the list.

Messages

Send Message Remove from List

From	Message Text	Date Sent	<input type="checkbox"/>
Cecile Sprout	Case 37837 - Approved Martin Mann	9/9/2013 8:38:23 AM	<input checked="" type="checkbox"/>

Total records : 1

Send Messages

- To send a message, click the **Messages** fast link.

Messages

Send Message Remove from List

From	Message Text	Date Sent	<input type="checkbox"/>
Cecile Sprout	Case 37837 - Approved Martin Mann	9/9/2013 8:38:23 AM	<input checked="" type="checkbox"/>

Total records : 1


Acadia Hospital


Main Life Events Queues Forms


Maine Department of Health and Human Services
Maine People Living Safe, Healthy and Productive Lives

Fast Links

Messages fast link

 Messages

 Current Activities

- The Message box will open. Click the **Send Message** button.

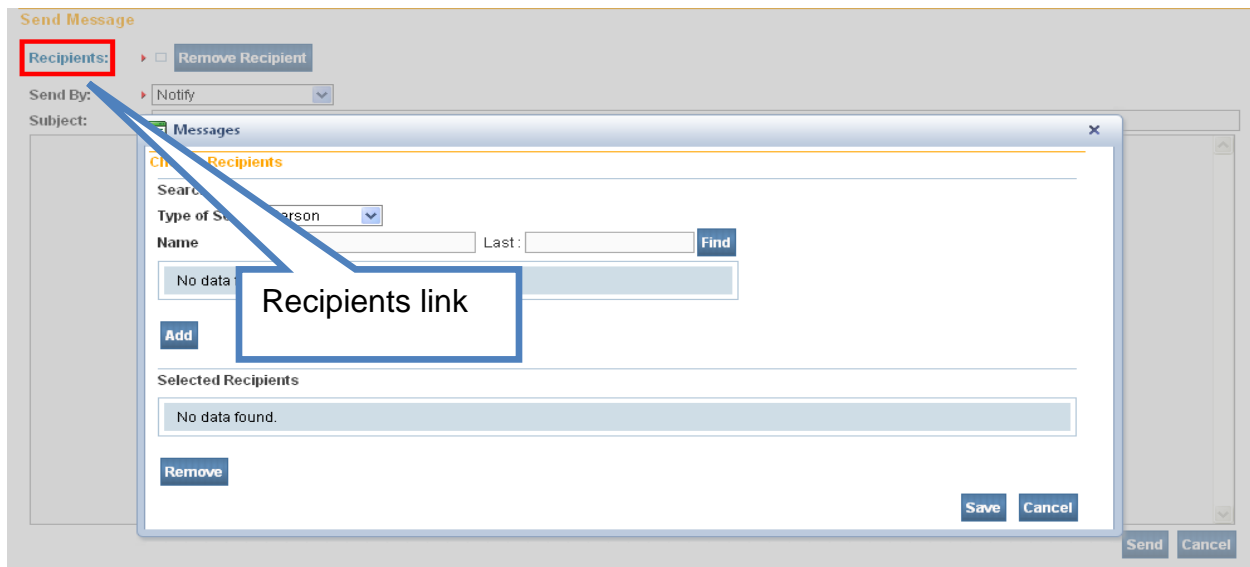
Messages

Send Message Remove from List

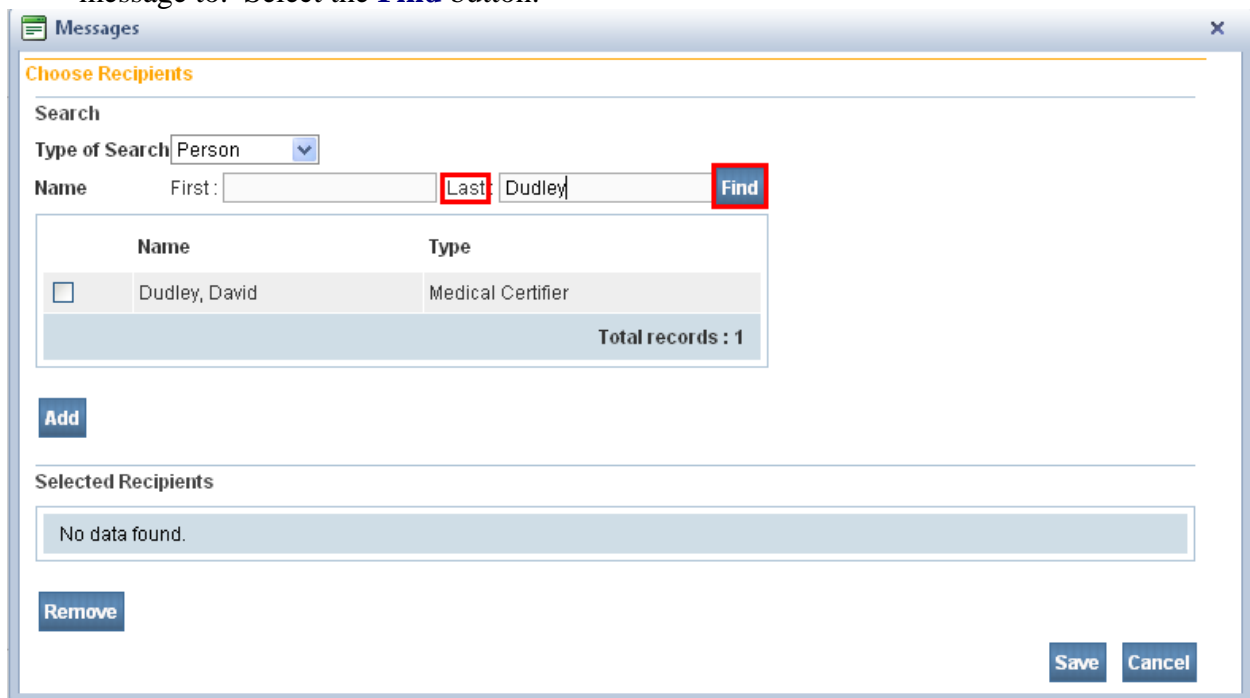
From	Message Text	Date Sent	<input type="checkbox"/>
Med Exams	Case Id: 54274 - Jane Smith, Date of Death: Jul-17-2014 has been reviewed. This referral action for this case was: Accept Referral.	7/18/2014 10:39:11 AM	<input type="checkbox"/>
Cecile Sprout	Case 54262 - Appr	7/14/2014 1:29:46 PM	<input type="checkbox"/>

Send Message button

- The **Send Message** box will open. Click the **Recipients** link to open the **Choose Recipient** box.



4. In the **Choose Recipients** box, type in the Last name of the user you wish to send a message to. Select the **Find** button.



5. Place a checkmark in the checkbox next to the name of the person you wish to send a message to.
6. Click the **Add** button.
7. Click the **Save** button.

Messages

Choose Recipients

Search

Type of Search Person

Name First: Last: Dudley Find

	Name	Type
<input type="checkbox"/>	Dudley, David	Medical Certifier

Total records : 1

Add

Selected Recipients

No data found.

Remove

Save Cancel

Messages

Choose Recipients

Search

Type of Search Person

Name First: Last: Dudley Find

	Name	Type
<input checked="" type="checkbox"/>	Dudley, David	Med

Add

Selected Recipients

	Name	Type
<input type="checkbox"/>	Dudley, David	Medical Certifier

Total records : 1

Remove

Save Cancel

The **Choose Recipients** box will expand and show you a list of **Selected Recipients**.

Messages

Choose Recipients

Search

Type of Search: Person

Name: First: [] Last: Dudley **Find**

Name	Type
<input checked="" type="checkbox"/> Dudley, David	Medical Certifier

Total records : 1

Add

Selected Recipients

Name	Type
<input type="checkbox"/> Dud	Medical Certifier

Total records : 1

Remove

Save **Cancel**

8. Should you wish to remove any recipients, place a checkmark in the checkbox next to the recipient's name, and click the **Remove** button. Then, click the **Save** button.
9. You will be returned to the **Send Message** screen. Select the **Send By** dropdown. Select one of the three available methods you wish this message to be received.

Send Message

Recipients:

Name	Type
<input type="checkbox"/> Dudley, David	Medical Certifier

Remove Recipient

Send By: **Notify**

Subject: **Email and Notification**

Type message here.

Send **Cancel**

Available methods to send messages:
 1) By email and notification (internal message);
 2) Email only; and,
 3) Notify (internal message only)

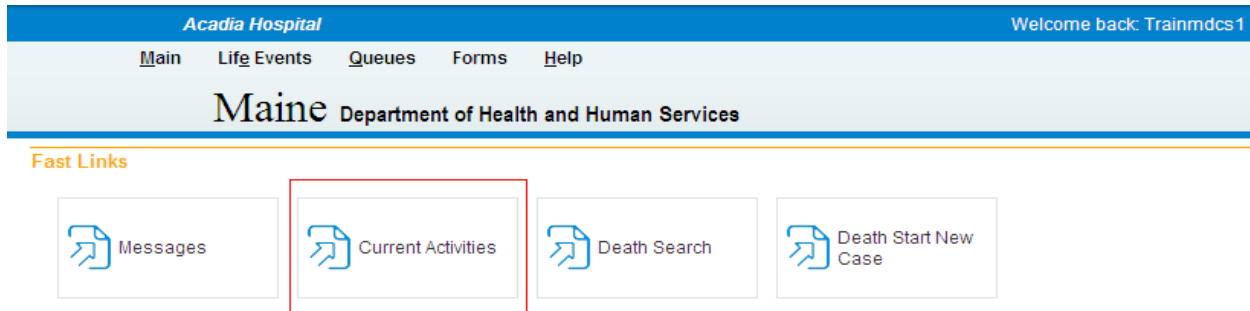
10. Type in a subject. Then, type in your message. Click the **Send** button.

Exercise 1.3 – Current Activities

Skill Learned: Basic navigation within the **Current Activities** pane.

The **Current Activities** is another Fast Link that displays upon logging into **DAVE™**.

1. Select the **Current Activities** Fast Link to open the **Current Activities** window.



The **Current Activities** window displays a listing of the **Queues** that contain records requiring immediate attention. In the example below, there is 1 record in the [Certification Required](#) queue needing attention. This record is 21 days old.

2. Click the [Certification Required](#) link (or other **Queue Name** link) to open the **Search by Registration Work Queue** page allowing access to the record(s) in the queue.

Current Activities

Queue Name	Type ↓	Count	Age of Oldest in Days
Certification Required	Death	1	21
Total Queues : 1			

3. Review the various fields on the **Search by Registration Work Queue**. We will look at how to access and edit records in the **DAVE™** application elsewhere in these exercises.

Search by Registration Work Queue

Queue: Search Type: Value:
Display: rows per page. Filter:

All	Case Id	File Number	Registrant	Date of Event ↑	Data Provider
<input type="checkbox"/>	38045		Thimble, Paul	Oct-09-2013	
Total records : 1					

Actions: Register Event, Abandon Case, Certify Registration
Add: Comments
Print

4. Click the **Return** button to close this page and return to the **Home** page.

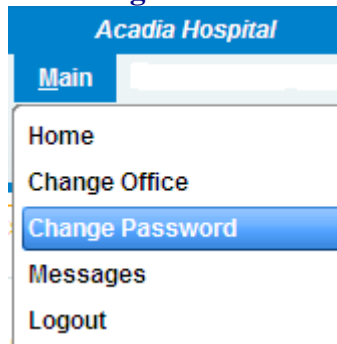
Exercise 1.4 – Change/Forgot Password

Skill Learned: How to change your **DAVE™** system password.

The Application Support Specialist will provide you with a password that will enable you to log into **DAVE™**. This is a temporary password that must be changed when you login for the first time.

Change your password:

1. From the **Home** page, select **Main -> Change Password**.



2. Enter your old or temporary password into the **Old Password** text entry box.
3. Enter your new password into the **New Password** text entry box. Passwords must be at least 8 characters in length and should be a combination of letters, numbers, uppercase and lowercase characters.

Change Password

Time left before your password expires: 39 Days, 9 Hours, 39 Minutes

Old Password:

New Password:

Confirm Password:

Security Question:

Security Answer:

4. Re-enter the new password in the **Confirm Password** text entry box. Note: you must enter the exact same password both times.
5. Answer the **Security Question** and **Security Answer**.
6. Click the **Save** button.

Forgot your Password

1. At the Login screen, type in your **Username**.
2. Click the [Forgot your password?](#) link.

Maine
Department of Health and Human Services

Username: Password:

Version #: 13.2.3.42662

[Forgot your password?](#)

3. Type in your username and code from the image as shown below.

Request New Password

To reset your password, enter your Username and the characters in the picture below.

Username:



Type the code from the image

4. Select the **Next** button.
5. At “Please answer your security question below”, type in the answer to the security question you completed earlier in Step 5 above of the “Change Your Password” section.

Request New Password

Please answer your security question below.

What is your favorite color?

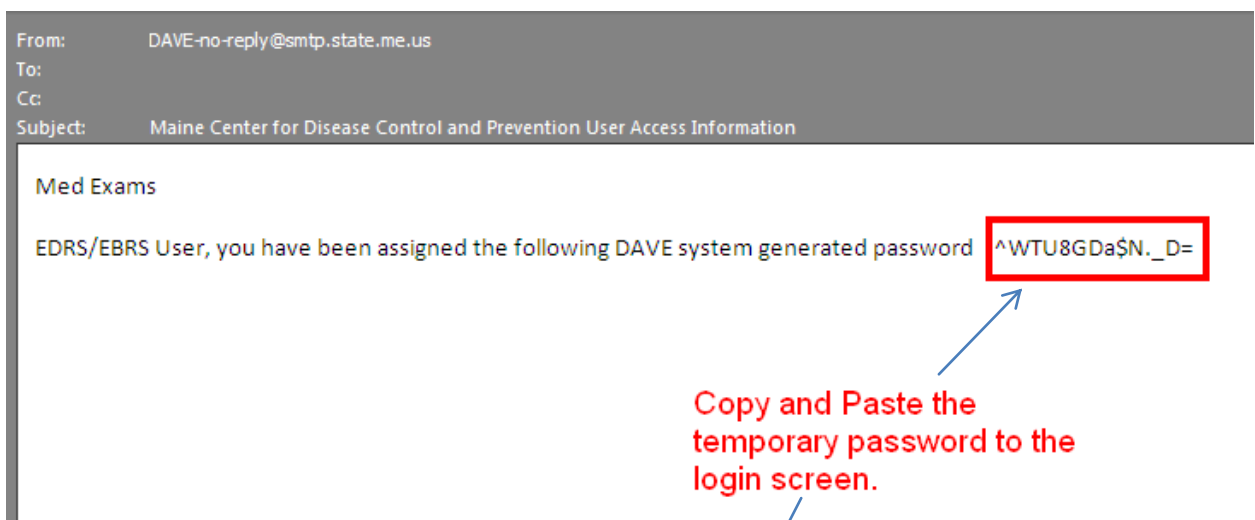
6. Select the **Next** button.
7. A message will appear stating a temporary password has been sent to your email address.

Request New Password

Password Request Successful. A temporary password has been sent to your email address.

Continue

8. Select **Continue**.
9. You will be returned to the Login screen.
10. Retrieve the automated email message with the temporary password.



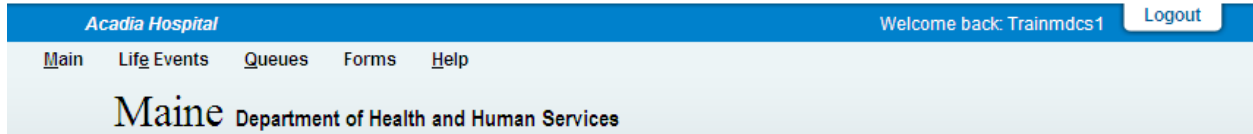
11. Copy and paste (or type in) the temporary password onto your login screen.



Exercise 1.5 – Logging out of DAVE™

Skill Learned: How to Log out of the **DAVE™** application.

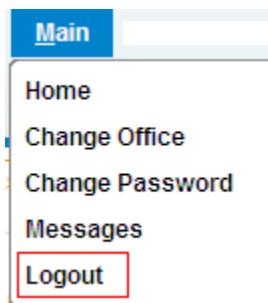
1. Locate and select the **Logout** button in the upper right corner of the **DAVE™** page.

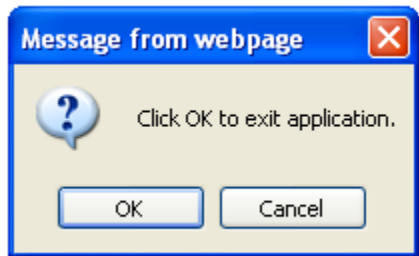


The Login screen will appear.



Or, another way to logout of **DAVE™** is to select the Logout link from the **Main Menu**. **DAVE™** will prompt you to make sure you intend to exit the system. Click **OK** to log out of **DAVE™** or **Cancel** to remain in the application.





2. From the Login menu below you can to return to the **DAVE™** Home page.



Section 2: Page Controls and Features

Exercise 2.1 – Dropdown Lists

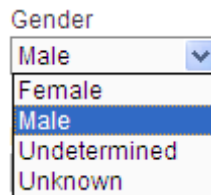
Skill Learned: How to navigate through **DAVE™** using the various fields and icons.

Dropdown lists provide you with a pre-defined list of choices. This eliminates the need to manually type in data, prevents inappropriate data from being entered, and prevents spelling errors.

1. One of the first dropdown lists you are likely to encounter is the **Gender** dropdown list on the main **Start/Edit New Case** page. To view all options in the list, click the down-arrow on the right side of the field.



2. Notice that clicking the down arrow will reveal the list of options that can be selected from to populate the field. Some dropdown lists will have more selectable options than can be displayed on one page. In those cases, a scroll bar will appear on the left side of the list.



3. It is possible to select an option from the list without actually dropping the list down. If you already know the option you want to select, just tab to the dropdown, and type the first letter of the name of the option.



Note: If more than one word in the list starts with the same letter, typing that letter again will scroll through the list for you.

4. Once the list is highlighted, it is possible to navigate up and down through the list using the directional arrow keys on your keyboard.



With the list highlighted and "Female" selected, press the down-arrow button on the keyboard.



Pressing the down-arrow with "Female" highlighted scrolls down the list to "Male". Now press the up-arrow button.



Pressing the up-arrow with "Male" highlighted scrolls back up the list to "Female".

Exercise 2.2 – Standard Date Format

Skill Learned: How to properly enter dates into the **DAVE™** system. While processing death registrations, you will frequently be inputting dates. **DAVE™** allows you much flexibility in using several different date formats.

1. Practice entering dates using the various allowable formats shown below. Note the date format displayed is always the same regardless of the format entered.

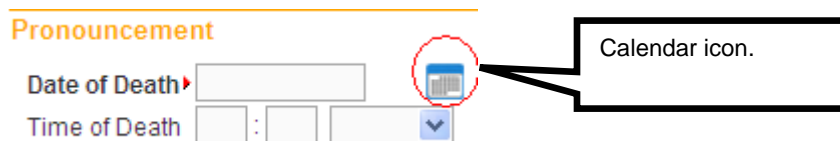
	If user enters:	System will display:
MM-DD-YYYY:		
MM/DD/YYYY:		
MMDDYYYY:		
MONDDYYYY:		

Note: In all cases a 2 digit must be entered for the Month and Day, and 4 digits for Year. The only exception is the MonDDYYYY format that allows the entry of a 3-letter abbreviation for the Month. The MonDDYYYY format also supports Mon/DD/YYYY and Mon-DD-YYYY formats.

Exercise 2.3 – Using Calendars

Skill Learned: How to use the **Calendar** control to input dates without entering them in manually.

1. In addition to manual date entry, you can also click the **Calendar icon** next to a date entry box to bring up a **Calendar** control.



Pronouncement

Date of Death ▶ Oct-30-2013

Time of Death

October 2013

Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

Today Clear Cancel

- Once displayed, there are two drop-down lists within the **Calendar** control; one for selecting the month and the other for selecting the year.

Pronouncement

Date of Death ▶

Time of Death

October 2013

January
February
March
April
1 May
2 June
2 July
August
September
October
November
December

Th	Fr	Sa
3	4	5
10	11	12
17	18	19
24	25	26
31		

Cancel

- By default, the current Month, Day, and Year are displayed. Clicking the down arrow next to the month (in this example September) will open the full list. Or, type the first letter of a month can be typed for quick select or the up and down arrows on the keyboard can be used to scroll to the desired selection.

Selection of any day of any month will populate that date in the corresponding **Date Entry** text box in the MON-DD-YYYY format. For example, using “May” and “2009” in the dropdown lists and clicking on “27” will display the date format.

Date Entry Shortcut: Place the cursor inside a date field and press the F12 button on your computer keyboard. Pressing F12 will automatically populate the date field with the current system date.


Exercise 2.4 – Lookup Controls

Skill Learned: How to use **Lookup Controls** that launch **Lists of Values** that display a grid of selectable data.

- On the **Certifier** page shown in the example below, locate the **Lookup** button. The **Lookup** control appears onscreen as a magnifying lens (🔍). Click the **Lookup** control to launch the **Name** search field.

Certifier

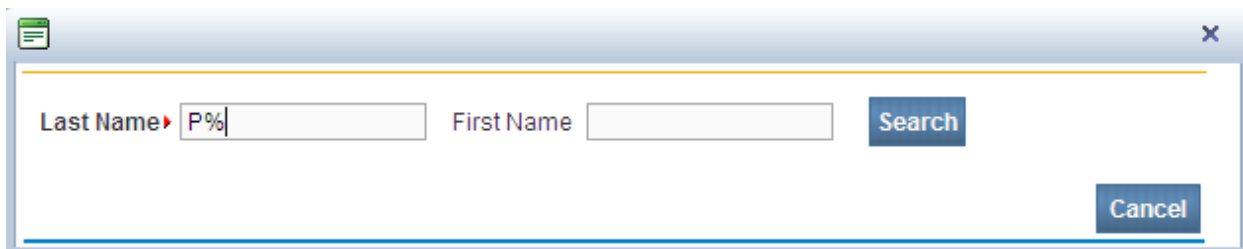
Certifier Type
License Number
Lookup Intern

Clicking the lookup control () will launch the List of Values search page

Certifier Name

First Middle Last Suffix
Title Other Specify

- If the exact certifier name is known, enter the first and last name and click the **Search** button. The **Last Name** field also supports Wild Card searches. Entering the letter “P” with a trailing percent sign (%) character and clicking **Search** will return a list of all potentially matching attendants with last names that begin with the letter “P.” Note that **First Name** is not a required field.



Last Name First Name

- The **List of Values** (LOV) below lists all of the physicians in the system beginning with the letter “P”. Click the [Select](#) link next to any corresponding names to auto-populate the physician’s name and address fields on the **Certifier** page.

☰
✕

Last Name ▶

First Name

Search

License Number	Last Name	Suffix	First Name	Middle Name	Street Number	Street Name	
6440	Page		Lyman	A			select
13114	Painter		David	M			select
838	Painter	Jr	John	W			select
808	Painter	Jr	Stanley	L			select
15247	Pakiam		Anthony	S			select
81369	Palmer		Cynthia	J			select
81818	Palmer		Jens	Kersten			select
15118	Panesar		Gunjan				select
14347	Panesar		Ravinder	S			select
1956	Papura		William	A			select

First
1
2
3
4
5
6
7
8
9
10
...
Last
Total records : 127

Cancel

4. The **Certifier Name and Address** tab is now complete.

Certifier

Certifier Type

License Number Lookup Intern

Certifier Name

First Middle Last Suffix

Title Other Specify

Certifier Address

Edit Certifier Address



Street Number Pre Directional Street Name, Rural Route, etc. Street Designator Post Directional Apt #, Suite #, etc.

City or Town State Country Zip Code

Date Signed

Validate Page
Clear
Save
Return

Exercise 2.5 – Clear Data Controls

Skill Learned: In the previous exercise, we saw how to use the **Lookup** control () to quickly locate a provider and enter that provider's data into a record. The **Clear** button (), is used to clear data from a page.

1. Locate and click the **Clear** button.

Certifier

Certifier Type

License Number

Certifier Name

First	Middle	Last	Suffix
David	M	Painter	

Title Other Specify

The **Clear** button is used to erase data from onscreen controls.

2. **DAVE™** displays a warning message. Select **OK** to clear the facility data or **Cancel** to keep the data as displayed.

Certifier Name

First	Middle	Last
David	M	Painter

Title

Certifier Address

Edit Certifier Address

Pre Street Number Direction

Message from webpage

Are you sure you want to clear the Certifier data?

3. Selecting **OK** above will clear the certifier name and address data.

Section 3: Record Validation

Exercise 3.1 – Status Bar

Skill Learned: How to use the **Status Bar** to help you track missing data that can prevent a death record from being properly registered. It is also a valuable tool for tracking the status of a death case.

DAVE™ provides work flow and data quality management through the assignment of statuses. The death registration process consists of several sub-processes that are often completed by different users. In order to track these steps **DAVE™** assigns one or more statuses to the record when an action is performed (e.g., the **Validate Page** button is clicked) or an event occurs (e.g., a validation rule fails).

The initial status assigned to a new electronic death record is **/New Event/New Event/Not Registered/NA/NA/NA**. The goal of all parties in the registration process is to obtain a ‘perfect’ status. A perfect status indicates the highest data quality and completion of all steps in the registration process (e.g. **Personal Valid/Medical Valid/Registered**). Sometimes a death record may contain values which are valid; however, those values cause soft (yellow) edit rule failures (see Exercise 3.2 below for more information on edit rule failures). Therefore, it is also possible to have a registered record with a **Personal Valid with exceptions / Medical Valid with exceptions / Registered** status or any combination of valid and valid with exceptions.

1. The **Status Bar** is viewable from any of the **Death Registration Menu** data entry pages. Simply locate the bar at the top of the page that displays the case number, registrant name, and date of death.

Exercise 3.2 – Record Validation and Error Correction

Skill Learned: How to validate death records and prepare them for registration.

1. Click the **Validate Page** button to validate the registration data entered into the system.

2. When you click the **Validate Page** button, the **Validation Results** frame will list all of the errors associated with that page.

38148 :John Peabody Oct-30-2013

/Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Personal Pending/Medical Pending

Pronouncement

Date of Death ▶ Oct-30-2013 Date of Death Modifier ▶ Actual date of death
Time of Death : : Time of Death Modifier ▶

Validate Page Next Clear Save Return

Validation Results	List All Errors	Save Overrides	Hide
Error Message	Override	Goto Field	Popup
DR_6218: The time of death modifier cannot be left blank. Enter the appropriate modifier for the time of death.	<input type="checkbox"/>	fix	fix
DR_6221: Time of death cannot be left blank. Enter the exact time of death (hours and minutes) according to local time. One minute after 12 midnight is entered as 12:01 a.m. of the new day. If the exact time of death is unknown, the time should be approximated by the person who pronounces death.	<input type="checkbox"/>	fix	fix

3. Initially, the **Validation Results** frame will only display those errors associated with the current registration page. All of the errors in the example below are related to the **Pronouncement** page. However, if you then click the **List All Errors** button,

Will reveal all errors with the entire death registration pages.

Validation Results	List All Errors	Save Overrides	Hide
Error Message	Override	Goto Field	Popup
DR_6218: The time of death modifier cannot be left blank. Enter the appropriate modifier for the time of death.	<input type="checkbox"/>	fix	fix
DR_6221: Time of death cannot be left blank. Enter the exact time of death (hours and minutes) according to local time. One minute after 12 midnight is entered as 12:01 a.m. of the new day. If the exact time of death is unknown, the time should be approximated by the person who pronounces death.	<input type="checkbox"/>	fix	fix

the **Validation Result** frame will refresh and display all of the errors associated with the current registration.

Validation Results		List Page Errors	Save Overrides	Hide
Error Message	Override	Goto Field	Popup	
DR_2566: Medical Certifier type cannot be left blank. Select the appropriate entry to indicate the medical certifier.	<input type="checkbox"/>	fix	Goto	Pop
DR_3002: Interval for line a cannot be left blank. Provide the best estimate of the interval between the presumed onset of each condition and death. The terms 'approximately' and 'unknown' may be used. Do not leave the interval blank. If unknown, enter 'unknown.'	<input type="checkbox"/>	fix	Goto	Pop
DR_4998: Did Tobacco Use Contribute to Death cannot be left blank. Enter a valid value for Did Tobacco Use Contribute to Death.	<input type="checkbox"/>	fix	Goto	Pop
DR_5000: Autopsy Performed cannot be left blank. Enter a valid value for Autopsy Performed. Autopsy Performed must be either 'Yes' or 'No'; it cannot be blank.	<input type="checkbox"/>	fix	Goto	Pop
DR_5011: Referred to ME cannot be left blank. Indicate whether this case was referred to an ME/coroner. All non-natural cases must be referred to a Medical Examiner.	<input type="checkbox"/>	fix	Goto	Pop
DR_5013: Type of Place of Death cannot be left blank. Enter a valid value for the Type of Place of Death. Select an entry from the dropdown list for the Type of Place of Death.	<input type="checkbox"/>	fix	Goto	Pop
DR_6218: The time of death modifier cannot be left blank. Enter the appropriate modifier for the time of death.	<input type="checkbox"/>	fix	Goto	Pop
DR_6221: Time of death cannot be left blank. Enter the exact time of death (hours and minutes) according to local time. One minute after 12 midnight is entered as 12:01 a.m. of the new day. If the exact time of death is unknown, the time should be approximated by the person who pronounces death.	<input type="checkbox"/>	fix	Goto	Pop


List All Errors will change to List Page Errors.

- Notice also that the **List All Errors** button has now become the **List Page Errors** button. Clicking this button again will remove any errors not associated with the current registration page.
- Click the **Hide** button to close the **Validation Results** frame. Re-validate any registration page to view the **Validation Results** frame again.

Validation Results		List Page Errors	Save Overrides	Hide
Error Message			Goto Field	Popup
DR_2566: Medical Certifier type Select the appropriate entry to in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DR_3002: Interval for line a car Provide the best estimate of the interval between the presumed onset of each condition and death. The terms 'approximately' and 'unknown' may be used. Do not leave the interval blank. If unknown , enter 'unknown.'	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DR_4998: Did Tobacco Use Contribute to Death cannot be left blank. Enter a valid value for Did Tobacco Use Contribute to Death.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DR_5000: Autopsy Performed cannot be left blank. Enter a valid value for Autopsy Performed. Autopsy Performed must be either 'Yes' or 'No'; it cannot be blank.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DR_5011: Referred to ME cannot be left blank Indicate whether this case was referred to an ME/coroner. All non-natural cases must be referred to a Medical Examiner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DR_5013: Type of Place of Death cannot be left blank. Enter a valid value for the Type of Place of Death. Select an entry from the dropdown list for the Type of Place of Death.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DR_6218: The time of death modifier cannot be left blank. Enter the appropriate modifier for the time of death.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DR_6221: Time of death cannot be left blank. Enter the exact time of death (hours and minutes) according to local time. One minute after 12 midnight is entered as 12:01 a.m. of the new day. If the exact time of death is unknown, the time should be approximated by the person who pronounces death.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Click the Hide button to temporarily remove the Validation Results frame. Re-validate any page to view the results frame again.

Error Correction Using the Goto Field Button

- To correct an error, click the  button in the **Goto Field** column of the **Validation Results** page. This will place the cursor or “focus” in the field that needs to be corrected. Use this option if you are on a single registration page with many errors to correct.

Certifier

Certifier Type ...the focus was sent to this control.

License Number Lookup Intern

Certifier Name

First Middle Last Suffix

Title Other Specify

Certifier Address

Edit Certifier Address

Street Number Pre Directional Street Name, Rural Route, etc. Street Designator Post Directional Apt #, Suite # etc.

City or Town State Country Zip Code

Date Signed

Validation Results

Error Message	Override	Goto Field	Popup
DR_2566: Medical Certifier type cannot be left blank. Select the appropriate entry to indicate the medical certifier type.	<input type="checkbox"/>	<input type="button" value="fix 🗑️"/>	<input type="button" value="fix 🗑️"/>

...by clicking the Goto Field "Fix" icon

Note: "Focus" determines which onscreen element is the target of action. If a text box "has the focus", then anything typed on the keyboard appears in the text box. If a dropdown list "has the focus", the down-arrow will open the list and the up-arrow will close the list.

Error Correction Using the Popup Icon

7. Another method of correcting errors is to click the icon in the **Popup** column

Validation Results

Error Message	Override	Goto Field	Popup
DR_2566: Medical Certifier type cannot be left blank. Select the appropriate entry to indicate the medical certifier type.	<input type="checkbox"/>	<input type="button" value="fix 🗑️"/>	<input type="button" value="fix 🗑️"/>

...or, click the "fix" icon under Popup

to launch a popup window containing the error or errors to be corrected. This functionality is useful when an error is caused by conflicting entries across multiple registration pages. Rather than searching across many pages trying to determine which field contains the error. **Popup** presents all of the conflicting fields in one window.

In the example above, a conflict between two separate fields generated error number **DR_3021**. Correcting either of the entries below may correct the issue; however, more than one correction may be needed in some cases.

Validation Popup

Validation Popup

DR_3021: The condition you reported in line a indicates trauma. Causes of death that are not natural or involve injury or trauma should be referred to the ME.
Please verify your entry for cause of death. If your entry indicates a possible injury or trauma and the Manner of Death <-> 'Natural' it must be referred to ME or that the certifier must be a medical examiner.

Other Factors

Was ME Contacted?

Save **Cancel**

- Correct the error and click the **Save** button to submit your changes. The popup will close and your changes will appear on the registration page. Click the **Close** button to close the popup without making any changes.

Overridable Errors

In certain instances, a record may still be registered, even if it contains types of errors. For those errors, a checkbox will be provided in the **Override** column.

Validation Results				List All Errors	Save Overrides	Hide
Error Message	Override	Goto Field	Popup			
DR_3002: Interval for line a cannot be left blank. Provide the best estimate of the interval between the presumed onset of each condition and death. The terms 'approximately' and 'unknown' may be used. Do not leave the interval blank. If unknown , enter 'unknown.'	<input type="checkbox"/>	fix	fix			
DR_3003: Interval for line b cannot be left blank. Provide the best estimate of the interval between the presumed onset of each condition and death. The terms 'approximately' and 'unknown' may be used. Do leave the interval blank. If unknown , enter 'unknown.'	<input type="checkbox"/>	fix	fix			

- Place a checkmark (☑) in the **Override** box next to the error to be overridden and click the **Save Overrides** button. This allows you to process a death record even if some errors are present.

Note: After clicking Save Overrides, re-validate the page by selecting the Validate Page button.

Validation Results			List All Errors	Save Overrides	Hide
Error Message	Override	Goto Field	Popup		
DR_3002: Interval for line a cannot be left blank. Provide the best estimate of the interval between the presumed onset of each condition and death. The terms 'approximately' and 'unknown' may be used. Do not leave the interval blank. If unknown, enter 'unknown.'	<input type="checkbox"/>	fix	fix		
DR_3003: Interval for line b cannot be left blank. Provide the best estimate of the interval between the presumed onset of each condition and death. The terms 'approximately' and 'unknown' may be used. Do not leave the interval blank. If unknown, enter 'unknown.'	<input checked="" type="checkbox"/>	fix	fix		

Note: If a checkmark is placed in the Override checkbox, and later the error is fixed, take the checkmark out of the checkbox, and select the Save Override button again. This will remove the error from the Validation Results page, and remove the hard edit (highlighted in red).

In the example below a checkmark was placed in the two Override checkboxes as the missing data was not available. Eventually, the missing data was keyed in (Time of Death and Time of Death Modifier). The checkmarks were then removed from the checkboxes, and the Save Overrides button was selected.

Once the error messages are fixed, and checkmarks removed from the Override column, selecting **Save Overrides** will change the red edit to a green edit.

Now that data was keyed in to fix the error messages, de-select the checkmarks in the Override checkboxes and select the **Save Overrides** button to remove the errors

Validation Results			List All Errors	Save Overrides	Hide
Error Message	Override	Goto Field	Popup		
DR_6218: The time of death modifier cannot be left blank. Enter the appropriate modifier for the time of death.	<input checked="" type="checkbox"/>	fix	fix		
DR_6221: Time of death cannot be left blank. Enter the exact time of death (hours and minutes) according to local time. One minute after 12 midnight is entered as 12:01 a.m. of the new day. If the exact time of death is unknown, the time should be approximated by the person who pronounces death.	<input checked="" type="checkbox"/>	fix	fix		

- There are two types of errors in DAVE™: **Hard** and **Soft**. Hard edits are highlighted on screen in red. Soft edits are highlighted on screen in yellow.

Certifier

Certifier Type

License Number Lookup Intern

Certifier Name

First Middle Last Suffix

Title Other Specify

Notice that the **Certifier Type** field is highlighted in red. Registration will not be permitted until this error has been corrected.

The **Approximate Interval Onset to Death** field is highlighted in yellow. Using the **Override** feature described above, this entry can be accepted as submitted and registration permitted.

Cause of Death	Approximate Interval Onset to Death
PART I Line a Acute Myocardial Infarction <input type="button" value="ABC"/> <input type="button" value="v"/>	<input type="text" value=""/>
Immediate Cause (Final disease or condition resulting in death)	
Line b Severe Coronary Artery Disease <input type="button" value="ABC"/> <input type="button" value="v"/>	<input type="text" value=""/>


Additionally, notice that certain pages on the various registration menus are marked with **red**, **yellow**, or **green** arrows.

These arrows serve as indicators as to which pages contain errors and which pages pass validation.

Death Registration Menu	
Personal Information	
▶ Decedent	Pages containing no errors are noted by green arrows. No further action is necessary.
Medical Certification	
▶ Pronouncement	Pages containing non-overridable errors are noted by red arrows. These errors must be corrected.
▶ Place of Death	
▶ Cause of Death	
▶ Other Factors	
▶ Injury	
▶ Certifier	Pages containing overridable errors are noted by yellow arrows. Correct override as needed.

For example, pages marked with a green arrow contain no errors.

Pages marked with a red arrow contain hard edit rule failures that must be corrected before registration can be completed.

Pages marked with a yellow error  contain soft edit rule failures that may be overridden or that have already been overridden.

Note: Anytime the Validate Page button is clicked the system will evaluate all pages and mark them accordingly with red, yellow, or green arrows.

Exercise 3.3 – Duplicate Record Resolution

Skill Learned: How to use the [Potential Duplicates](#) link to resolve duplicate records.

1. When the **Validation** button is activated from any of the **Death Registration Menu** pages, the **DAVE™** system runs a search for potential duplicate records. This is done to prevent the creation of duplicate death registrations.

Decedent

Decedent's Legal Name								
Prefix	First	Middle	Other Middle	Last	Suffix			
<input type="text"/>	<input type="text" value="John"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="Peabody"/>	<input type="text"/>			
Aliases								
Add/Edit Alias Names								
Gender	Social Security Number							
<input type="text" value="Male"/>	<input type="text" value="____-____-____"/> <input type="radio"/> None <input type="radio"/> Unknown							
Date of Birth	Age	Under 1 Year	Under 1 Day	SSN Verification Status				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Verify SSN	UNVERIFIED (0)			
Decedent's Birth Place								
City or Town	State	Country						
<input type="text"/>	<input type="text"/>	<input type="text" value="United States"/>						
Ever in US Armed Forces?	<input type="text"/>							
				<input type="button" value="Validate Page"/>	<input type="button" value="Next"/>	<input type="button" value="Clear"/>	<input type="button" value="Save"/>	<input type="button" value="Return"/>

Validation Results	<input type="button" value="List All Errors"/>	<input type="button" value="Save Overrides"/>	<input type="button" value="Hide"/>
Error Message	Override	Goto Field	Popup
DR_0055: One or more records currently exist for this decedent. Please verify this case is not a duplicate Potential Duplicates	<input type="checkbox"/>	<input type="button" value="fix"/>	<input type="button" value="fix"/>

2. If **DAVE™** finds potential duplicates, an error message will appear in the **Validation Frame** containing the following message and link:

DR_0055: One or more records currently exist for this decedent. Please verify this case is not a duplicate Potential Duplicates	<input type="checkbox"/>	<input type="button" value="fix"/>	<input type="button" value="fix"/>
--	--------------------------	------------------------------------	------------------------------------

3. Click the [Potential Duplicates](#) link to open the **Duplicate Resolution** page. This page lists all of the records in the **DAVE™** database that have been identified as potential duplicates. Please note that all records may not be accessible. Access to the records displayed is based

on the user's security profile. If one of the duplicate cases is not owned by the current office, it will be disabled.

Duplicate Resolution

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38148	Peabody, John	Oct-30-2013	Male	Penobscot		Compare
38153	Peabody, John	Oct-30-2013	Male	Penobscot		Compare
						Total records : 2

Current Case

Case Id: 38153
 Decedent's Name: John Peabody
 Date of Death: Oct-30-2013
 Gender: Male
 Residence: United States
 Funeral Director:
 Funeral Home:
 Medical Certifier: Medicine Man
 Place of Death: Acadia Hospital
 Date Entered: OCT-30-2013
 Status: /Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Death Potential Duplicate/Personal Pending/Medical Pending

File Number:
 City or Town of Death: Bangor
 County: Penobscot
 SSN:
 Date of Birth:

File Date:
 Last Updated by: Medicine Man

[Return to Rule Failures](#)

- Click the [Compare](#) link to open a **Preview** window. This will display a summary of the record to help you determine whether or not the record you are currently working on is, in fact, a duplicate record. If the **Preview** window does not provide enough information, then click the [Decedent's Name](#) link to open the actual record.

Duplicate Resolution

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38148	Peabody, John	Oct-30-2013	Male	Penobscot		Select
38153	Peabody, John	Oct-30-2013	Male	Penobscot		Compare
						Total records : 2

Current Case

Case Id: 38153
 Decedent's Name: John Peabody
 Date of Death: Oct-30-2013
 Gender: Male
 Residence: United States
 Funeral Director:
 Funeral Home:
 Medical Certifier: Medicine Man
 Place of Death: Acadia Hospital
 Date Entered: OCT-30-2013
 Status: /Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Death Potential Duplicate/Personal Pending/Medical Pending

File Number:
 City or Town of Death: Bangor
 County: Penobscot
 SSN:
 Date of Birth:

File Date:
 Last Updated by: Medicine Man

Potential Duplicate Case

Case Id: 38148
 Decedent's Name: John Peabody
 Date of Death: Oct-30-2013
 Gender: Male
 Residence: United States
 Funeral Director:
 Funeral Home:
 Medical Certifier: Medicine Man
 Place of Death: Acadia Hospital
 Date Entered: OCT-30-2013
 Status: /Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Personal Pending/Medical Pending/ICD Coding Required

File Number:
 City or Town of Death: Bangor
 County: Penobscot
 SSN:
 Date of Birth:

File Date:
 Last Updated by: Medicine Man

[Return to Rule Failures](#)

- When you have finished looking over the opened record, click the **Return** button at the bottom of the page to return to the **Duplicate Resolution** window.

38148 :John Peabody Oct-30-2013

/Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Personal Pending/Medical Pending/ICD Coding Required

Decedent

Decedent's Legal Name

Prefix	First	Middle	Other Middle	Last	Suffix
	John			Peabody	

Aliases

Add/Edit Alias Names

Gender: Social Security Number: None Unknown

Date of Birth: Age: Under 1 Year: Months Days Under 1 Day: Hours Minutes SSN Verification Status: UNVERIFIED (0)

Decedent's Birth Place

City or Town: State: Country:

Ever in US Armed Forces?

- If you are certain the record you are working on is not a duplicate, then click the **Return to Rule Failures** button to return to the new record.

If a duplicate record has been created in error, contact the Vital Records' EDRS Help Line to have one of the duplicate cases abandoned.

Duplicate Resolution

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38148	Peabody, John	Oct-30-2013	Male	Penobscot		Compare
38153	Peabody, John	Oct-30-2013	Male	Penobscot		Compare

Total records : 2

Current Case

Case Id: 38153
Decedent's Name: John Peabody
Date of Death: Oct-30-2013
Gender: Male
Residence: United States
Funeral Director:
Funeral Home:
Medical Certifier: Medicine Man
Place of Death: Acadia Hospital
Date Entered: OCT-30-2013
Status: /Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Death Potential Duplicate/Personal Pending/Medical Pending

File Number:
City or Town of Death: Bangor
County: Penobscot
SSN:
Date of Birth:
File Date:
Last Updated by: Medicine Man

[Return to Rule Failures](#)

- Place a checkmark in the checkbox located in the **Override** column and click the **Save Overrides** button.

38148 :John Peabody Oct-30-2013

/Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Personal Pending/Medical Pending/ICD Coding Required/Death Potential Duplicate

Validation Results	Save Overrides
Error Message	Override Goto Field Popup
DR_0055: One or more records currently exist for this decedent. Please verify this case is not a duplicate Potential Duplicates	<input checked="" type="checkbox"/> fix fix

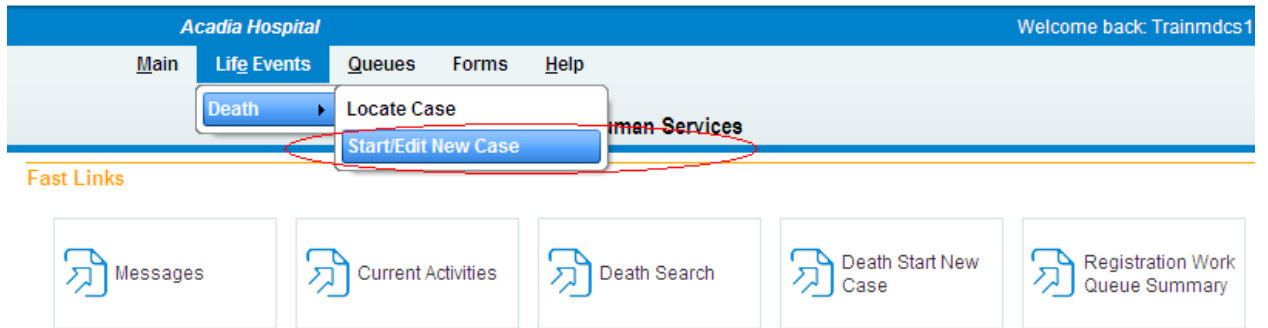
Section 4: Start/Edit New Case

In the exercises that follow, you will learn how to use the **Medical Certification** pages of the **DAVE™** application to process and certify a death record.

Exercise 4.1 – Required Fields

Skill Learned: How to complete and execute the **Start/Edit New Case** page.

- From the Home page, select **Life Events -> Death -> Start/Edit New Case**.



- This will bring up the **Start/Edit New Case** page shown below. Notice that **First, Last, Date of Death, and Gender** are all marked with red arrows(▶). Fields denoted by red arrows are required entries that must be completed before you will be allowed to proceed.

Start/Edit New Case

Decedent's Information

First: ▶ Last: ▶ Date of Death: ▶

Gender: ▶ SSN: Date of Birth:

Case Id: ME Case Number: Medical Record Number:

Place of Death Location Type: Place of Death:

Note: Before you will be allowed to create a new Death Record you must first search for an existing record. This is to prevent the creation of duplicate Death Records.

- Once you have filled in the required fields, click the **Search** button to proceed or, if you need to, click the **Clear** button to clear all entries and start over.
- If no matching records are found, you will be allowed to begin creating a new record by clicking the **Start New Case** button. To begin a new search, click the **New Search** button.

Results

There are no cases that match the criteria you have entered.
If this is a new case, select the Start New Case button or select the New Search button to perform a new search.

If no matching records were found, click the **Start New Case** button to create a new file.

To begin a new search with new search criteria click the **New Search** button.

- If a matching event was found, click the blue hyperlink in the **Decedent's Name** column to open the record.

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38157	Caper, Johnny	Oct-30-2013	Male			Preview

Total records : 1

[Start New Case](#) [New Search](#)

- For the purposes of this exercise, select **Start New Case**.

Note: All of the column headers on the search Results page have blue hyperlinks. Clicking any of these links will re-sort the table data accordingly.

- Clicking the **Start New Case** button above will launch the **Decedent** page, as shown below.

Exercise 4.2 – Decedent

Skill Learned: How to complete the **Decedent** page.

(Important: Normally, the decedent page is completed by the funeral practitioner. The medical certifier would complete this page only if the certifier is responsible for final disposition. If this field is disabled, or not visible, and medical certifier will be responsible for final disposition, please contact the System Administrator to add the field.)

1. The **Will medical institution be responsible for final disposition?** defaults to **No** and is grayed out or disabled. If medical certifier is responsible for final disposition, select “Yes” to enable the fields on the decedent page, and to view the other Personal Information pages such as: Residence Address, Family Members.

If medical certifier is not responsible for final disposition, note that only the Decedent’s page is shown under Personal Information.

The screenshot shows the 'Decedent' page in the Death Registration Menu. A callout box at the top states: "If medical certifier is NOT responsible for final disposition, only the Decedent's page can be viewed only. Fields will be disabled." Another callout box points to the "Will medical institution be responsible for final disposition?" field, which is set to "No" and is disabled. A third callout box states: "Medical certifier is NOT responsible for final disposition." The form includes fields for Decedent's Legal Name (Prefix, First, Middle, Other Middle), Aliases, Gender (Male), Social Security Number, Date of Birth (Age, Under 1 Year, Under 1 Day), and Decedent's Birth Place (City or Town, State, Country). The SSN Verification Status is UNVERIFIED (0). Buttons for Validate Page, Next, Clear, Save, and Return are visible at the bottom.

Death Registration Menu

- Personal Information
- Decedent**
- Resident Address
- Family Members
- Informant
- Decedent Attributes
- Medical Certification
- Pronouncement
- Place of Death
- Cause of Death
- Other Factors
- Injury
- Certifier
- Other Links
- Attachments
- Comments
- Print Forms
- Refer to Medical Examiner
- Relinquish Case
- Validate Registration
- Switch User

38160 :Pete Bronson Oct-30-2013
 /New Event/New Event/Not Registered/Unsigned/Uncertified/NA

Decedent

Will medical institution be responsible for final disposition? **Yes** ▼

Decedent's Legal Name

Prefix First Middle Other Middle

Aliases

Add/Edit Alias Names

Gender Social Security Number None Unknown

Date of Birth Age Years Months Days Hours Minutes Under 1 Year Under 1 Day

SSN Verification Status UNVERIFIED (0)

Decedent's Birth Place

City or Town State Country

Ever in US Armed Forces?

Medical certifier is responsible for final disposition. All personal information pages are available.

[Validate Page](#) [Next](#) [Clear](#) [Save](#) [Return](#)

2. Complete the **Decedent's Legal Name** tab. **Prefix** is used to record titles such as Mr., Mrs., Dr., etc... **First, Middle, and Last** are self-explanatory. If the decedent had more than one middle name, include it in the **Other Middle** field. **Suffix** is used to record generational suffixes such as Jr., III, etc.

Note: The Aliases tab is disabled for Medical Examiner and Medical Facility users.

3. The **Gender** dropdown list will be pre-populated based on the selection that was made on the **Start Edit New Case** page.
4. The remaining fields on this page are disabled and cannot be completed by Medical Facility users, unless the medical certifier is responsible for final disposition.
5. Click the **Validate Page** button to check this page for errors, the **Next** button to proceed to the **Pronouncement Page**, the **Clear** button to clear all entries, the **Save** button to save changes without leaving this page, or the **Return** button to return to the **Home** page.


Exercise 4.3 – Pronouncement

Skill Learned: How to complete the **Pronouncement** page.

38148 :John Peabody Oct-30-2013

/Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Personal Pending/Medical Pending/CD Coding Required/Death Potential Duplicate

Pronouncement

Date of Death ▶ Oct-30-2013  Date of Death Modifier ▶ Actual date of death ▼
Time of Death [] : [] [] ▼ Time of Death Modifier ▶ [] ▼

Validate Page Next Clear Save Return

1. **Date of Death** will be auto-filled based on the date entered on the **Start Edit New Case** page.

Date of Death Modifier ▶ Actual date of death ▼
Time of Death Modifier ▶ Actual date of death
Approximate date of death
Court determined date of death
Presumed date of death
Date Found

2. Make a selection from the **Date of Death Modifier** dropdown list.
3. Enter the **Time of Death**. **Time** consists of 3 fields: 2 number entry boxes and one **AM/PM/MILITARY** dropdown list. In the first number field, enter the 2-digit hour during which death occurred. For example, if death occurred at 5:00 AM, enter “05” in the first field.

Pronouncement


Date of Death ▶ Oct-30-2013 

Time of Death [] : [] [] ▼
AM
PM
Military

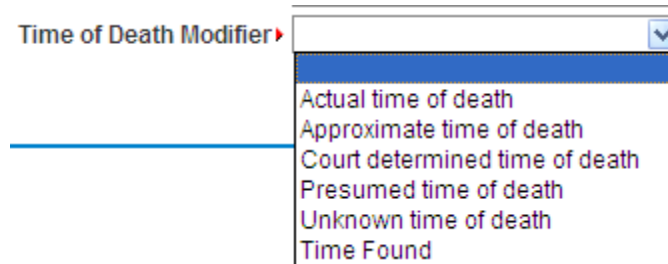
4. In the second number entry box enter the 2 digit minute at which death occurred. If the death occurred at 5:00 am, enter “00” in the 2nd number box. Complete the **Time** entry by making a valid selection from the **AM/PM/MILITARY** dropdown list.

Note: If the Time of Death is Unknown, key in ‘99’ for hour and ‘99’ for minutes as shown below. The AM/PM/Military indicator will automatically change to ‘Unknown’.

Pronouncement

Date of Death ▶ Oct-30-2013  |
Time of Death 99 : 99 Unknown ▼

5. Make a valid selection from the **Time of Death Modifier** dropdown list.



6. Click the **Validate Page** button to check this page for errors, the **Next** button to proceed to the **Place of Death** page, the **Clear** button to clear all entries, the **Save** button to save changes without leaving this page, or the **Return** button to return to the **Home** page.

Exercise 4.4 – Place of Death

Skill Learned: How to complete the **Place of Death** page. For medical facility users, the fields on this page will be auto-filled based on the facility with which the user is associated. If the user is associated with more than one facility, then the fields on this page will be auto-filled based on the office selected at login.

1. First, make a selection from the **Type of place of death** dropdown list. If the type of place of death is the same as the medical facility associated with the current user, no further entry is required.

Place Of Death

Type of place of death ▼ Other Specify

Facility Name ▶ Acadia
Address
Street Number 123 Pre Directed
City or Town Bangor
Medical Record Number

Hospital-Inpatient
Hospital-Emergency Room/Outpatient
Hospital-Dead on Arrival
Decedent's Home
Retirement Community
Found
Hospice Facility
Nursing Home/Long Term Care Facility
Assisted Living Facility
Other (Specify)
Unknown

etc. Street Designator Post Directional Apt #, Suite #, etc

Country United States Zip Code 04401

- The **Facility Name** and **Address** tabs and fields will be auto-filled and disabled for medical facility users.
- If there is a facility other than the facility type associated with the current user, select that type from the dropdown list.
- If the place of death was not a facility, as would be the case in the event of a home death, then select the place of death type from the dropdown list. If **Other (specify)** is selected as the **Type of place of death**, complete the **Other Specify** field as well.

Place Of Death

Type of place of death: Hospital-Inpatient

Facility Name: Acadia

Address:

Street Number: 123


City or Town: Bangor

Medical Record Number:

Country: United States

Zip Code: 04401

Buttons:

- Select the **Type of place of death**.
- The page will refresh, clearing the fields. Use the **Lookup Place of Death Facility (LOV)** control  to locate and assign the correct facility to the death record (see [Using Lookup Controls](#)).
- Click on the LOV

38148 :John Peabody Oct-30-2013

/Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/N
Coding Required/Death Potential Duplicate

Lookup Control (LOV)

Place Of Death

Type of place of death Hospice Facility

Facility Name

Address

Street Number Pre Directional Street Name or PO Box, Rural Route, etc. Street Designator Post Directional Apt #, Suite #, etc

City or Town County State Country Zip Code

Medical Record Number

Validate Page Next Clear Save Return

- Key in the name of the Facility or use a Wild Card (%) to locate. In the example below (%Br%) will search for all facilities that contain the letters "Br".
- Click Search.

Facility Name: %Br% Search Cancel

Lookup Place Of Death Facility

Facility Name: %Br% Search

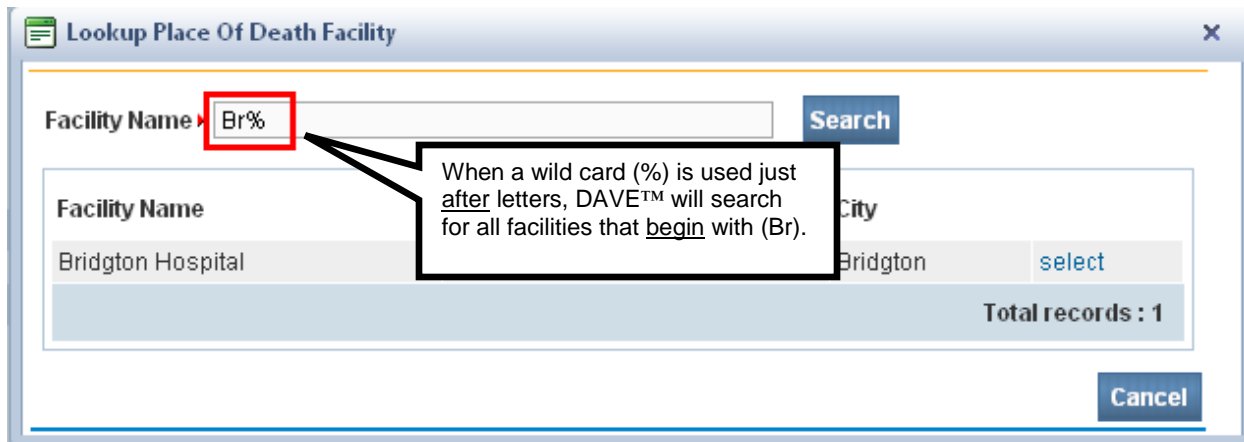
Bridgton Hospital	10 Hospital Drive	Bridgton	select
Cancer Care of Maine Brewer	33 Whiting Hill Road	Brewer	select

Total records : 2

Cancel

When a wild card (%) is used before and after the letters (Br), DAVE™ will search for all facilities that contain those letters.

- On the search results page, click on the **select** button on the same row as desired facility.



11. Enter the decedent's **Medical Record Number** in the space provided.
12. Click the **Validate Page** button to check this page for errors, the **Next** button to proceed to the **Cause of Death** page, the **Clear** button to clear all entries, the **Save** button to save changes without leaving this page, or the **Return** button to return to the **Home** page.

Exercise 4.5 – Cause of Death

Skill Learned: How to complete the **Cause of Death** page.

1. The **Cause of Death** page is composed of text boxes used to enter the cause(s) of death, the interval onset to death and any other contributing factors.

Cause of Death

[NCHS Recommendations for Entry of Cause of Death](#) Click this link for help in completing the **Cause of Death** page.

Enter the chain of events- diseases, injuries, or complications- that directly or indirectly led to the death. Do not enter cardiac arrest, respiratory arrest or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. DO NOT ENTER OLD AGE. Enter only one cause on a line. Add additional lines if necessary.

Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST.

Cause of Death

PART I

Line a ABC
Immediate Cause (Final disease or condition resulting in death)

Line b ABC
Due to or as a consequence of

Line c ABC
Due to or as a consequence of

Line d ABC
Due to or as a consequence of

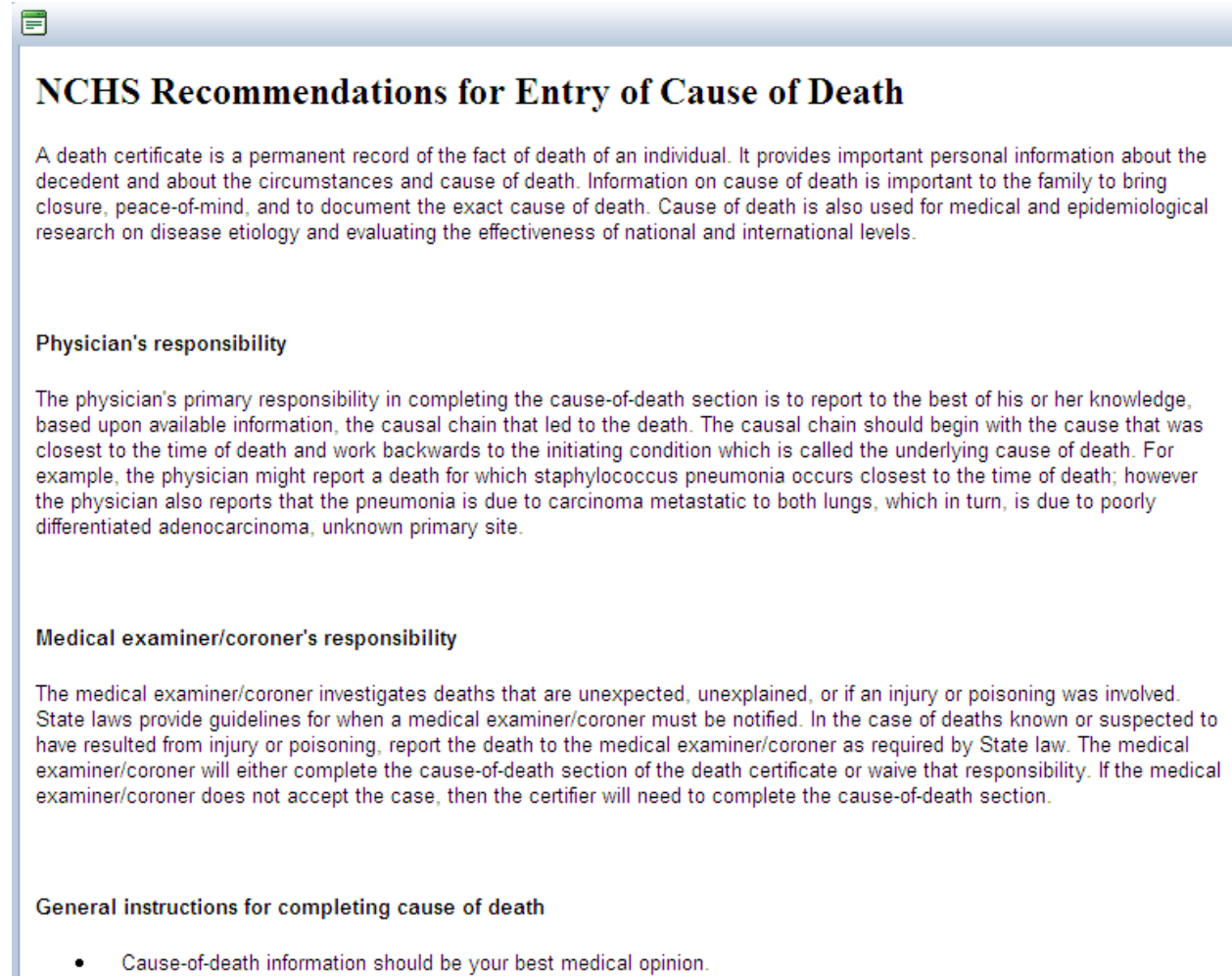
PART II

Other significant conditions ABC

Approximate Interval Onset to Death

...a corresponding Approximate Interval Onset to Death must be listed.

-
- For help in completing Lines a-d (Causes of Death), click the [NCHS Recommendations for Entry of Cause of Death](#) link. A window will open (shown below) containing instructions for completing the **Cause of Death** page.



NCHS Recommendations for Entry of Cause of Death

A death certificate is a permanent record of the fact of death of an individual. It provides important personal information about the decedent and about the circumstances and cause of death. Information on cause of death is important to the family to bring closure, peace-of-mind, and to document the exact cause of death. Cause of death is also used for medical and epidemiological research on disease etiology and evaluating the effectiveness of national and international levels.

Physician's responsibility

The physician's primary responsibility in completing the cause-of-death section is to report to the best of his or her knowledge, based upon available information, the causal chain that led to the death. The causal chain should begin with the cause that was closest to the time of death and work backwards to the initiating condition which is called the underlying cause of death. For example, the physician might report a death for which staphylococcus pneumonia occurs closest to the time of death; however the physician also reports that the pneumonia is due to carcinoma metastatic to both lungs, which in turn, is due to poorly differentiated adenocarcinoma, unknown primary site.

Medical examiner/coroner's responsibility

The medical examiner/coroner investigates deaths that are unexpected, unexplained, or if an injury or poisoning was involved. State laws provide guidelines for when a medical examiner/coroner must be notified. In the case of deaths known or suspected to have resulted from injury or poisoning, report the death to the medical examiner/coroner as required by State law. The medical examiner/coroner will either complete the cause-of-death section of the death certificate or waive that responsibility. If the medical examiner/coroner does not accept the case, then the certifier will need to complete the cause-of-death section.

General instructions for completing cause of death

- Cause-of-death information should be your best medical opinion.

- For each **Cause of Death** listed in Lines a-d, an **Approximate Interval Onset to Death** must also be added.

Cause of Death


NCHS Recommendations for Entry of Cause of Death

Enter the chain of events- diseases, injuries, or complications- that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. DO NOT ENTER OLD AGE. Enter only one cause on a line. Add additional lines if necessary.

Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST.

Cause of Death

Approximate Interval Onset to Death

PART I
Line a 


Immediate Cause (Final disease or condition resulting in death)

Line b


Due to or as a consequence of

Line c

Due to or as a consequence of

Line d 

Due to or as a consequence of


PART II
Other significant conditions 

While it is not necessary to use every line on the form, any lines used must be sequential.

[Check Spelling](#) [Validate Page](#) [Next](#) [Clear](#) [Save](#) [Return](#)


Validation Results [List All Errors](#) [Save Overrides](#) [Hide](#)

Error Message	Override	Goto Field	Popup
DR_3030: The Cause of Death Line b cannot be blank if Line c and/ or Line d are not blank. Enter a valid value condition for the Cause of Death Line b or move the entries up one line. Cause of Death Line b must be entered if Line c or Line d are entered.	<input type="checkbox"/>	fix	fix

- Click the **Spell Check** icon ().
- DAVE™** will check the spelling of all phrases entered and underline any misspelled entries.

Cause of Death


Approximate Interval
Onset to Death

PART I
Line a 


Immediate Cause (Final disease or condition resulting in death)

Line b


- Clicking any misspelled word will generate a list of possible corrections. Click any option in the list to replace the misspelled word.

7. Upon correction of all misspelled entries in a line, the **Spell Check** icon will be replaced with a **Corrected** icon: ().

Cause of Death


PART I
Line a  Approximate Interval
Onset to Death

Immediate Cause (Final disease or condition resulting in death)


Line b 

8. Alternatively, all lines can be spelled checked simultaneously by clicking the **Check Spelling** button located at the bottom of the **Cause of Death** page.


Cause of Death

PART I
Line a  Approximate Interval
Onset to Death


Immediate Cause (Final disease or condition resulting in death)

Line b 


Due to or as a consequence of

Line c 

Due to or as a consequence of

Line d 

Due to or as a consequence of

PART II
Other significant conditions 

Clicking the **Check Spelling** button will automatically spell check Lines a-d and the Other significant conditions fields simultaneously.

9. Click the **Validate Page** button to check this page for errors, the **Next** button to proceed to the **Other Factors** page, the **Clear** button to clear all entries, the **Save** button to save changes without leaving this page, or the **Return** button to return to the **Home** page.

Exercise 4.6 – Other Factors

Skill Learned: How to complete the **Other Factors** page.

1. The **Other Factors** page is used to record other data relevant to the death: **Autopsy Performed, Tobacco Use, etc.**

Other Factors

Autopsy Performed

Autopsy findings available to complete cause of death

If decedent was female, was decedent pregnant within the last year?

Did tobacco use contribute to death

Manner of Death

Was ME Contacted? ME Case Number

2. From the **Autopsy Performed** dropdown list select either **Yes** or **No**, accordingly. If **Yes** is selected from **Autopsy Performed**, then make a selection from the **Autopsy findings available to complete cause of death** dropdown list.
3. If decedent is female, make a selection from the **If decedent was female, was decedent pregnant within the last year** dropdown list.

Other Factors

Autopsy Performed

Autopsy findings available to complete cause of death

If decedent was female, was decedent pregnant within the last year?

Did tobacco use contribute to death

Manner of Death

Was ME Contacted? ME Case Number

4. If the decedent's gender was designated as **Male** on the **Start Edit New Case** page, then this field will be system field with "Not Applicable" and will be disabled.

Other Factors

Autopsy Performed

Autopsy findings available to complete cause of death

If decedent was female, was decedent pregnant within the last year?

Did tobacco use contribute to death

Manner of Death

Was ME Contacted? ME Case Number

If decedent is Male, or if decedent is female and over 65 years of age, this field will show "Not Applicable" and will be disabled.

[Validate Page](#) [Next](#) [Clear](#) [Save](#) [Return](#)

5. Make a selection from the **Did tobacco use contribute to death** dropdown list.
6. **Manner of Death** will be defaulted to **Natural** unless the cause of death entered indicated some form of trauma or injury.
7. Finish the page by making a selection from the **Was ME Contacted?** dropdown list. Selecting **Yes** will activate the **ME Case Number** field requiring case number entry. If the case is referred to the Medical Examiner, this field will system fill with "Yes" if the Medical Examiner accepts the referral.
8. Click the **Validate Page** button to check this page for errors, the **Next** button to proceed to the **Certifier** page, the **Clear** button to clear all entries, the **Save** button to save changes without leaving this page, or the **Return** button to return to the **Home** page.



Exercise 4.7 – Certifier

Skill Learned: How to complete the **Certifier** page. The **Certifier** page is used to record the name and other data related to the person legally responsible for certifying the decedent's cause of death.

1. If the current user is not the medical certifier, then the **Certifier License Number and Certifier Name section** will be blank upon initial display. The user's address will auto fill with the user's address.

Certifier

Certifier Type

License Number  Lookup  Intern

Certifier Name

First Middle Last Suffix


Title Other Specify

Certifier Address

Edit Certifier Address

Street Number Pre Directional Street Name, Rural Route, etc. Street Designator Post Directional Apt #, Suite #, etc.

City or Town State Country Zip Code



Date Signed 

- There are two ways to complete the **Certifier Name** and **Address** information. One way is to use the standard **LookUp** controls. Alternatively, you can enter the Certifier **License Number** and use the auto-populate button () to complete the onscreen elements.

Note: If logged in as a medical user, and not a medical certifier, click on the erase icon (next to the lookup icon) to disable the Medical License Number field.

Certifier


Certifier Type

License Number  Lookup  Intern

Certifier Name

First Middle Last Suffix

Title Other Specify

- In the example above, we have entered a known license number: MD0987. Click the **auto-complete** icon () to automatically locate the certifier corresponding to that license number and insert that certifier's data into field. Notice that both the **Certifier Name** and the **Certifier Address** are auto-populated.

Note: Auto-population of the certifier data will only occur if the certifier selected is only associated with a single facility. If the certifier is associated with multiple facilities, this information must be entered manually.

-
4. Do not key in the **Date Signed** as the date will be auto-filled upon certification/affirmation by the certifier.
 5. Click the **Validate Page** button to check this page for errors, the **Clear** button to clear all entries, the **Save** button to save changes without leaving this page, or the **Return** button to return to the **Home** page.

Note: If the case does not have a status of Medical Valid or Medical Valid with Exceptions (all page indicators are green or yellow), the Certify (Affirmation) page will not be available.

Exercise 4.8 – Certify

Skill Learned: How to complete the **Affirmations** page. An affirmation is used to record the fact that the medical certifier is accepting legal responsibility for the accuracy of the information provided.

Certify defined: affirming that the decedent died of the causes specified in the registration.

1. Upon completion and successful validation of all Death Registration pages, a new page will be made available to medical certifiers: **Certify**.

Death Registration Menu

38169 :George Gill Oct-31-2013

/Personal Invalid/Medical Valid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Personal Pending/ICD Coding Required/Certification Required

Affirmations

Affirm the following:

By submitting this information, I affirm under the penalty of perjury that I am the authorized certifier whose name will appear on this certificate, and to the best of my knowledge, death occurred due to the cause(s) stated and manner of death is natural.

Certify Affirm Clear Return

The **Certify** link is only available after the successful validation of the Medical Certification pages

2. To Certify the record and achieve a status of “Certified”, place a checkmark in the **Affirm the following** checkbox and click the **Affirm** button.

38169 :George Gill Oct-31-2013

/Personal Invalid/Medical Valid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Personal Pending/ICD Coding Required/Certification Required

Affirmations

Affirm the following:

By submitting this information, I affirm under the penalty of perjury that I am the authorized certifier whose name will appear on this certificate, and to the best of my knowledge, death occurred due to the cause(s) stated and manner of death is natural.

Affirm Clear Return

3. The record will be officially signed/affirmed and an **Authentication Successful** message displayed:

38169 :George Gill Oct-31-2013

/Personal Invalid/Medical Valid/Not Registered/Unsigned/Certified/NA/FIPS Coding Required/Personal Pending/ICD Coding Required

Affirmations

Authentication successful.

Clear Return

- Should the case need to be un-certified, click the [Certify](#) link, and click the **Uncertify** button shown below.

Note: Once the case is either Drop-To-Paper-Medical or Registered, the medical certifier will not be able to uncertify the case.

Death Registration Menu

43632 :Bob Boyz Nov-21-2013

Personal Information

Decedent

Medical Certification

Pronouncement

Place of Death

Cause of Death

Other Factors

Certifier

✓ Certify

Other Links

Comments

Print Forms

Refer to Medical Examiner

Relinquish Case

Transfer Case

Validate Registration

Switch User

Personal Invalid/Medical Valid/Not Registered/Unsigned/Certified/NA/FIPS Coding Required/ICD Coding Required/Personal Pending

Affirmations

This registration is currently certified.

Uncertify Clear Return

Exercise 4.9 – Locate Case

Skill Learned: In Exercise 4.1 above, we learned how to start a new case. In this exercise, you will learn how to complete the **Locate Case** page which is used by data providers such as funeral practitioners, physicians and medical examiners to locate pre-existing cases “owned” by the office to which the current user is associated.

- From the **Main Menu**, select **Life Events -> Death -> Locate Case**.

Acadia Hospital

Welcome back: Trainmdcs1 Logout

Main Life Events Queues Forms Help

Death Locate Case

Start/Edit New Case

Start/Edit New Case

Decedent's Information

First: [] Last: [] Date of Death: []

Gender: [] SSN: [] Date of Birth: []

Case Id: [] ME Case Number: [] Medical Record Number: []

Place of Death Location Type: County [] Place of Death: []

Search Clear

- The **Locate Case** page offers many different identifiers on which to base a record search. While there are no required fields, as when using the **Start/Edit New Case** feature, it is recommended that as much information as possible be included in each search. This will help to minimize the number of records returned.

Locate Case

Decedent's Information

First: Last: Date of Death:

Gender: SSN: Date of Birth:

Case Id: ME Case Number: Medical Record Number:

Place of Death Location Type: Place of Death:

Search Soundex Clear

- 3. In the example below, we are searching only on **Last** name. Enter the decedent's last name and click the **Search** button.

Locate Case

Decedent's Information

First: Last: Date of Death:

Gender: SSN: Date of Birth:

Case Id: ME Case Number: Medical Record Number:

Place of Death Location Type: Place of Death:

Search Soundex Clear

- 4. Searching on **Last** name only returns the following results:

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38169	Gill, George	Oct-31-2013	Male	Penobscot		Preview
38171	Gill, Peter	Oct-31-2013	Male	Penobscot		Preview

Total records : 2

New Search

- 5. Click the **New Search** button in the lower, right-hand corner of the **Results** window.
- 6. For this search, enter both the decedent's **First** and **Last** name and then click the **Search** button.

Locate Case

Decedent's Information

First: Last: Date of Death:

Gender: SSN: Date of Birth:

Case Id: ME Case Number: Medical Record Number:

Place of Death Location Type: Place of Death:

Search Soundex Clear

- 7. Notice that this search returned only the specific record desired.

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38169	Gill, George	Oct-31-2013	Male	Penobscot		Preview

Total records : 1

New Search

8. Locate and click the [Preview](#) link in the far right column of the **Results** window.

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38169	Gill, George	Oct-31-2013	Male	Penobscot		Preview

Total records : 1

New Search

9. Clicking the [Preview](#) link will open a preview window offering a brief summary of the selected record.

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38169	Gill, George	Oct-31-2013	Male	Penobscot		Select

Total records : 1

New Search

Preview

File Number: Case Id: 38169
[Decedent's Name: George Gill](#)
Spouse's Name: Gender: Male
City or Town of Death: Bangor
Place of Death: Acadia Hospital
Residence: United States
Mother's Maiden Name:
Funeral Director:
Funeral Home:
Medical Certifier: Medicine Man
Date Entered: OCT-31-2013
Status: /Personal Invalid/Medical Valid/Not Registered/Unsigned/Certified/NA/FIPS Coding Required/Personal Pending/ICD Coding Required

File Date: Medical Record Number: ME Case Number:
Date of Death: Oct-31-2013
Marital Status: Date of Birth: SSN:
County: Penobscot

Last Update Made By: Acadia User

10. If, after examining the preview pane, you are confident that you have located the desired record, then click the [Decedent's Name](#) link to open the record.

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38169	Gill, George	Oct-31-2013	Male	Penobscot		Preview

Total records : 1

New Search

- With the record open, it can now be reviewed and/or edited.

Death Registration Menu

- Personal Information
- ▶ Decedent
- Medical Certification
 - ▶ Pronouncement
 - ▶ Place of Death
 - ▶ Cause of Death
 - ▶ Other Factors
 - ▶ Injury
 - ▶ Certifier
 - ✓ Certify
- Other Links
 - Attachments
 - Comments
 - Print Forms
 - Refer to Medical Examiner
 - Relinquish Case
 - Validate Registration
 - Switch User

38169 :George Gill Oct-31-2013
/Personal Invalid/Medical Valid/Not Registered/Unsigned/Certified/NA/FIPS Coding Required/Personal Pending/ICD Coding Required

Decedent

Decedent's Legal Name

Prefix	First	Middle	Other Middle	Last	Suffix
	George			Gill	

Aliases

Add/Edit Alias Names

Gender: Male Social Security Number: None Unknown

Date of Birth: Age Years Months Days Hours Minutes SSN Verification Status: UNVERIFIED (0)

Decedent's Birth Place

City or Town: State Country (United States)

Ever in US Armed Forces?

Exercise 4.10 – Preview Case

Skill Learned: How to preview a record prior to opening it.

- Still not sure if you have located the desired record? Simply locate and click the [Preview](#) link in any of the search result entries. This will generate a **Preview** page of that particular registration.

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38169	Gill, George	Oct-31-2013	Male	Penobscot		Preview
38171	Gill, Peter	Oct-31-2013	Male			Select

Total records : 2

Preview

File Number:

Case Id: 38171 Medical Record Number:

Decedent's Name: Peter Gill

Spouse's Name: Marital Status:

Gender: Male Date of Birth:

City or Town of Death: Bangor

Place of Death: Acadia Hospital

Residence: United States

Mother's Maiden Name:

Funeral Director:

Funeral Home:

Medical Certifier: Medicine Man

Date Entered: OCT-31-2013

Status: /New Event/New Event/Not Registered/Unsigned/Uncertified/NA

ME Case Number:

Date of Death: Oct-31-2013

SSN:

County: Penobscot

Last Update Made By:

- Once you have previewed the registration and are sure that you have located the correct record, click the decedent's name to open the actual record.

Results

Case Id	Decedent's Name	Date of Death	Gender	Place of Death	Date of Birth	
38169	Gill, George	Oct-31-2013	Male	Penobscot		Preview
38171	Gill, Peter	Oct-31-2013	Male	Penobscot		Preview
						Total records : 2

[New Search](#)

- You should now see the **Decedent Personal Information** page.

Death Registration Menu

- Personal Information
- Decedent**
- Medical Certification
 - Pronouncement
 - Place of Death
 - Cause of Death
 - Other Factors
 - Injury
 - Certifier
 - Certify
- Other Links
 - Attachments
 - Comments
 - Print Forms
 - Refer to Medical Examiner
 - Relinquish Case
 - Validate Registration
 - Switch User

38169 :George Gill Oct-31-2013
/Personal Invalid/Medical Valid/Not Registered/Unsigned/Certified/NA/FIPS Coding Required/Personal Pending/ICD Coding Required

Decedent

Decedent's Legal Name

Prefix	First	Middle	Other Middle	Last	Suffix
	George			Gill	

Aliases

Add/Edit Alias Names

Gender: Male Female Other None Unknown

Social Security Number:

Date of Birth:

Age:

Under 1 Year:

Under 1 Day:

Hours:

Minutes:

SSN Verification Status: UNVERIFIED (0)

Decedent's Birth Place

City or Town:

State:

Country:

Ever in US Armed Forces?

Section 5: Other Links/Registrar

Exercise 5.1 – Amendment Lists

Skill Learned: How to use the **Amendment List** to retrieve existing Amendments.

Note: Access to the Amendment List link is based on user security privileges and is typically restricted to State office users.

- From within an amended record, under the **Registrar** sub-menu select **Amendment List**.

Death Registration Menu

- Personal Information
- Decedent
- Resident Address
- Medical Certification
 - Pronouncement
 - Place of Death
 - Cause of Death
 - Other Factors
 - Injury
 - Certifier
- Registrar
- Identifiers
- Amendment List
- Other Links
 - Amendments
 - Assign Status
 - Attachments
 - Comments
 - Event and Issuance History
 - ME Review Case
 - Print Forms
 - Validate Registration
 - Switch User

38088 2013508631 :James Bell Oct-21-2013 **Amendment Exists**

Decedent

Decedent's Legal Name

Prefix First Middle Other Middle Last

Aliases

Add/Edit Alias Names

Gender Social Security Number

Date of Birth Years Under 1 Year Under 1 Day

Decedent's Birth Place

City or Town State Country

Ever in US Armed Forces?

Validate Page Next Clear Save Return

The status bar will show "Amendment Exists" if an amendment has been done on the record.

- The **Amendment List** page will display a listing of all amendments associated with the current record. Notice that the **Amendment Id** column contains links to specific amendments. Click on an **Amendment Id** link to view the amendment.

Amendment List

Amendment Id	Process History	Amendment Id	Date Completed / Rejected	Amendment Status	Order #
8626	History	Medical	Oct-21-2013	10/21/2013 2:32:02 PM	Complete
8643	History	Personal	Nov-14-2013		Keyed

New Amendment Return

Click on the **Amendment Id** link to view the amendment.

- The **Amendment Page** will display with the details of the amendment including the **Amendment Status**.

Amendment Page

Type	<input type="text" value="Medical"/>	Amendment Date	<input type="text" value="Oct-21-2013"/>
Year	<input type="text" value="2013"/>	Amendment Number	<input type="text" value="8626"/>
Order Number	<input type="text"/>	Description	<input type="text"/>
Amendment Status	<input type="text" value="Complete"/>	Microfilm Number	<input type="text"/>

Documentation Type	<input type="text"/>
Other Document Type	<input type="text"/>
Facts Supported	<input type="text"/>
Reject Reason	<input type="text"/>
Other Reject Reason	<input type="text"/>

Item In Error	Item as it Appears	Item as it Should be
Other Factors-Manner of Death	Pending Investigation	Accident
Cause of Death-Line A Description	Pending	Head Trauma

4. Click the **Return** button to return to the **Amendment List** page.

Exercise 5.2 – Amendments

Skill Learned: How to request amendments to certified death records.

1. From within a **registered** record, select **Other Links -> Amendments**.

The screenshot shows the 'Death Registration Menu' for record 54419 2014503477 :Frank Francis Aug-22-2014. The 'Other Links' menu is expanded, and 'Amendments' is highlighted with a red box. The main content area shows the 'Decedent' information form, including fields for Name, Aliases, Gender, Social Security Number, Date of Birth, and Birth Place.

Death Registration Menu 54419 2014503477 :Frank Francis Aug-22-2014
/Personal Valid/Medical Valid/Registered/Signed/Certified/NA/ICD Coding Required

Decedent

Decedent's Legal Name

Prefix	First	Middle	Other Middle	Last	Suffix
	Frank			Francis	

Aliases

Add/Edit Alias Names

Gender: Male Social Security Number: 999-99-9999 Under 1 Year: None Under 1 Day: Unknown

Date of Birth: Jul-02-1911 Age: 103 SSN Verification Status: UNVERIFIED (0)

Decedent's Birth Place

City or Town	State	Country
Augusta	Maine	United States

Ever in US Armed Forces? No

Buttons: Validate Page, Next, Clear, Save, Return

Note: Access to the Amendments link is restricted based on user security privileges.

2. Notice, when the **Amendments** link is selected, the **Death Registration Menu** is removed from the page, and the **Amendment Page** is displayed.

The screenshot shows the 'Amendment Page' for the same record. The 'Amendments Menu' is visible at the top left. The form includes fields for Type, Amendment Date, Year, Amendment Number, Order Number, Description, Amendment Status, and Microfilm Number. There is an 'Add Documentary Evidence' button and 'Save', 'Clear', and 'Return' buttons at the bottom.

Amendments Menu 54419 2014503477 :Frank Francis Aug-22-2014
/Personal Valid/Medical Valid/Registered/Signed/Certified/NA/ICD Coding Required

Amendment Page

Type: [dropdown] Amendment Date: [text]
Year: [text] Amendment Number: [text]
Order Number: [text] Description: [text]
Amendment Status: [text] Microfilm Number: [text]

Add Documentary Evidence

Buttons: Save, Clear, Return

3. The first step in processing an amendment is to make a selection from the amendment **Type** dropdown list on the **Amendment Page**.

Amendments Menu 54419 2014503477 :Frank Francis Aug-22-2014
 /Personal Valid/Medical Valid/Registered/Signed/Certified/NA/ICD Coding Required

Amendment Page

Type	<input type="text" value="Medical"/>	Amendment Date	<input type="text"/>
Year		Amendment Number	<input type="text"/>
Order Number	<input type="text"/>	Description	<input type="text"/>
Amendment Status		Microfilm Number	<input type="text"/>

Add Documentary Evidence

Save **Clear** **Return**

The only type of amendment available to a medical certifier is "Medical".

4. Next, add a description of the amendment in the **Description** field and click **Save**.

Amendments Menu 54419 2014503477 :Frank Francis Aug-22-2014
 /Personal Valid/Medical Valid/Registered/Signed/Certified/NA/ICD Coding Required

Amendment Page

Type	<input type="text" value="Medical"/>	Amendment Date	<input type="text" value="Aug-22-2014"/>
Year	2014	Amendment Number	10999
Order Number	<input type="text"/>	Description	<input type="text" value="Update cause of death"/>
Amendment Status	Keyed (Requires Affirmation)	Microfilm Number	<input type="text"/>

Select Add Documentation to add documentary evidence to this amendment.

Add Documentary Evidence

Page to Amend

Cancel Amendment **Save** **Clear** **Return**

5. The page will refresh and the **Amendment Date** calendar control will automatically auto-fill with the current system date.

6. Next, make a selection from the **Page to Amend** dropdown list.

Amendments Menu 54419 2014503477 :Frank Francis Aug-22-2014
 /Personal Valid/Medical Valid/Registered/Signed/Certified/NA/ICD Coding Required

Amendment Page

Type: Medical Amendment Date: Aug-22-2014
 Year: 2014
 Order Number:
 Amendment Status: Keyed (Requires Affirmation)

Select Add Documentation to add documentary evidence

Add Documentary Evidence

Page to Amend:

- Death - Certifier
- Death - Other Factors
- Death - Place of Death
- Death - Injury
- Death - Pronouncement
- Death - Cause of Death

Cancel Amendment Save Clear Return

Select a Page to Amend to continue.

7. Selecting a page to amend will refresh the page and display the selected page beneath the amendments window. In the example below we have elected to change data found on the **Cause of Death** page.

Page to Amend:

Cause of Death

[NCHS Recommendations for Entry of Cause of Death](#)

Enter the chain of events- diseases, injuries, or complications- that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. DO NOT ENTER OLD AGE. Enter only one cause on a line. Add additional lines if necessary.

Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST.

Cause of Death	Approximate Interval Onset to Death
PART I Line a Rupture of myocardium Immediate Cause (Final disease or condition resulting in death)	Minutes
Line b Acute myocardial infarction	5 days
Line c Coronary artery thrombosis	5 years
Line d <input type="text"/> Due to or as a consequence of	<input type="text"/>
PART II Other significant conditions <input type="text"/>	<input type="text"/>

Cancel Amendment Validate Page Validate Amendment Save Clear Return

8. Make the necessary changes to the **Cause of Death** page.
9. Click the **Validate Page** button to validate the Cause of Death changes made. This will bring up any error messages, if any. In the example above there are no errors.

Using another case, below is an example of an error message. See items 10 through 16 on how to correct errors.

The screenshot shows a 'Cause of Death' form with the following details:

- PART I Cause of Death:**
 - Line a: Rupture of myocardium (Immediate Cause)
 - Line b: Acute myocardial infarction
 - Line c: Coronary artery thrombosis
 - Line d: Atherosclerotic coronary artery disease (Due to or as a consequence of)
- PART II Other significant conditions:** Diabetes, Chronic obstructive pulmonary disease
- Approximate Interval Onset to Death:** Minutes, 6 days, 5 years, 7 years

An error message table is displayed at the bottom of the form:

Error Message	Id	ValidationRuleCode	ValidationRuleId	ValidationRuleError
DR_5010: Manner of Death is pending investigation. Cause of Death cannot be coded until Manner of death is completed.	0	DR_5010	280	Manner of Death is pending investigation. Cause of Death cannot be coded until Manner of death is SEVERITY_LEVEL_SC completed.

A callout box points to the error message with the text: "Error Message indicates that the Cause of Death cannot be coded until Manner of Death is completed." The 'Validate Amendment' button is highlighted with a red box.

10. The Error Message indicates the current Cause of Death cannot be coded until Manner of Death is completed.
11. To correct the Manner of Death scroll back up to the **Page to Amend** dropdown list and select the **Other Factors** page to amend.
12. In the **Manner of Death** dropdown, change the original manner of death from "Pending Investigation" to "Natural".

Page to Amend **Death - Other Factors**

Item In Error	Item as it Appears	Item as it Should be
Cause of Death-Line A Description	Pending	Rupture of myocardium
Cause of Death-Line A Onset Interval	Instant	minutes
Cause of Death-Line B Description		Acute myocardial infarction
Cause of Death-Line B Onset Interval		6 days
Cause of Death-Line C Description		Coronary artery thrombosis
Cause of Death-Line C Onset Interval		5 years
Cause of Death-Line D Description		Atherosclerotic coronary artery disease
Cause of Death-Line D Onset Interval		7 years

Select **Other Factors** from the **Page to Amend** dropdown to correct the **Manner of Death**.

The **Other Factors** page will open. In this example, the **Manner of Death** is changed from "Pending" to "Natural".

Other Factors

Autopsy Performed No

Autopsy findings available to complete cause of death

If decedent was female, was decedent pregnant within the last year?

Did tobacco use contribute to death? No

Manner of Death

Was ME Contacted? Yes ME Case Number

Cancel Amendment Validate Page Validate Amendment Save Clear Return

13. After errors are fixed, select the **Validate Amendment button** to validate the amendment and to insure there are no more errors.

Item In Error	Item as it Appears	Item as it Should be	Edit	Delete
Cause of Death-Line A Description	Pending	Rupture of myocardium	Edit	Delete
Cause of Death-Line A Onset Interval	Instant	minutes	Edit	Delete
Cause of Death-Line B Description		Acute myocardial infarction	Edit	Delete
Cause of Death-Line B Onset Interval		6 days	Edit	Delete
Cause of Death-Line C Description		Coronary artery thrombosis	Edit	Delete
Cause of Death-Line C Onset Interval		5 years	Edit	Delete
Cause of Death-Line D Description		Atherosclerotic coronary artery disease	Edit	Delete
Cause of Death-Line D Onset Interval		7 years	Edit	Delete
Other Factors-ME Contacted	Yes	Yes	Edit	Delete
Other Factors-Manner of Death	Pending Investigation	Natural	Edit	Delete

14. The Amendment page shows the Item in Error grid with all the changes made as shown above.

15. Click the **Save** button at the bottom of the Amendment page as shown below.

Cancel Amendment Validate Page Validate Amendment Save Clear Return

16. The Validation Results (Error Messages) have been fixed and are no longer displayed.

Amendments Menu

- Amendment
- Processing History
- Attachments
- Change History
- Amendment Affirmation

Death Registration Menu

- Personal Information
- Decedent
- Resident Address
- Medical Certification
- Pronouncement
- Place of Death
- Cause of Death
- Other Factors
- Injury
- Certifier
- Registrar
- Identifiers
- Amendment List
- Other Links
- Amendments
- Assign Status
- Attachments
- Comments
- Event and Issuance History
- ME Review Case
- Print Forms
- Validate Registration
- Switch User

54420 2014503478 :David Drew Aug-25-2014

/Personal Valid/Medical Valid With Exceptions/Registered/Dropped To Paper - Medical/Certified/ICD Coding Required/FIPS Coding Required

Amendment Page

Type: Amendment Date:

Year: 2014 Amendment Number: 11000

Order Number: Description:

Amendment Status: Keyed (Requires Affirmation) Microfilm Number:

Select Add Documentation to add documentary evidence to this amendment.

Add Documentary Evidence

Page to Amend:

Item In Error	Item as it Appears	Item as it Should be	Edit	Delete
Cause of Death-Line A Description	Pending	Rupture of myocardium	Edit	Delete
Cause of Death-Line A Onset Interval	Instant	minutes	Edit	Delete
Cause of Death-Line B Description		Acute myocardial infarction	Edit	Delete
Cause of Death-Line B Onset Interval		6 days	Edit	Delete
Cause of Death-Line C Description		Coronary artery thrombosis	Edit	Delete
Cause of Death-Line C Onset Interval		5 years	Edit	Delete
Cause of Death-Line D Description		Atherosclerotic coronary artery disease	Edit	Delete
Cause of Death-Line D Onset Interval		7 years	Edit	Delete
Other Factors-ME Contacted	Yes	Yes	Edit	Delete
Other Factors-Manner of Death	Pending Investigation	Natural	Edit	Delete

Once errors are corrected, proceed with the next steps.

Note: Add attachments, if any, to the amendment prior to affirming the amendment as once an amendment is affirmed a message is sent to Vital Records indicating the amendment is ready for approval. This will insure the necessary documentation is attached when Vital Records views the amendment for approval.

17. To attach documentation to an amendment you are currently working on, select the [Attachments](#) link in the **Amendments Menu**.

Attachments link

Amendments Menu

- Amendment
- Processing History
- Attachments**
- Change History
- Amendment Affirmation

Death Registration Menu

- Personal Information
 - Decedent
 - Resident Address
- Medical Certification
 - Pronouncement
 - Place of Death
 - Cause of Death
 - Other Factors
 - Injury
 - Certifier
- Registrar
 - Identifiers
 - Amendment List
- Other Links
 - Amendments
 - Assign Status
 - Attachments
 - Comments
 - Event and Issuance History
 - ME Review Case
 - Print Forms
 - Validate Registration

Amendment Page

Type: Medical | Amendment Date: Aug-25-2014
 Year: 2014 | Amendment Number: 11000
 Order Number: | Description: |
 Amendment Status: Keyed (Requires Affirmation) | Microfilm Number: |

Select Add Documentation to add documentary evidence to this amendment.

Add Documentary Evidence

Page to Amend: |

Item In Error	Item as it Appears	Item as it Should be	Edit	Delete
Cause of Death-Line A Description	Pending	Rupture of myocardium	Edit	Delete
Cause of Death-Line A Onset Interval	Instant	minutes	Edit	Delete
Cause of Death-Line B Description		Acute myocardial infarction	Edit	Delete
Cause of Death-Line B Onset Interval		6 days	Edit	Delete
Cause of Death-Line C Description		Coronary artery thrombosis	Edit	Delete
Cause of Death-Line C Onset Interval		5 years	Edit	Delete
Cause of Death-Line D Description		Atherosclerotic coronary artery disease	Edit	Delete
Cause of Death-Line D Onset Interval		7 years	Edit	Delete
Other Factors-ME Contacted	Yes	Yes	Edit	Delete
Other Factors-Manner of Death	Pending Investigation	Natural	Edit	Delete

18. The attachment dialog box will open. Select the **New Attachment** button.

Attachments

No data found.

New Attachment **Close**

19. The **Attachments** window will open. Click on the **Browse** button to go search for the attachment in your hard drive.

Attachments

No data found.

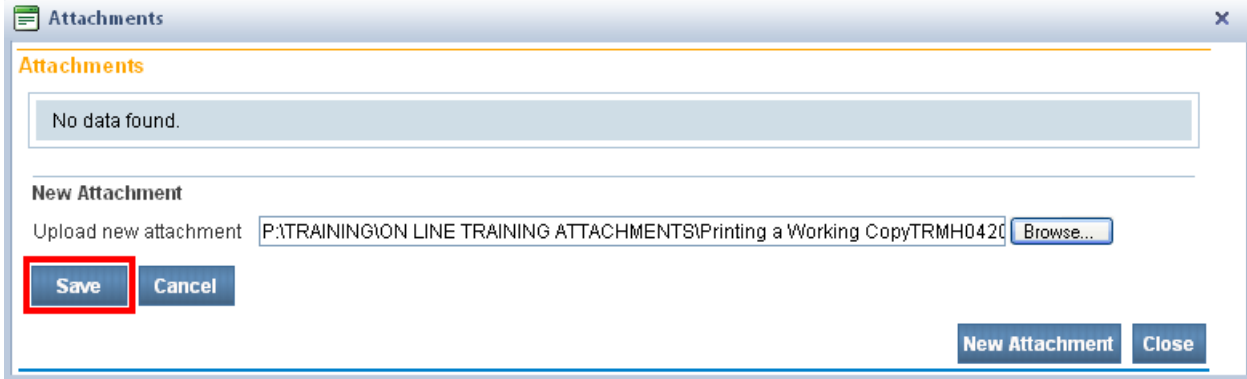
New Attachment

Upload new attachment: **Browse...**

Save **Cancel**

New Attachment **Close**

20. When the attachment has been uploaded, click the **Save** button.



- To attach a document to an already existing amendment, open the case you wish to add an attachment. Click on the [Amendment List](#) link in the **Death Registration Menu**.

- The **Amendment List** page will open.
- Click on the **Amendment ID** number to open the **Amendment** menu.
- Select the [Attachment](#) link. The attachment dialog box will open.
- Select the **New Attachment** button. The **Attachments** window will open.
- Click on the **Browse** button to go search for the attachment in your hard drive. When the attachment has been uploaded, click the **Save** button.

Once the attachments have been downloaded and attached to the amendment:

- Select the [Amendment Affirmation](#) link to affirm the amendment.
- Place a checkmark in the affirmations checkbox and click the **Affirm** button.

Affirmations

Affirm the following:



certify that this change is being requested due to a data entry error. (Note: all other types of errors require original documentation and cannot be submitted electronically.)

Affirm

Clear

Return

- The page will refresh and display an **Authentication Successful** message. The amendment request will now appear in an **Amendment Registration** queue for processing by authorized personnel.

Affirmations

Authentication successful.

Clear

Return

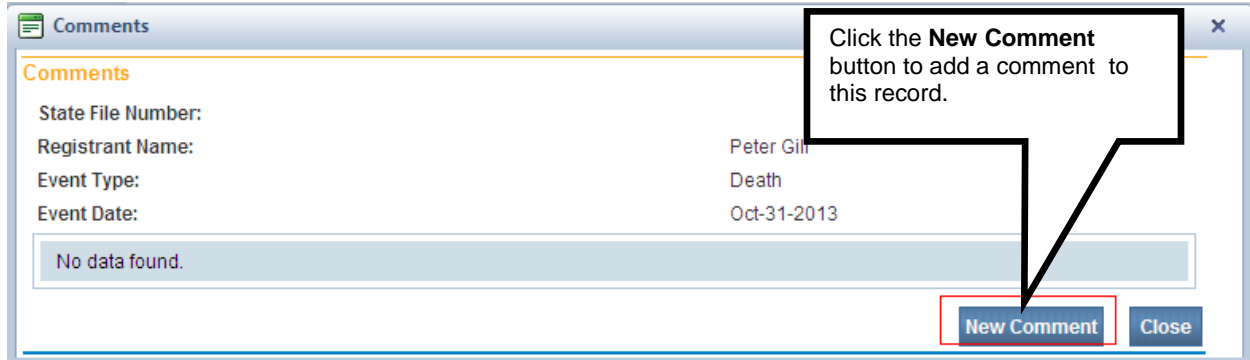
Exercise 5.3 – Comments

Skill Learned: How to read and enter comments. During the process of entering and registering death records, it is sometimes necessary to store comments or remarks about a case. These comments can serve as reminders or as instructions to others who will work on the case.

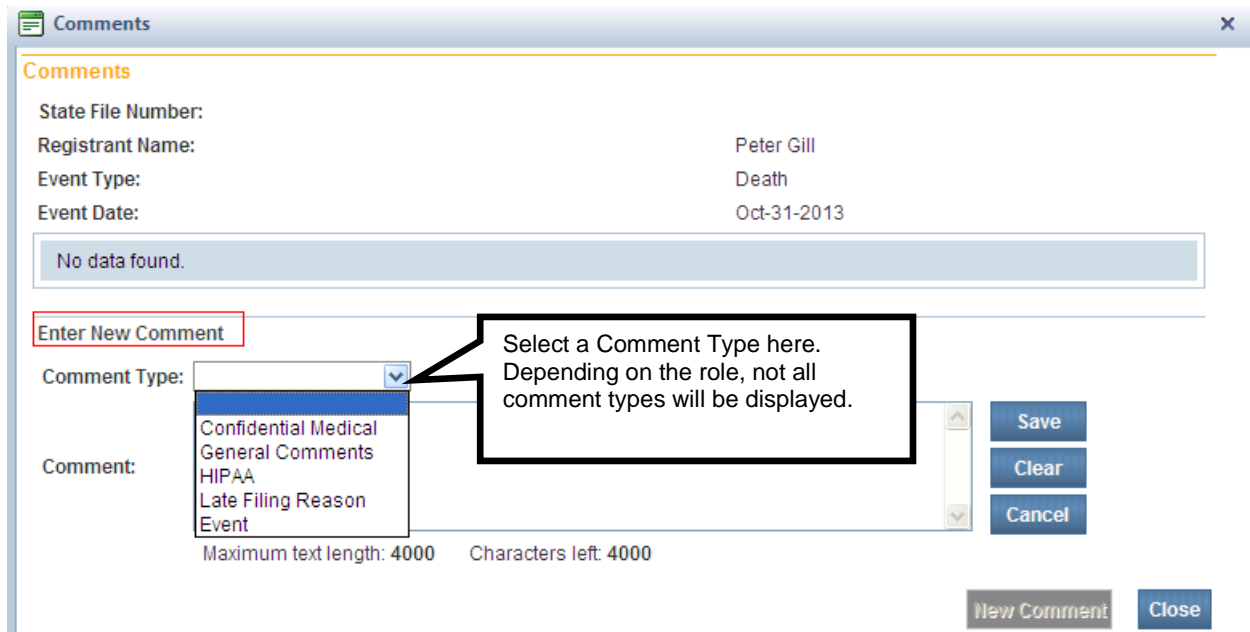
The case must be opened to add comments.

The screenshot shows the 'Death Registration Menu' for case 38171: Peter Gill, Oct-31-2013. The 'Other Links' section is expanded, and 'Comments' is highlighted with a red box. The main form area shows fields for the decedent's legal name (Prefix, First, Middle, Other Middle, Last, Suffix), aliases, gender, social security number, date of birth, and birth place. The 'Comments' link is highlighted in the left-hand menu.

- From the **Death Registration Menu** select **Other Links -> Comments**.
- The **Comments** dialog will appear onscreen as a pop-up window. To add a new comment, click the **New Comment** button located at the bottom of the **Comments** window



3. The **Enter New Comment** tab will open allowing you to enter new comments.



4. The first step in adding a new comment is to select a **Comment Type**. Every comment must have a type assigned to it.
5. Comments are limited to 4000 characters. Fortunately, **DAVE™** keeps track of the number of characters used and displays that information onscreen.

Comments

State File Number:

Registrant Name: Peter Gill

Event Type: Death

Event Date: Oct-31-2013

No data found.

Enter New Comment

Comment Type: General Comments

Comment: FD will be attaching copy of death certificate.

Save

Clear

Cancel

Maximum text length: 4000 Characters left: 3953

Maximum numbers of characters that can be included.

Number of remaining characters that can be added to the current comment.

New Comment Close

- When you have finished entering the comment, select the **Save** button to save the comment, **Clear** to clear the entry, or **Cancel** to close the comment window without saving changes.
- Selecting **Save** above will write the comment to the **DAVE™** database and return you to the main **Comments** window, shown below. Notice that a portion of the comment can be read in the **Comment** window. Lengthy comments will have to be opened in order to be read in their entirety. Clicking the [Edit](#) link will open the **Update Existing Comment** tab for you to view and, if necessary, edit the comment.

Comments

State File Number:

Registrant Name: Peter Gill

Event Type: Death

Event Date: Oct-31-2013

Comment Type	Date Entered	Entered By	Comment
General Comments	10/31/2013	Trainmdcs1	FD will be attaching copy of death certificate.

Total records : 1

Edit Delete

New Comment Close

- Once a comment has been added to a record, a checkmark will appear next to the **Comments** link in the **Other Links** sub-menu. This serves as a visual cue to all users that outstanding comments exist on a record

Note: The ability to Edit or Delete comments is determined by the individual user's security configuration.

Exercise 5.4 – Attachments (Registration)

Skill Learned: How to add attachments. It is sometimes necessary to add attachments to a case.

Note: There is a 4M size limitation on attachments. If the attachment is too large, reduce and scan the attachment prior to attaching the document to the record.

- Open the case applicable to the attachment.
- From the **Death Registration Menu** select **Other Links ->Attachments**

Death Registration Menu

- Personal Information
- Decedent**
- Medical Certification
 - Pronouncement
 - Place of Death
 - Cause of Death
 - Other Factors
 - Injury
 - Certifier
- Other Links
 - Attachments**
 - Comments
 - Print Forms
 - Refer to Medical Examiner
 - Relinquish Case
 - Validate Registration
 - Switch User

38163 James Bush Oct-31-2013
 /New Event/New Event/Not Registered/Unsigned/Uncertified/NA

Decedent

Decedent's Legal Name

Prefix	First	Middle	Other Middle	Last	Suffix
	James			Bush	

Aliases

Add/Edit Alias Names

Gender: Male | Social Security Number: - - - - - | None | Unknown

Date of Birth: - - - - - | Age: | Under 1 Year: Months - Days | Under 1 Day: Hours - Minutes | SSN Verification Status: UNVERIFIED (0)

Decedent's Birth Place

City or Town: | State: | Country: United States

Ever in US Armed Forces? -

Validate Page Next Clear Save Return

- The **Attachments** dialog box will open.
- Select the **New Attachment** button.

Attachments

Attachments

No data found.

New Attachment Close

- The **Attachment** tab will open allowing you to add an attachment.
- Click on the **Browse** button.

Attachments

Attachments

No data found.

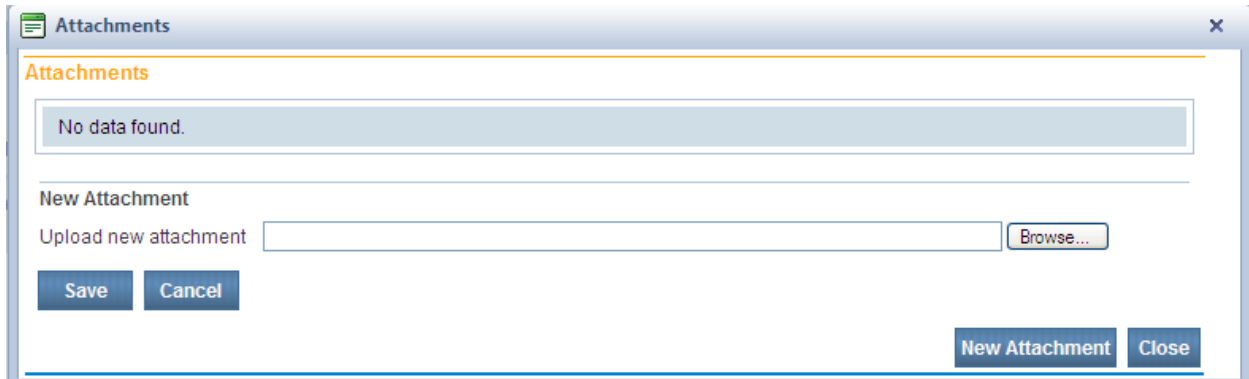
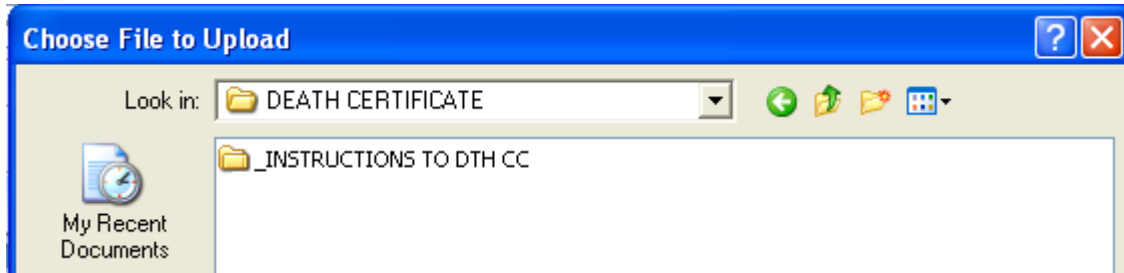
New Attachment

Upload new attachment: Browse...

Save Cancel

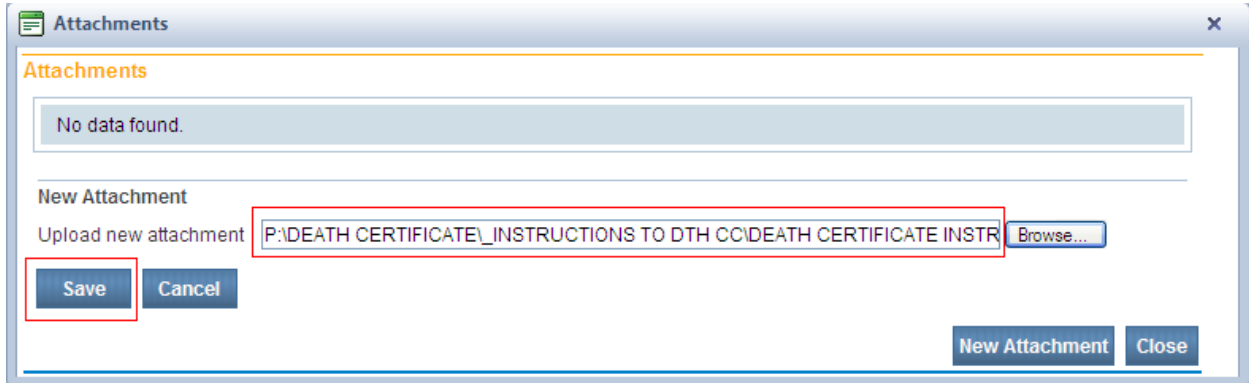
New Attachment Close

- Clicking on the **Browse** button will open the Choose File to Upload directory.
- Click on the file to attach to the record.

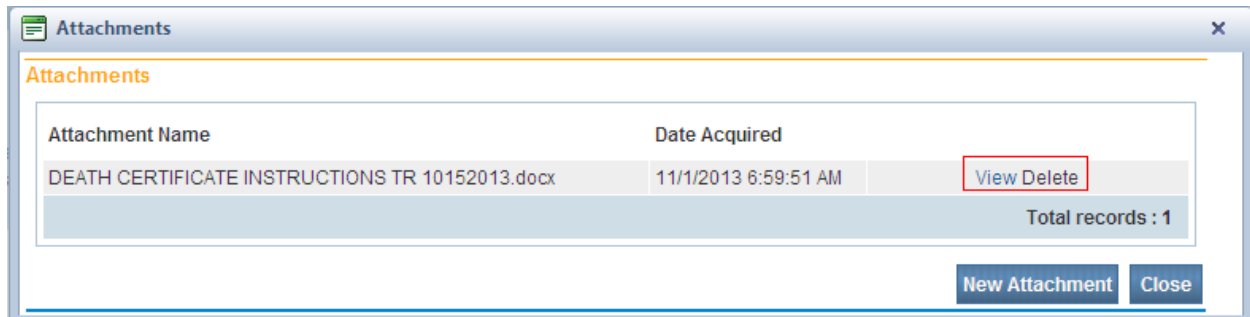


9. The file name will show in the Upload new attachment box.

10. Select **Save**.



11. Once the file is saved, the attachment can be viewed or deleted. (This is based on user security privileges.)



12. A checkmark indicator will be shown in front of the [Attachments](#) link when there is an attachment included with the record.



Exercise 5.5 – Print Forms - Working Copy

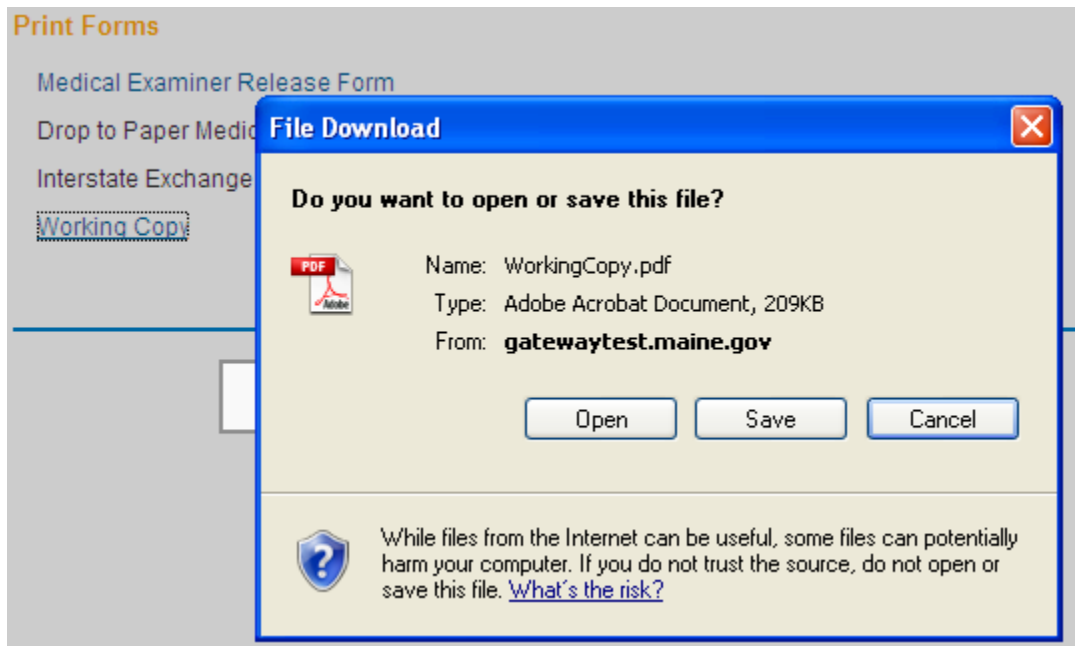
Skill Learned: How to send working copies of death certificates to an installed printer.

Note: The ability to print a Working Copy of a registration is based on user security privileges. Typically, only Medical Certifiers, Funeral Practitioners, and Municipal Clerks print Working Copies.

Open the case.

1. Select **Death Registration Menu -> Other Links ->Print Forms.**
2. Locate the underlined [Working Copy](#) link.

- Clicking any form link will open the **File Download** dialog box and launch the document.
- Click **Open** to print the [Working Copy](#).



- Select the Printer icon to print the [Working Copy](#).



NAME KNOWN TO PHYSICIAN		DEPARTMENT OF HEALTH AND HUMAN SERVICES						State File Number
		CERTIFICATE OF DEATH						
1a. FIRST NAME James		1b. MIDDLE NAME			1c. LAST NAME Bush		1d. JR., etc.	
2. DATE OF DEATH October 31, 2013	3. SEX Male	4. SOCIAL SECURITY NUMBER Unknown	5a. AGE (Yrs) Last Birthday	5b. UNDER 1 YEAR Months Days		5c. UNDER 1 DAY Hours Minutes		6. DATE OF BIRTH Unknown

Exercise 5.6 – Print Forms - Drop to Paper - Medical

Skill Learned: How to use the [Drop to Paper](#) link in order to print a death certificate when either the personal information or the medical certification (not both) has been electronically entered and validated but the remaining information will be completed manually.

For example, if the user is a Funeral Practitioner and the record has a Signed status, or, if the user is a Medical Certifier and the record has a status of Certified, then the [Drop to Paper or Drop to Paper - Medical](#) link will be enabled. The [Drop to Paper or Drop to Paper-Medical](#) feature should only be used if either the Personal Information or Medical Certification of the death certificate will be completed on paper instead of electronically.

Once a certificate is “dropped to paper”, previously authenticated signatures are printed along with all filled-in data. The paper document is then considered the official source of the death certificate information. At this point, **DAVE™** locks all “authenticated” information from further update in order to ensure the paper document matches the electronic record. Authorized users, such as state users still have the ability to update “locked” fields once the paper document is filed.

1. From the **Death Registration Menu**, select **Other Links -> Print Forms -> Drop to Paper** or **Drop to Paper Medical**.

Death Registration Menu 38163 :James Bush Oct-31-2013
 /Personal Invalid/Medical Valid/Not Registered/Unsigned/Certified/NA/FIPS Coding Required/ICD Coding Required/Personal Pending
Print Forms
 Medical Examiner Release Form
 Drop to Paper Medical
 Interstate Exchange Copy Cannot be printed unless e...
 Working Copy

The case must be Certified for the Drop to Paper Medical link to be enabled.

Note: Access to the Drop To Paper link is limited by both user security configuration AND the status of the record in question. Even with the proper security profile, you may or may not have access to the Drop to Paper link.

2. In the example below, the Medical Information has been entered and certified. The medical certifier is going to drop this record to paper in order to have State users complete the **Personal Information**. From the **Print Forms** page, locate and click the [Drop to Paper-Medical](#) link.

38163 :James Bush Oct-31-2013
 /Personal Invalid/Medical Valid/Not Registered/Unsigned/Certified/NA/FIPS Coding Required/ICD Coding Required/Personal Pending
Print Forms
 Medical Examiner Release Form
 Drop to Paper Medical
 Interstate Exchange Copy Cannot be printed unless event has a 'registered' status.
 Working Copy

Return

3. The form will launch in PDF format for printing.



Click on the Printer icon to Print.

NAME KNOWN TO PHYSICIAN		DEPARTMENT OF HEALTH AND HUMAN SERVICES						State File Number
		CERTIFICATE OF DEATH						
1a. FIRST NAME James		1b. MIDDLE NAME			1c. LAST NAME Bush		1d. JR., etc.	
2. DATE OF DEATH Actual date of death October 31, 2013		3. SEX Male	4. SOCIAL SECURITY NUMBER Unknown	5a. AGE (Yrs) Last Birthday	5b. UNDER 1 YEAR Months Days	5c. UNDER 1 DAY Hours Minutes		6. DATE OF BIRTH Unknown

Exercise 5.7 – Refer To Medical Examiner

Skill Learned: How to refer a case to the medical examiner for official review. The purpose of the **Refer to Medical Examiner** page is to notify a medical examiner of a death that was due or may have been due to unnatural causes.

- From within the registration (case) requiring referral, select **Other Links -> Refer to Medical Examiner**.

Death Registration Menu

- Personal Information
- Decedent**
- Medical Certification
 - Pronouncement
 - Place of Death
 - Cause of Death
 - Other Factors
 - Injury
 - Certifier
- Other Links
 - Attachments
 - Comments
 - Print Forms
 - Refer to Medical Examiner**
 - Relinquish Case
 - Validate Registration
 - Switch User

38153 .John Peabody Oct-30-2013

/Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified/NA/FIPS Coding Required/Death Potential Duplicate/Personal Pending/Medical Pending

Decedent

Decedent's Legal Name

Prefix	First	Middle	Other Middle	Last	Suffix
	John			Peabody	

Aliases

Add/Edit Alias Names

Gender Male Social Security Number

None Unknown

Date of Birth Age Years Months Days Hours Minutes SSN Verification Status

Decedent's Birth Place

City or Town State Country

Ever in US Armed Forces?

- This will launch the **Refer to Medical Examiner** page as shown below. Notice, that the **Message** field is auto-filled with a pre-formatted message. This message can be sent as is, edited, or deleted and replaced entirely.



Refer To Medical Examiner

Office Name

Message

- Click **Save** to complete the referral process. The next time the medical examiner logs in, this case will appear in his/her work queue and messages. In addition, an automated email is sent to the medical examiner.

The medical examiner will select Accept, Decline, Pending or Take Control of Case as shown below.

ME Review Case

Referral Action ▶

ME Case Number ▶

Message

- Accept Referral
- Decline Referral
- Pending
- Take Control of Case

The medical certifier will receive a **DAVE™** message indicating the action taken from the medical examiner. In the example below, the medical examiner accepted the case.

Messages

From	Message Text	Date Sent	<input type="checkbox"/>
Med Exams	Case Id: 38157 - Johnny Caper, Date of Death: Oct-30-2013 has been reviewed. This referral action for this case was: Accept Referral.	11/1/2013 8:14:14 AM	<input type="checkbox"/>

The status bar on the case will show “Under ME Review” when the medical examiner has taken one of the following actions: Accepted, Pending, Take Control of Case. And, the medical certifier will no longer have access rights to the case.

38157 :Johnny Caper Oct-30-2013
/Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified **Under ME Review** FIPS Coding Required/Personal Pending/Medical Pending

If the case has been “declined” by the medical examiner the status bar will indicate “Referral Declined” and an automated email and message will be sent to the medical certifier. The medical certifier will continue to have access rights to the case.

38158 :Paul Lane Oct-30-2013

/Personal Invalid/Medical Invalid/Not Registered/Unsigned/Uncertified **Referral Declined** FIPS Coding Required/Personal Pending/Medical Pending

Exercise 5.8 – Relinquish Case

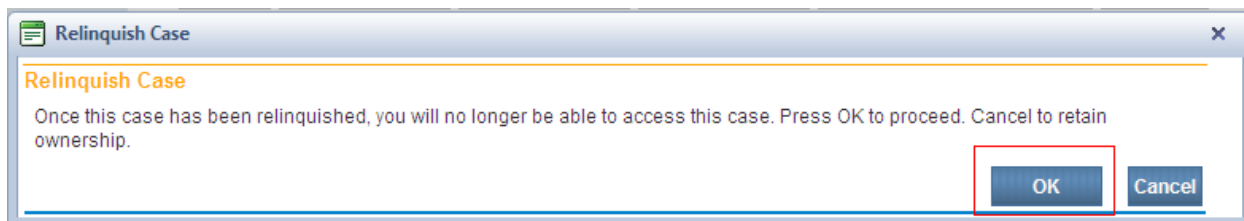
Skill Learned: How to surrender ownership of an unregistered, certified record. Once a Physician has certified a record, no other user has “write access” to that portion of the record. That is, only that physician that “owns” the information is allowed to edit the information. The [Relinquish Case](#) link allows a user to relinquish control of their portion of a record so that a different user can login and take ownership.

For example, if the case is “certified” it will become “un-certified” once the owner relinquishes the case giving another user access to the case.

NOTE: Once the record is relinquished, the person who relinquished the record will no longer have access to the record **once the new user has taken ownership**. If the new user has not yet taken ownership, the person who relinquished the case can regain access of the record by going to **Life Events>Death>Start/Edit New Case**.

The screenshot shows a web interface for death registration. On the left is a 'Death Registration Menu' with a sidebar containing: Personal Information, Decedent (highlighted), Medical Certification (with sub-items: Pronouncement, Place of Death, Cause of Death, Other Factors, Injury, Certifier), Other Links (with sub-items: Attachments, Comments, Print Forms, Refer to Medical Examiner, Relinquish Case (highlighted with a red box), Validate Registration, Switch User). The main content area shows case details for '38177 :John Smith Nov-01-2013' with status '/New Event/New Event/Not Registered/Unsigned/Uncertified/NA'. The 'Decedent' section includes fields for 'Decedent's Legal Name' (Prefix, First: John, Middle, Other Middle, Last: Smith, Suffix), 'Aliases', 'Gender' (Male selected), 'Social Security Number', 'Date of Birth' (with Age, Years, Months, Days, Hours, Minutes, and SSN Verification Status: UNVERIFIED (0)), 'Decedent's Birth Place' (City or Town, State, Country: United States), and 'Ever in US Armed Forces?'. At the bottom right are buttons for 'Validate Page', 'Next', 'Clear', 'Save', and 'Return'.

1. From the **Death Registration Menu** select **Other Links -> Relinquish Case**
2. The **Relinquish Case** window will open. Select **OK** to relinquish control of the record or **Cancel** to retain ownership of the record.



- To regain control of the record (if ownership has not yet been taken by other user), access it from the **Life Events -> Death -> Start EditNew Case**. A dialog will pop up asking the user if they want to take ownership of the case.

Exercise 5.9 – Transfer Case



Skill Learned: How to transfer ownership of a record to a specific facility. From time to time, it may be necessary for a facility such as a Funeral Home or Hospital to transfer ownership of a case to another, similar facility. For example, if the decedent had multiple survivors and burial arrangements were made at multiple sites, one of those sites might have to transfer ownership of the case to the one, appropriate site.



In this case, the transferring home would use the **Transfer Case** page to relinquish ownership to the firm responsible for disposition.

- From the **Death Registration Menu**, select **Other Links -> Transfer Case**.

- Notice that there are two transfer options available on the **Transfer Case** page: **Transfer Personal Ownership** and **Transfer Medical Ownership**. These two options exist because the **Transfer Case** page is used by both Funeral Home personnel and Medical Facility personnel.

Transfer Case

Transfer Personal Ownership To:
  



Transfer Medical Ownership To:
  



Message

The following case has been transferred to your facility: Case Id: 38177 - John Smith, Date of Death: Nov-01-2013 transferred by Acadia Hospital.

3. Whether signed in as a medical facility user or a funeral home user, only one transfer option will be available. In the example below, the **Transfer Medical Ownership To:** option is available because the current user is a physician. Medical Facility users can transfer **Medical Ownership** of a record, but not **Personal Ownership**.

Transfer Case

Transfer Personal Ownership To:
  

Transfer Medical Ownership To:
  

Message

The following case has been transferred to your facility: Case Id: 38177 - John Smith, Date of Death: Nov-01-2013 transferred by Acadia Hospital.

Note: There are two types of ownership: Personal, which is controlled at the Funeral Home, and Medical, which is controlled by the governing medical facility. The availability of each is dynamically controlled based on user security profile.

4. To **Transfer Medical Ownership**, place a checkmark in the **Transfer Medical Ownership To:** checkbox.

Transfer Case

Transfer Personal Ownership To:

Transfer Medical Ownership To:

Message

The following case has been transferred to your facility: Case Id: 38177 - John Smith, Date of Death: Nov-01-2013 transferred by Acadia Hospital.

Clear Save Return

5. Next, use the **Lookup** control to select the receiving facility. The facility box will pop-up.

Transfer Case

Transfer Personal Ownership To:

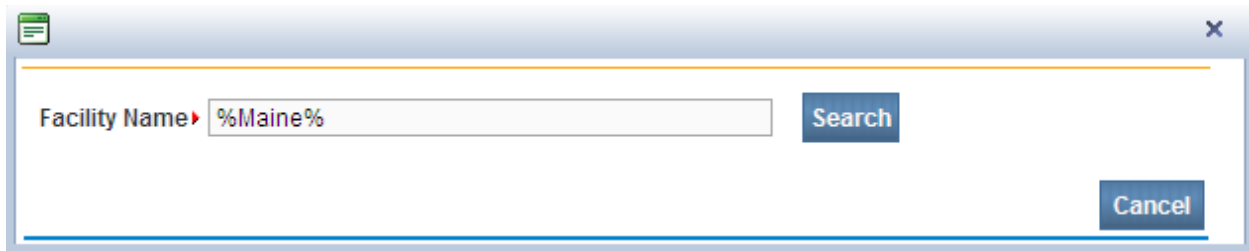
Transfer Medical Ownership To:

Message

The following case has been transferred to your facility: Case Id: 38177 - John Smith, Date of Death: Nov-01-2013 transferred by Acadia Hospital.

Clear Save Return

6. Key in the facility name or use a wild card search.



A dialog box titled "Facility Name" with a search input field containing "%Maine%", a "Search" button, and a "Cancel" button.

A wild card search (%Maine%) will return all facilities that contain the word "Maine". A wild card search (Maine%) will return all facilities that begin with the word "Maine".

7. Click Select at the end of the facility name row.

Facility Name:



Facility Name	Address	City	
Central Maine Medical Center	300 Main St	Lewiston	select
Eastern Maine Medical Center	123 Any Street	Bangor	select
Eastern Maine Medical Center (Hampden)	7 Main Road North	Hampden	select
Hospice of Southern Maine	123 Any Street	Scarborough	select
Maine Coast Memorial Hospital	123 Any Street	Ellsworth	select
Maine Medical Center	123 Any Street	Portland	select
Maine Veterans Home (Augusta)	310 Cony Rd	Augusta	select
Maine Veterans Home (Bangor)	44 Hogan Rd	Bangor	select
Maine-Dartmouth Family Practice (Fairfield)	4 Sheridan Drive	Fairfield	select
MaineGeneral Medical Center (Augusta Campus)	6 Chestnut St	Augusta	select



First 1 2 Last Total records : 15

8. Finally, select **Save** to save changes and transfer ownership of the record, **Clear** to clear all entries and begin again, or **Return** to leave this page without saving changes and return to the previous page.

The user who transferred the case will still have access to the case.

Transfer Case

Transfer Personal Ownership To:
  

Transfer Medical Ownership To:
  

Message

The following case has been transferred to your facility: Case Id: 38177 - John Smith, Date of Death: Nov-01-2013 transferred by Acadia Hospital.

Section 6: Work Queues

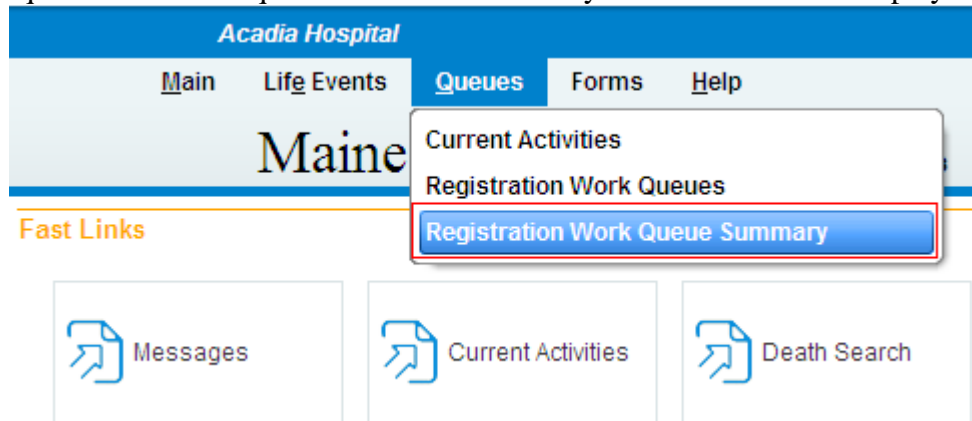
In this section, you will learn how to navigate through the various **DAVE™** work queues. From the **Home** page, select **Queues**. Queues are used to group death cases together based on the amount of work that has been done with them and the amount of work that still needs to be done.

This grouping is accomplished through the assignment of work queue statuses based on validation rule failures.

Exercise 6.1 – Work Queue Summary

Skill Learned: How to access records via work queues. As registrations work their way through DAVE™, they will pass from one work queue to another. **Queues** represent the statuses assigned to records in DAVE™.

1. From the **Home** page, select **Queues**. This will bring up a listing of all the available work queues containing cases. **Queues** contain registrations, orders, or amendments having a work queue status. If a queue does not contain any cases it will not be displayed in the list.



2. The default sort order is by **Queue Name**. Notice however, that the column headers in the summary table are all blue hyperlinks. Clicking any of these links will change the sort order of the table based on that column's content.

Click any of the column headers to resort the work queue summary table.

Registration Work Queue Summary

Queue Name	Type ↓	Count	Age of Oldest in Days
Certification Required	Death	1	23
Medical Pending	Death	2	2
			Total Queues : 2

Note: The actual work queues available will vary based on user type and user security setup.

3. **Type** indicates the kind of record being presented. (e.g., Death, Birth).
4. **Count** indicates how many cases are in the queue. **Age of Oldest in Days** indicates the age of the oldest record in the queue.

- Click any link in the **Queue Name** to view a list of the items currently found in that particular queue. In the example shown here there are 2 cases in the **Medical Pending** queue. Click the [Medical Pending](#) link to open the queue.

Queue Name	Type ↓	Count	Age of Oldest in Days
Certification Required	Death	1	23
Medical Pending	Death	2	2
			Total Queues : 2

- Click any [Registrant](#) name or [Case Id](#) link to open that record for review or editing.

Search by Registration Work Queue

Queue: Search Type: Value:

Display rows per page. Filter:

All	Case Id	File Number	Registrant	Date of Event ↑	Data Provider
<input type="checkbox"/>	38158		Lane, Paul	Oct-30-2013	
<input type="checkbox"/>	38153		Peabody, John	Oct-30-2013	
					Total records : 2

Actions: Register Event, Abandon Case, Certify Registration

Add: Comments

Print

Appendices

Appendix 1 – Glossary of Icons and Controls

There are several different types of **icons** and **controls** used in **DAVE™**. Many of these are industry-standard or universal controls that you may already be familiar with from using other programs and/or websites. Others, are **DAVE™** specific controls that you will not find anywhere else.



Auto-populate Button – this control can be clicked on using your mouse’s left click button. This control is used in conjunction with a dropdown list to auto-fill information relevant to the entity selected within the dropdown list.

Auto-populate Tool Tip: this is an onscreen tool-tip that appears whenever the cursor is allowed to ‘hover’ over an Auto-populate button. This is simply a visual indicator that the auto-populate feature can be used.



Calendar: this is an onscreen control containing several other controls. There are two dropdown lists, one for selecting the month and the other for selecting the year. The default calendar displayed will be for the current month and year with the current day displayed in red. Clicking any day of any date

Exercises

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will cause that date to be displayed in the corresponding **Date Entry** text box using a MMDDYYYY format.



- **Calendar Icon:** this is an onscreen control that can be clicked on using your mouse's left click button. This icon is used in conjunction with Date Entry text boxes. Clicking this icon will bring up the Calendar control that can be used to select a specific date.



- **Checkboxes:** these are universal, onscreen controls that can be clicked on using your mouse's left click button. Checkboxes are used for making selections among various onscreen options. More than one checkbox can be selected at a time (compared to **Radio Buttons** that can only be selected one at a time.) **Checkboxes** exist in two states: **Checked** and **Unchecked**. To check a checkbox just click in the box with your mouse. Clicking unchecked checkboxes will place a checkmark (☑) in the checkbox. Clicking a checked checkbox will remove the checkmark.

Validate Page

Next

Clear

Save

Return

- **Click Buttons:** these are universal controls that can be clicked on using your mouse's left click button. They are used to accept data inputs, write information to databases and usually trigger the processing of underlying system code.

Person/Organization:

- **Dropdown Lists:** these are universal, onscreen controls that can be selected from using your mouse's left click button. Clicking the down-arrow button will cause a list of selectable options to dropdown. Clicking any option in the list will select it and display it in the text box field.

Person/Organization:

First:

Middle:

Last:

Gender:

SSN:

Date of Birth: Start:


Certifier
Decedent
Decedent Father
Decedent Mother
Decedent Surviving Spouse
Funeral Director
Funeral Home
Informant
Local Registrar
Medical Examiner/Coroner



- **Fix Icons:** this is an onscreen icon that appears only in the **DAVE™ Validation Frame**. Clicking this icon will send the cursor to the field containing invalid information so that it can be corrected.


First:


Labels –are universal controls or fields. Actually, most fields have labels. A **Label** tells you what type of information is displayed in a field or what type of information to place in a field. In our example here, the field has a label containing the word **First**. That tells you to place the Decedent's first name in this text box field.


 - **Radio Buttons:** these are universal controls that can be selected using your mouse's left click button. Clicking a radio button will fill in (●) the circle. Unlike **Checkboxes**, which allow for multiple selections, only one **Radio Button** per group of buttons may be selected at one time. For example, you might use a radio button to select a brand of car to purchase, but use checkboxes to add all the features you want.

First:

Text Entry Boxes: these are universal controls used to record information. **Text Entry Boxes** can be formatted to accept only text, a combination of text and numbers, numbers only or dates. In this example, the **Text Box** is being used to record someone's **First** name. In this case, the text entry box is formatted to prevent the entry of any numbers or special characters. Some **Text-Entry Boxes** are display only.

 - **Validation Arrow-Green:** this is a display only icon. Clicking it has no effect. This icon is used in the **Death Registration Menu** and indicates that a **DAVE™** information page contains valid information.

 - **Validation Arrow-Red:** this is a display only icon. Clicking it has no effect. This icon is used in the **Death Registration Menu** and indicates that a **DAVE™** information page contains invalid information that must be corrected before certification will be allowed.

 - **Validation Arrow-Yellow:** this is a display only icon. Clicking it has no effect. This icon is used in the **Death Registration Menu** and indicates that a **DAVE™** information page contains information that may be invalid and must be corrected or overridden before certification will be allowed.

Appendix 2 – Usage and Common Conventions

This appendix consists of useful tips and tricks to help you become a more efficient user of the DAVE™ application. These hints will actually help you with almost any Windows based application.

1. **Focus – Focus** determines which field on the page will receive the action. For example, if an empty text box has the focus then a flashing cursor will appear in the far left hand side of the box. Anything you type will appear in the text box.

The presence of the cursor tells you that this box has the Focus.

Address

Street Number	Pre Directional	Street Name	Apartment Number	
1234	E	Springfield		
City or Town	County	State	Country	Zip Code
New York		New York	United States	10011
Inside City Limits				
Yes				

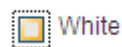
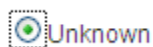
If a pre-filled textbox has the focus then the text in that box will be highlighted. If you type here with the text highlighted, the current text will be deleted.

The highlighted text within this box indicates this control has the Focus.

Address

Street Number	Pre Directional	Street Name	Apartment Number	
1234	E	Springfield		
City or Town	County	State	Country	Zip Code
New York		New York	United States	10011
Inside City Limits				
Yes				

If a **Checkbox** or **Radio Button** receives the focus then a dotted line will surround the checkbox or radio button.



2. **Passing the Focus** There are two ways to pass the focus to a field: clicking the field with your mouse or pressing the **Tab** key until the desired field is highlighted.

The most common way of placing the focus on a field is by clicking the field with your mouse. This is also the slowest and least efficient way of passing the focus from one field to the next.

Instead, learn to use **Tab** and **Shift-Tab** to pass the focus back and forth among the fields. Using **Tab** will advance the focus forwards. **Shift-Tab**, which is triggered by holding down the **Shift** key while pressing the **Tab** key, will pass the focus back to the previous field.

Every page is structured a little differently. Exactly where **Tab** and **Shift-Tab** sends the Focus will vary, but it should always advance you logically from one field to the next.

3. **Keyboard Shortcuts** – Now that you understand what **Focus** is and how to pass it from one field to the next, let's see how you can use it to become a more efficient **DAVE™** user.

If a **Text Entry Box** has the **Focus**, then just start typing to fill in the box. Note: If the text entry box already contains text, then when it receives the focus that text will be highlighted. Anything typed while the text is highlighted will replace the old text.

If a **Checkbox** has the **Focus**, then pressing the spacebar will check or uncheck the control.

If a **Dropdown List** receives the **Focus** then you have several options:

- Use the mouse to click the down-arrow to reveal the list of selectable options. However, try to avoid using the mouse.
- If you know the first letter of the option you want to select, then just type that letter. The focus will then shift down to the first option in the list beginning with that letter.
- If there are multiple selections beginning with that letter, then keep typing it until your desired option shows up. Then, **Tab** off of the list to save that selection.
- Use the **Up** and **Down Arrows** on your keyboard to scroll through the list of options. When the correct option is highlighted, use the **Tab** key to save that selection and move to the next field.
- Hold down the **Alt** key and press the **Down-Arrow** button on your keyboard to reveal the list. Then, using either your mouse or the **Up** and **Down Arrows**, make your selection and **Tab** off to the next field or hit the **Enter** button.

If a Click Button receives the focus you have two options:

- Use the **Spacebar** to “press” the button, or
- Use the **Enter** key to “press” the button

Selecting the **F12** key while your cursor is in a Date field will autofill the date field with the current date.