

**Commonwealth of Kentucky**

Cabinet for Health and Family Services



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# KENTUCKY ELECTRONIC DEATH REGISTRATION SYSTEM (KY-EDRS)

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MEDICAL CERTIFIER  
User Guide

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## QUESTIONS?

FOR ASSISTANCE RESETTING YOUR PASSWORD, OR FOR TECHNICAL DIFFICULTIES CALL **(877) 545-6175**.

FOR ASSISTANCE IN PROPER COMPLETION OF THE DEATH CERTIFICATE, CALL THE STATLINE AT **(866) 451-3781**, OR CALL **(502) 564-4212 EXTENSIONS 3260, 3231 OR 3232**.



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## INTRODUCTION

Welcome to the Kentucky Electronic Death Registration System (KY-EDRS). This secure web-based system was designed to replace the current manual processes associated with the filing of death certificates. The KY-EDRS will be used by funeral home directors and funeral home director assistants, medical certifiers and medical certifier assistants, and personnel in the Cabinet for Health and Family Service's Office of Vital Statistics (OVS).

### Benefits

The KY-EDRS provides many benefits. Among these benefits are:

➤ **Expedited death registration process**

Electronic submission and workflow eliminates the time involved in mailing or delivering certificates to other parties.

➤ **Increased accuracy of death certificates**

Edits built into the system prevent many data reporting errors and omissions.

➤ **Electronic communication between system users**

Funeral home directors and staff, medical certifiers and staff, and the OVS personnel are electronically notified when they have been assigned or reassigned a death certificate. Message boards give funeral home and medical certifier users the ability to attach electronic messages to cases.

➤ **Tracking of status of death certificates**

Users of the KY-EDRS have the ability to view the status of death certificates to determine the current stage of processing the document.

### Flow of the KY-EDRS

Preparation and completion of an electronic death certificate follows the steps listed below. Each step will be discussed in further detail within this guide.

➤ **Funeral director takes possession of the deceased**

When a funeral director takes possession of the deceased, the funeral director portion of the death certificate will be completed electronically. If the medical certifier is a KY-EDRS user, the funeral director electronically signs the certificate and electronically submits the certificate to

the medical certifier. A funeral director assistant may complete portions of the death certificate and assign it to the funeral director for signature and submission to the medical certifier.

If the medical certifier is NOT a KY-EDRS user, the funeral director completes the funeral director's portion, prints the certificate on 25% cotton bond paper with a visible watermark, and manually forwards the printed certificate to the medical certifier. This process is "Drop-to-Paper".

➤ **Medical certifier receives death certificate from funeral director**

If the medical certifier is a KY-EDRS user, the death certificate will be received electronically from the funeral director. After verification that the death certificate belongs to the assigned medical certifier, the medical portion will be completed electronically, electronically signed by the medical certifier, and then electronically submitted to the OVS for further processing. A medical certifier assistant may complete the medical portion of the death certificate, and assign it to the medical certifier for electronic signature and submission to the OVS.

If the medical certifier detects any errors in the funeral director's portion of the certificate, the medical certifier may electronically reassign the certificate to the funeral director.

If the medical certifier is NOT a KY-EDRS user, he/she will receive a paper copy of the certificate from the funeral director. The medical certifier will manually complete and return the certificate to the funeral director for submission to the OVS according to current procedures.

➤ **Office of Vital Statistics (OVS)**

If the medical certifier is a KY-EDRS user, the medical certifier will electronically submit the death certificate to the OVS. OVS personnel will review the certificate and if any discrepancies are found, the OVS has the ability to reassign directly to the funeral director, medical certifier, or both. If no discrepancies are found, the OVS staff will complete the filing of the death certificate and assign a state file number. Requests for copies and certified copies will be processed.

If the medical certifier is NOT a KY-EDRS user, the completed paper copy of the certificate will be returned to the funeral home, and the funeral home will send the certificate to the OVS. The certificate will be reviewed by the OVS and processed in accordance with current procedures.

➤ **Tracking of status**

Users of the KY-EDRS have the ability to track the status of a death certificate from the time it is started through completion.

➤ **Electronic notification**

KY-EDRS users can be notified via email whenever a KY-EDRS case is assigned to them. Additionally, KY-EDRS users have the option of being notified via email whenever the status of a death certificate changes.

**NOTE: THE PROVISIONAL REPORT OF DEATH (VS-34) IS NOT INCLUDED IN THE KY-EDRS AT THIS TIME.**

## Help Desk Telephone Numbers

Cabinet for Health and Family Services (CHFS) personnel are available Monday through Friday, except for recognized State Holidays, to answer questions or provide assistance in using the KY-EDRS. Please use the following telephone numbers:

- For questions regarding use of the KY-EDRS call (877) 545-6175 between the hours of 8:00 and 4:30 (Eastern Time).
- For assistance in resetting your password call (877) 545-6175 between the hours of 8:00 and 4:30 (Eastern Time).
- For questions regarding proper completion of the death certificate (business rules) call the STATLINE at (866) 451-3781, or call (502) 564-4212, extensions 3980, 4425, or 3260 between the hours of 8:00 and 4:30 (Eastern Time).

## TECHNICAL REQUIREMENTS

### Internet Connection

A high speed internet connection is required.

### Browser

The KY-EDRS is designed to operate with Internet Explorer 8.0 or higher.

### Monitor Resolution

The KY-EDRS can best be displayed with screen resolution set at 1024 X 768 pixels.



## OBTAINING ACCESS TO KY-EDRS

The KY-EDRS is a secure web site with Secure Socket Layer (SSL) 128-bit encryption. Requests for access to the system are reviewed and granted final approval by the OVS personnel.

**A VALID USERNAME AND PASSWORD ARE REQUIRED TO ACCESS THE KY-EDRS. IT IS IMPORTANT THAT PROPER SAFEGUARDS BE USED TO PROTECT THE CONFIDENTIALITY OF YOUR USERNAME AND PASSWORD. INFORMATION ENTERED IN THE KY-EDRS WITH YOUR USERNAME AND PASSWORD CONSTITUTES AN ELECTRONIC SIGNATURE. DO NOT SHARE YOUR USERNAME AND PASSWORD WITH ANYONE. DO NOT POST YOUR USERNAME AND PASSWORD IN A CONSPICUOUS PLACE. LOCK YOUR COMPUTER OR LOG OUT OF THE KY-EDRS WHEN LEAVING YOUR WORKSTATION.**

## Roles in the KY-EDRS

Medical certifier and medical certifier assistant, and coroner and deputy coroner roles are available within the KY-EDRS. Specific tasks available to these roles include:

- Accept or reject electronic records received from the funeral director
- Read-only access to the funeral director's portion of certificates
- Edit the medical certifier portion of certificates
- Print draft certificate copies
- View completed records
- Edit records returned from the OVS
- Add or review message board entries

Medical certifier, coroner and deputy coroner roles include the following additional functionality that is not available to the medical certifier assistant role:

- Approve and electronically sign electronic records
- Submit electronic records to the OVS
- Submit requests to grant access to the medical certifier assistants



**FOR DETAILED INSTRUCTIONS TO REGISTER AND OBTAIN ACCESS TO THE KY-EDRS, PLEASE REFER TO PAGE 31 IN THE LAST SECTION OF THIS USERS GUIDE.**

## NAVIGATING THROUGH THE KY-EDRS

Some navigation options are common throughout the KY-EDRS. These will be described in this section. Specific screens will be addressed in subsequent sections of this guide.

### Web Address

**“Real Live-Data Actual Production”** <https://kog.chfs.ky.gov/home/> (for **REAL LIVE-DATA “PRODUCTION”**). You may type these addresses directly into your web browser’s address line.

### Moving from One Field to Another

The tab key can be used to move from one field to another within the KY-EDRS. Clicking the left mouse button on the desired field will also position the cursor in that field.

### Mouse Roller Ball

Exercise caution when using the mouse roller ball to scroll up and down a screen. Once you have made a selection in the drop-down box, be sure to click out of the drop-down box before scrolling. Otherwise, incorrect data may be selected.

### Drop-down Boxes

Many fields contain drop-down boxes reflecting a variety of selections. You may click on the arrow, scroll through the list, and click on the appropriate entry. Alternatively, you can click in the box and press the appropriate letter for your selection. If multiple selections begin with the same letter, continue pressing the letter until the correct selection appears. For example, to make a selection of “Allen” in the “County” field, pressing the “A” key once brings up “Adair”. Pressing the “A” key a second time brings up “Allen”.

### Required Fields

Required fields are indicated with a red asterisk.

### Date Fields

Date formats are generally two digit month, two digit day and four digit year (mm/dd/yyyy). It is not necessary to enter the diagonal slash marks, the system will enter them for you as you key in the date.

### Left Menu Bar

A menu bar located on the left side of the screen enables you to go to another screen.



## Previous and Next Buttons

Previous and Next buttons may be used to move from one screen to another. **DO NOT USE YOUR BROWSER'S BACK ARROW BUTTON OR THE KEYBOARD BACKSPACE KEY TO RETURN TO THE PREVIOUS SCREEN!**

## Cancel Button

The Cancel button is used to cancel the activity in process. The data you entered on the current screen will not be retained.

## Save & Exit

Clicking on the Save and Exit button allows you to save the information entered prior to closing that particular record.

## Task List

Some screens (to be noted later in this guide) may show a Task List when an attempt is made to leave that screen. The items in the "Task List" are incorrect or omitted "required" entries. The associated fields will be highlighted in yellow.

## Skip Tasks and Continue

The Skip Task and Continue box can be checked to allow the user to proceed to another screen or save and exit the record without making corrections to the errors listed. The user can return later to this screen to correct or add information.

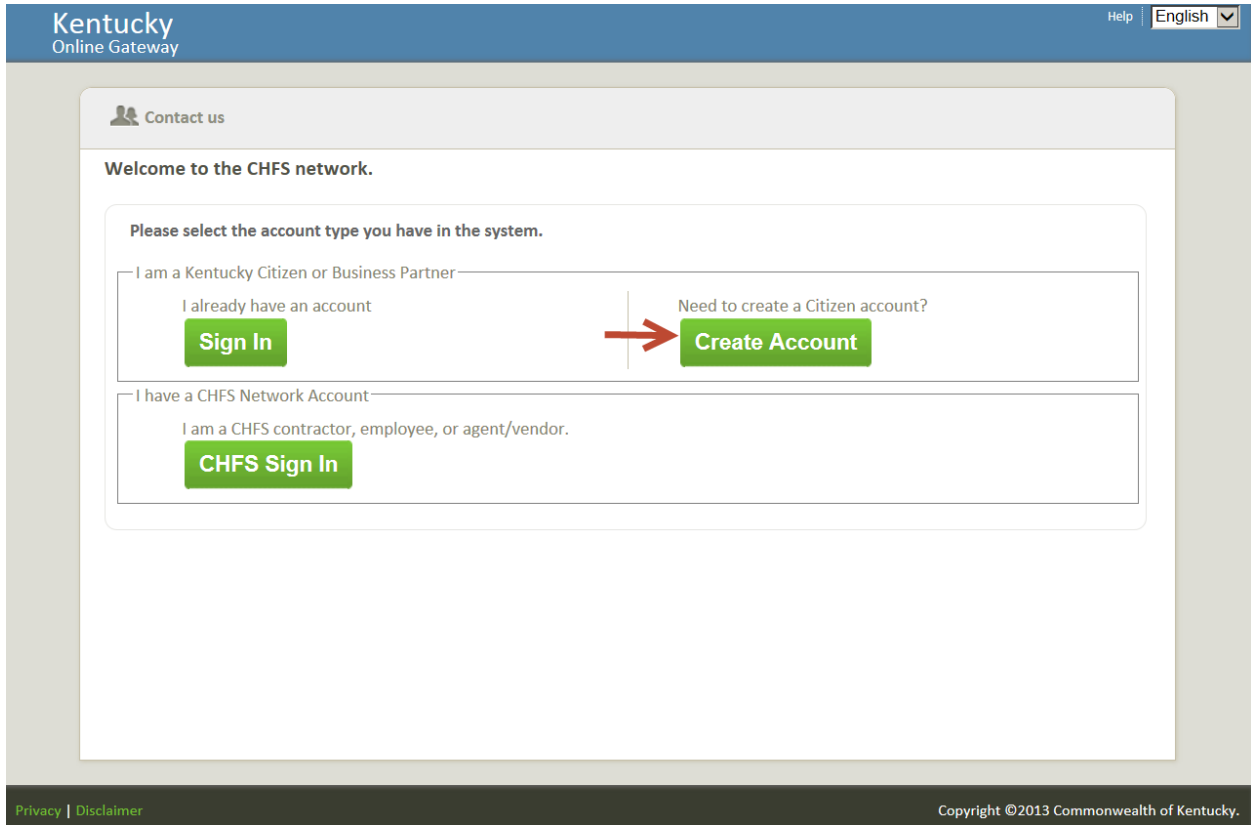
## Logout

It is important that you logout properly from the KY-EDRS whenever you are finished with a session. Always select the **Logout** button from the Left Menu Bar to logout.

# GETTING STARTED

## Login Screen

The login screen allows registered KY-EDRS users to access the system.



Enter your Username and Password, taking care to ensure the appropriate upper or lower case is used.

**Kentucky**  
Online Gateway

DEV

Help | English

### Citizen Log In

Login with your Kentucky Online Gateway Citizen Account.

Username or Email Address [Forgot Username?](#)

Password [Forgot Password?](#)

**Log In**

[Resend Account Verification Email](#)

**Don't already have a Kentucky Online Gateway Citizen Account?**

**Create An Account**

**WARNING**  
NOTICE: This is a government computer system and is the property of the Commonwealth of Kentucky. It is for authorized use only regardless of time of day, location or method of access. Users (authorized or unauthorized) have no explicit or implicit expectation of privacy. Any or all uses of this system and all files on the system may be intercepted, monitored, recorded, copied, audited, inspected, and disclosed to authorized state government and law enforcement personnel, as well as authorized officials of other agencies, both domestic and foreign. By using this system, the user consents to such at the discretion of the Commonwealth of Kentucky. Unauthorized or improper use of this system may result in administrative disciplinary action and/or civil and criminal penalties. The unauthorized disclosure of Data containing privacy or health data may result in criminal penalties under Federal authority.

Privacy | Disclaimer

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State Employee Gateway Login



Click the **Sign-In** button, and then select KY-EDRS from the Application List.

The screenshot shows the 'Kentucky Online Gateway' user interface. At the top, there is a blue header with the text 'Kentucky Online Gateway' on the left, 'UAT' in the center, and 'Welcome Deena Jones | My Account | Sign Out | Help | English' on the right. Below the header, a white box contains the text 'Deena Jones, Welcome to Kentucky Online Gateway'. Underneath, the section is titled 'Your Applications'. A message states: 'These are the applications you have been granted access to. Need to access a different application? [Request access here].'. A table with one row is shown, with a header 'Application Name' and a cell containing 'KY -EDRS' (highlighted with a red arrow) and 'Kentucky Electronic Death Registration System'. Below the table, there is a link '> Request Access to another application.' and a small blue icon. At the bottom of the page, there is a dark footer with 'Privacy | Terms of Use' on the left and 'Copyright ©2013 Commonwealth of Kentucky. All Rights Reserved.' on the right.



## Facilities Information Screen

If a user has registered for more than one facility, or for more than one role, the Select Facility Screen will be shown to allow the user to make the appropriate selection. For users registered for only one facility, the Home Screen will appear after clicking the **Log-in** button on the Login Screen.

The screenshot shows the 'Select Facility' screen on the Kentucky EDRS website. The page header includes 'KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES EDRS' and navigation links like 'About CHFS', 'Contact Us', and 'Forms and Documents'. The main content area features the Kentucky logo and a form titled 'Select Facility'. The form contains the instruction 'Please select the facility you would like to work' and a 'Select Facility' dropdown menu. The dropdown menu is open, showing options: '-- Select --', 'Select', 'TRAINING FUNERAL HOME(FUNERAL HOME DIRECTOR)', and 'TRAINING MEDICAL CERTIFIER(MEDICAL CERTIFIER)'. A 'Select' button is located to the right of the dropdown. The footer contains links for 'Contact Us', 'Site Map', 'Privacy', 'Disclaimer', and 'Individuals with Disabilities', along with a copyright notice for 2005 Commonwealth of Kentucky.

Select the desired facility from the drop-down box, and then click the **Select** button. This will take you to the Home Screen.

## Home Screen

The Home Screen allows users to:

- view a list of cases and the status of each case,
- select a particular case for action,
- set preferences for email notifications,
- view or print a copy of the user guide, and
- logout.

Kentucky Electronic Death Registration System(KY-EDRS) - Windows Internet Explorer

Kentucky.gov KY Agencies | KY Services

**KENTUCKY**  
CABINET FOR HEALTH AND FAMILY SERVICES  
EDRS  
About CHFS | Contact Us | Forms and Documents

**TRAINING MEDICAL CERTIFIER(MEDICAL CERTIFIER)**

EDRS Menu  
Home  
Email Notification Options  
Change Facility  
User Guide  
MC User Guide  
Log Out  
Logout

Active Cases All Cases Completed Cases Search Case

Select Medical Certifier/Coroner: -- All --

	EDRS Case #	Decedent's Last Name	Decedent's First Name	Date of Death	County of Death	Status			
Select	E201309260002	KAUF	BENNIE	04/07/2013	MCCRACKEN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309250006	ALLENS	TERRI	05/05/2013	WARREN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309250005	COLEMAN	WILLIAM	04/01/2013	FRANKLIN	ACCEPTED BY MEDICAL FACILITY	Post/View Messages	Print	History
Select	E201309250002	HART	JIM	05/01/2013	ROWAN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309230002	TYREE	ALICE	09/21/2013	WARREN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309230001	LANE	JERRY	09/20/2013	MCCRACKEN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309040003	MCDANIELS	CRAIG	09/04/2013	JEFFERSON	ACCEPTED BY MEDICAL FACILITY	Post/View Messages	Print	History
Select	E201309040002	SMITH	SANDY	06/30/2013	JEFFERSON	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309030002	RABBIT	GEORGE	09/03/2013	FRANKLIN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309030001	JACKSON	GREGORY	09/02/2013	FAYETTE	SUBMITTED TO MC	Post/View Messages	Print	History

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Left Menu Bar

Cases List

## Cases Lists

The Cases List on the Home Screen shows three lists of medical certifier cases. Clicking on the appropriate tab will show:

- 'Active Cases' which have been submitted to the medical certifier and still require action by the medical certifier.
- 'Completed Cases' which have been certified by the medical certifier, and processing by the OVS has been completed.
- 'All Cases' which contain a list of all cases that have been assigned to the medical certifier. This list includes both active and completed cases.

Lists may be sorted by clicking on the desired column header. The columns shown include:

- State File Number – this is the number assigned by the OVS upon approved filing of a death certificate. This column appears only on "Completed Cases" and "All Cases" lists.
- KY-EDRS Case # – the KY-EDRS Case # is a unique identification number assigned by the system once a new case has been started. The number follows the format EYYYYMMDDXXXX. The "E" indicates the case was originated in the KY-EDRS. The "YYYY", "MM", and "DD" indicate the entry date the case was started in the KY-EDRS. "XXXX" is a sequential number for all KY-EDRS cases, starting with "0001" for the first case entered each day.
- Decedent's Last Name
- Decedent's First Name
- Date of Death
- County of Death
- Status of Case – this column appears on "Active Cases" and "All Cases" lists.
  - Submitted to Medical Certifier
  - Accepted by Medical Certifier
  - Submitted to the Office of Vital Statistics
  - Re-Submitted to the Office of Vital Statistics
  - Approved by the Office of Vital Statistics
  - Returned to Funeral Director by the Office of Vital Statistics
  - Resubmitted to Medical Certifier
  - Returned to Medical Certifier by the Office of Vital Statistics
  - Returned to Funeral Director and Medical Certifier by the Office of Vital Statistics
  - Rejected by Medical Certifier
- View Certificate – appears only on "Completed Cases" list.
- Post or View Messages
- Case History



From the “Selected View” drop-down box, you may choose to view the latest twenty cases or all recent files (those cases that were entered in the last two months). Cases are archived two months after completion.

For lists of all recent cases, each screen includes up to ten cases, with the most recent case listed first. When there are more than ten cases, a message will indicate “Page 1 of X Pages”. Movement to other screens in the list can be accomplished by clicking the **1<sup>st</sup> Page**, **Prev**, **Next**, or **Last Page** buttons.

## Search for a Case

To quickly locate a case within the medical certifier facility, click the **Search Case** tab.

The screenshot shows the 'TRAINING MEDICAL CERTIFIER(MEDICAL CERTIFIER)' search interface. At the top, there is a navigation bar with 'KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES' and 'EDRS' links. Below this, a search form is displayed with tabs for 'Active Cases', 'All Cases', 'Completed Cases', and 'Search Case'. The search form includes fields for 'Last Name', 'First Name', 'Date of Death' (with a format hint '(mm/dd/yyyy)'), 'County Of Death' (a dropdown menu), 'EDRS Case #', and 'Case Status' (another dropdown menu). There are 'Search' and 'Reset' buttons at the bottom of the form. A red note below the form states: 'Note: To perform the search at least one item needs to be filled.' The left sidebar contains an 'EDRS Menu' with options like 'Home', 'Email Notification Options', 'Change Facility', 'User Guide', and 'Log Out'. The footer contains contact information and a copyright notice for 2005.

Fields that may be used to search include:

- Decedent’s Last Name
- Decedent’s First Name
- Date of Death
- County of Death (select applicable county from the drop-down box)
- KY-EDRS Case #



- Case Status (selected from a drop-down box)

After entering data in at least one field (in addition to the “Search Within” field), click the **Search** button.

## Search Results Screen

Records which meet the search criteria are shown on the Search Results Screen.

**Kentucky Electronic Death Registration System(KY-EDRS) - Windows Internet Explorer**

Kentucky.gov  
**KENTUCKY**  
 CABINET FOR HEALTH AND FAMILY SERVICES  
 EDRS  
 About CHFS | Contact Us | Forms and Documents

**TRAINING MEDICAL CERTIFIER(MEDICAL CERTIFIER)**

Active Cases | All Cases | Completed Cases | Search Case

Select	State File Number	Vol #	EDRS Case #	Decedent's Last Name	Decedent's First Name	Date of Death	County of Death	Certificate Status	Print	History
Select			E201309250006	ALLENS	TERRI	05/05/2013	WARREN	SUBMITTED TO MC	Print	History
Select			E201309230002	TYREE	ALICE	09/21/2013	WARREN	SUBMITTED TO MC	Print	History
Select	201000200	001	E201009100004	GREEN	ANGELA	09/10/2010	WARREN	APPROVED BY OVS	Print	History
Select			E201008300002	COLLINS	MELISSA	08/27/2010	WARREN	SUBMITTED TO OVS	Print	History
Select			E201007020001	COX	ANNIE	06/30/2010	WARREN	RE-SUBMITTED TO OVS	Print	History
Select			E201006190002	WARD	TIM	05/10/2009	WARREN	SUBMITTED TO OVS	Print	History
Select			E201006170010	WARD	JACOB	06/02/2010	WARREN	SUBMITTED TO OVS	Print	History
Select	201000165	001	E201006170008	BROWN	MURPHY	06/11/2010	WARREN	APPROVED BY OVS	Print	History
Select			E201006170006	KING	ROBERT	06/02/2010	WARREN	SUBMITTED TO OVS	Print	History
Select			E201006170005	JONES	JANE	05/10/2010	WARREN	SUBMITTED TO OVS	Print	History

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Last Name:   
 First Name:   
 Date of Death:  (mm/dd/yyyy)  
 County Of Death:   
 EDRS Case #:   
 Case Status:

*Note: To perform the search at least one item needs to be filled.*

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If no cases are found which meet the search criteria, a message to that effect will be shown in the Task List portion of the screen.

The screenshot displays the 'TRAINING MEDICAL CERTIFIER (MEDICAL CERTIFIER)' interface. At the top, it shows the Kentucky Cabinet for Health and Family Services logo and navigation links. The main content area is titled 'Task List' and contains a message: '1. No Results Were Returned Based On Search Permissions, Criteria and/or Filters.' A red arrow points to this message. Below the message is a search form with fields for Last Name (filled with 'jefferson'), First Name, Date of Death (with a '(mm/dd/yyyy)' hint), County Of Death (a dropdown menu), EDRS Case #, and Case Status (a dropdown menu). There are 'Search' and 'Reset' buttons. A note below the form states: 'Note: To perform the search at least one item needs to be filled.' The footer includes contact information and copyright details for the Commonwealth of Kentucky.

To perform another search, first click the **Reset** button and enter the new search criteria.

## ACCEPTING A CASE FROM THE FUNERAL DIRECTOR

From the Home Screen, select the case by clicking the **Select** button in the left column next to the appropriate case.

You may make the option to receive an email to indicate that a funeral director has submitted a case to you for medical certification. (Please refer to the EMAIL NOTIFICATION OPTIONS on page 28 of this users guide. It is recommended that you receive email notifications for all activity. )

## Review FD Portion

You will now see the Review FD Portion Screen for the selected case. You cannot change any information on this screen; however, you should carefully review the entries. If any of the data is



incorrect, the case can be returned to the funeral director for correction. (Please refer to RETURNING A CASE TO THE FUNERAL DIRECTOR on page 21 of this users guide.)

## Decedent Information

This section of the screen shows details specific to the decedent.

The screenshot shows a web browser window titled "Review FD Portion - Windows Internet Explorer". The page header includes "Kentucky.gov" and "KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES". The main content area is titled "Review FD Portion" and contains a "Decedent Information" section with the following details:

1a.	Decedent's Name:	JERRY WILLIAM LANE
2.	Sex:	MALE
3.	Date of Death:	09/20/2013 <input checked="" type="checkbox"/> Actual <input type="checkbox"/> Presumed <input type="checkbox"/> Date Found
4.	Social Security Number:	<input checked="" type="checkbox"/> Not Obtainable <input type="checkbox"/> None <input type="checkbox"/> Unknown
5a-c.	Age:	<input type="checkbox"/> Unknown Last Birthday (Years): 60
6.	Date of Birth:	04/19/1953 <input type="checkbox"/> Unknown
7.	County Of Death:	MCCRACKEN
8.	Place Of Death:	ER/OUTPATIENT
9.	Facility Name:	WESTERN BAPTIST HOSPITAL
10.	Facility Address:	2501 KENTUCKY AVENUE PADUCAH, KY 42003-3200 County MCCRACKEN
11.	Birth Place:	City: PADUCAH State & Country: KENTUCKY, UNITED STATES
12.	Marital Status:	DIVORCED
14.	Decedent's Usual Occupation:	FIREFIGHTER <input type="checkbox"/> Unknown
15.	Kind of Business/Industry:	CITY GOVERNMENT <input type="checkbox"/> Unknown
16.	Was Decedent ever in US Armed forces?	YES
17a-f.	Decedent's Residence:	<input type="checkbox"/> Unknown Decedent's Residence: 5821 MAPLE STREET WEST PADUCAH, KY 42086 County MCCRACKEN This address is inside city limits.
18.	Decedent's Education:	ASSOCIATE DEGREE (E.G., AA, AS)
19.	Decedent of Hispanic Origin?	NO, NOT SPANISH/HISPANIC/LATINA
20.	Decedent's Race:	BLACK OR AFRICAN AMERICAN



## Parents & Informant Information

This section of the screen shows details relevant to the decedent's parents and to the person providing information about the decedent.

Parents & Informant Information	
21. Father's Name:	GARY LOUIS LANE
22. Mother's Name:	MARY K MANN
23a. Informant's Name:	GARY LOUIS LANE
23b. Relationship to Decedent:	FATHER
23c. Mailing Address:	5698 MAIN STREET PADUCAH, KY 42156

## Disposition Information

This section of the screen shows information about the disposition of the decedent.

Disposition Information	
24. Method of Disposition:	BURIAL
25. Place of Disposition:	MEMORIAL GARDENS
26. Location of Disposition:	City: PADUCAH State or Country: KENTUCKY, UNITED STATES

## Funeral Director Information

This section shows details of the funeral director who submitted the case to the medical certifier.

Funeral Director Information	
27. Signature of Funeral Service Licensee:	DEENA JONES
Date Signed:	09/23/2013
28. KY License Number:	123456
29. Name and Address of Funeral Service Licensee Facility (Or person acting as such):	Facility Name: TRAINING FUNERAL HOME 100 MAIN ST ANYTOWN, KY 45678
<input type="checkbox"/>	I accept this case as Medical Certifier/Coroner. Please select the below 'Cause of Death' button to enter cause of death information. <a href="#">Cause Of Death</a> <a href="#">Cancel</a>
<input type="checkbox"/>	I reject this case as Medical Certifier/Coroner and return to Funeral Home. <a href="#">Return to Funeral Director</a>

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If any of the entries appear to be incorrect, refer to the section RETURNING A CASE TO THE FUNERAL DIRECTOR on page 21 of this users guide.

## Accepting the Case

If all the details appear to be correct, click the box adjacent to “I accept this case as Medical Certifier”, and click the **Cause of Death** button.

**Funeral Director Information**

27. Signature of Funeral Service Licensee: **DEENA JONES**  
Date Signed: **09/23/2013**

28. KY License Number: **123456**

29. Name and Address of Funeral Service Licensee Facility (Or person acting as such):  
Facility Name: **TRAINING FUNERAL HOME**  
**100 MAIN ST**  
**ANYTOWN, KY 45678**

I accept this case as Medical Certifier/Coroner. Please select the below 'Cause of Death' button to enter cause of death information.  
**Cause Of Death** **Cancel**

I reject this case as Medical Certifier/Coroner and return to Funeral Home.  
**Return to Funeral Director**

## Cause of Death Screen

The Cause of Death Screen is used to enter pertinent cause of death details.

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**Cause Of Death**

Previous Cancel Next Save & Exit View Certificate

**30. \*Date Pronounced Dead:** (mm/dd/yyyy)

**31. \*Time of Death(24-hour):** Actual Presumed

**32. \*Was case Medical Examiner or Coroner Contacted?**

**33 Part I. \* Cause Of Death:**

*NOTE: Kentucky data indicate that diabetes is likely underreported on death. If known, document diabetes as a "cause of" or "contributing cause of" death as appropriate in Parts I and II.*

PART I. 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. Enter only one cause on each line.

Due To(or As Consequence Of)	Approximate interval B/W Onset and Death
a. <input type="text"/>	<input type="text"/> -- Select --
b. <input type="text"/>	<input type="text"/> -- Select --
c. <input type="text"/>	<input type="text"/> -- Select --
d. <input type="text"/>	<input type="text"/> -- Select --

**33 Part II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I**

**34. \*Manner of Death:** -- Select --

**35. \*Was an Autopsy Performed?**

**37. \*Did Tobacco use contribute to Death?** -- Select --

**38. \*If Female:** -- Select --

**39. \*Date of Injury:** (mm/dd/yyyy) Actual Presumed

**40. \*Time of Injury(24-hour):** Actual Presumed Unknown

Make the appropriate entries in the following fields:

- **30** – Enter the date the decedent was pronounced dead. Enter the two digit month, the two digit day, and the four digit year. It is not necessary to enter the diagonal slash marks; the system will enter them for you as you key in the date.
- **31** – Enter the time of death (using 24-hour clock) and check the appropriate box for **Actual** or **Presumed**. It is not necessary to enter the colon.
- **32** – Make the appropriate selection from the drop-down box to indicate if the medical examiner or coroner was contacted.
- **33 Part I** – Enter up to four causes of death in the text box(es) provided. List the immediate cause first. Indicate the approximate interval between the onset of the cause of death, and death by entering the appropriate number in the text box, and selecting the time interval from the drop-down box. If the time interval is not known, enter **UNKNOWN** in the text box, and select “Unknown” from the drop-down list.
- **33 Part II** – Enter other significant conditions contributing to the decedent’s death, but not resulting in the underlying cause given in Part I.
- **34** – Select the manner of death from the drop-down box.
- **35** – Make the appropriate selection from the drop-down box to indicate if an autopsy was performed.
- **36** – Select the appropriate response to indicate if the autopsy findings are available to complete the cause of death. This question will not show if an autopsy is not performed. (If the answer to #35 is “No”).
- **37** – Select the appropriate response from the drop-down box to indicate if tobacco use contributed to death.
- **38** – Select the appropriate entry from the drop-down box to indicate the decedent’s pregnancy status within the past year. This question will only show for female decedents.

If the Manner of Death in Question 34 is “Natural”, questions 39 through 45 will not be shown.

If the Manner of Death in Question 34 is “Pending Investigation” or “Could not be Determined”, questions 39 through 45 will be shown but not required. Enter details for these questions if known.

41. \*Injury at Work? [-- Select --]

42. \*Place of Injury: [-- Select --]

43. \*If Transportation Injury, Specify: [-- Select --]

44. \*Describe how Injury Occurred: [Text Box]

45. \*Location of Injury (Street and Number, City or Town, State, Zip Code):

Address Line 1 [Text Box] Suite/Apt. Number [Text Box]

Address Line 2 [Text Box]

City [Text Box]

State [-- Select --]

Country UNITED STATES

Postal Code [Text Box] (For US Zip Code use 12345-6789 or 12345)

Previous Cancel Next Save & Exit View Certificate

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- **39** – Enter the date of injury, and check the appropriate box to indicate if the date is “Actual” or “Presumed”.
- **40** – Enter the time of injury, and check the appropriate box to indicate if the time is “Actual” or “Presumed”. Check “Unknown” if the time of injury is unknown.
- **41** – Select the appropriate response from the drop-down box to indicate if the injury occurred at work.
- **42** – Select the place of injury from the drop-down box. If “Other” is selected, the screen is refreshed with a text box for descriptive entry.
- **43** – If the death resulted from a transportation injury, select the decedent’s role from the drop-down box. If “Other” is selected, the screen is refreshed with a text box for descriptive entry.
- **44** – Enter a description in the text box of how the injury occurred.
- **45** - Enter the location of injury. Enter “Address Line 1”. Enter “Suite/Apt. Number” and “Address Line 2” if applicable. Enter the city where the injury occurred, and select the state from the drop-down box.

If the injury occurred in another country, select “Other Country” from the state drop-down box. The other country can then be selected from the drop-down box. If the other country is not on the list, select “Other” and enter the name of the country in the “Specify” box.

Enter the zip/postal code.

Click the **Next** button when all details have been entered.



## Sign & Submit Screen

The next screen gives you an opportunity to review, sign and submit the case to the OVS.

Review the information on the screen. If any errors are detected, click the **Previous** button or make a selection from the left menu bar to go to the proper screen and make corrections.

If you are satisfied that all information is accurate, click the box to the left of the statement “To the best of my knowledge, death occurred at the time, date, and place and due to the causes stated.” Checking this box constitutes an electronic signature. The record can then be submitted to the OVS by clicking the **Submit to OVS** button.

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**Sign & Submit**

EDRS Menu  
Home  
Email Notification Options  
Change Facility

Case Menu  
Review Funeral Director Portion  
Cause Of Death  
**Sign & Submit**

User Guide  
MC User Guide  
Log Out

Previous Cancel Next View Certificate

**Decedent Information**

EDRS Case #: **E201309040003**

1a. Decedent Name: **CRAIG A MCDANIELS**

3. Date of Death: **09/04/2013**

4. Social Security Number: **UNKNOWN**

7. County Of Death: **JEFFERSON**

**Submit to OVS**

To the best of my knowledge, death occurred at the time, date, and place and due to the causes stated.

Submit to OVS

Previous Cancel Next View Certificate

You will receive a screen to confirm that you are ready to submit the case to the OVS.

Click the **OK** button to submit the case, otherwise click the **Cancel** button.

## Submitted to OVS Screen

You will then receive a confirmation screen to indicate that the record has been transmitted to the OVS.

You may now return to the Main Menu or Print the Death Certificate (draft copy) by clicking the appropriate button.

## RETURNING A CASE TO THE FUNERAL DIRECTOR

There may be times when a case is sent to the incorrect medical certifier. Or, there may be questionable entries in the Decedent Information, Parents & Informant Information, Disposition Information, or Funeral Director Information sections. In these instances, the medical certifier may reject the case and return it to the funeral director.

**Parents & Informant Information**

21. Father's Name: **TIMOTHY LEE JACKSON**

22. Mother's Name: **LINDSAY LOUDER**

23a. Informant's Name: **TIMOTHY LEE JACKSON**

23b. Relationship to Decedent: **FATHER**

23c. Mailing Address:  
**236 VALLEY VIEW ROAD  
LEXINGTON, KY 40104**

**Disposition Information**

24. Method of Disposition: **CREMATION**

25. Place of Disposition: **MY CREMATORY**

26. Location of Disposition:  
City: **LEXINGTON**  
State or Country: **KENTUCKY, UNITED STATES**

**Funeral Director Information**

27. Signature of Funeral Service Licensee: **DEENA JONES**  
Date Signed: **09/26/2013**

28. KY License Number: **123456**

29. Name and Address of Funeral Service Licensee Facility (Or person acting as such):  
Facility Name: **TRAINING FUNERAL HOME**  
**100 MAIN ST  
ANYTOWN, KY 45678**

I accept this case as Medical Certifier/Coroner. Please select the below 'Cause of Death' button to enter cause of death information.  
[Cause Of Death](#) [Cancel](#)

I reject this case as Medical Certifier/Coroner and return to Funeral Home.  
[Return to Funeral Director](#)

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Check the square next to the message “I reject this case as Medical Certifier/Coroner and return to Funeral Home”

You may enter a message in the text box to indicate the reason for rejecting the case. Then click the **Return to Funeral Director** button.

Parents & Informant Information	
21. Father's Name:	TIMOTHY LEE JACKSON
22. Mother's Name:	LINDSAY LOUDER
23a. Informant's Name:	TIMOTHY LEE JACKSON
23b. Relationship to Decedent:	FATHER
23c. Mailing Address:	236 VALLEY VIEW ROAD LEXINGTON, KY 40104

Disposition Information	
24. Method of Disposition:	CREMATION
25. Place of Disposition:	MY CREMATORY
26. Location of Disposition:	City: LEXINGTON State or Country: KENTUCKY, UNITED STATES

Funeral Director Information	
27. Signature of Funeral Service Licensee:	DEENA JONES
Date Signed:	09/26/2013
28. KY License Number:	123456
29. Name and Address of Funeral Service Licensee Facility (Or person acting as such):	Facility Name: TRAINING FUNERAL HOME 100 MAIN ST ANYTOWN, KY 45678

<input type="checkbox"/>	I accept this case as Medical Certifier/Coroner. Please select the below 'Cause of Death' button to enter cause of death information.
	<input type="button" value="Cause Of Death"/> <input type="button" value="Cancel"/>

<input checked="" type="checkbox"/>	I reject this case as Medical Certifier/Coroner and return to Funeral Home.
Message:	<input type="text" value="This is not my case."/>
	<input type="button" value="Return to Funeral Director"/>

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The following screen will then be displayed. Click the **OK** button to return the record to the funeral director, or click the **Cancel** button to return to the record for further review.

**Parents & Informant Information**

21. Father's Name: **TIMOTHY LEE JACKSON**

22. Mother's Name: **LINDSAY LOUDER**

23a. Informant's Name: **TIMOTHY LEE JACKSON**

23b. Relationship to Decedent: **FATHER**

23c. Mailing Address:  
**236 VALLEY VIEW ROAD  
LEXINGTON, KY 40104**

**Disposition Information**

24. Method of Disposition: **CREMATION**

25. Place of Disposition: **MY CREMATORY**

26. Location of Disposition:  
City: **LEXINGTON**  
State or Country: **KENTUCKY**

**Funeral Director Information**

27. Signature of Funeral Service Lic...  
Date Signed: **09/26/2013**

28. KY License Number: **123456**

29. Name and Address of Funeral Service Licensee Facility (Or person acting as such):  
Facility Name: **TRAINING FUNERAL HOME**  
**100 MAIN ST  
ANYTOWN, KY 45678**

I accept this case as Medical Certifier/Coroner. Please select the Cause of Death button to enter cause of death information.

I reject this case as Medical Certifier/Coroner and return to Funeral Director.

This is not my case.

Message:

Message from webpage

Are you sure you want to return this case to Funeral Director?

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A confirmation screen will be received to indicate the record has been returned to the funeral director.

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### Confirmation

Confirmation

Case Number: **E201309030001**  
Decedent Name: **GREGORY L JACKSON**  
Date Of Death: **09/02/2013**  
Date Transmitted: **09/26/2013**

Return to Main Menu    Print Death Certificate

EDRS Menu  
Home  
Email Notification Options  
Change Facility  
User Guide  
MC User Guide  
Log Out  
Logout

## TASK LIST

If you attempt to leave a screen prior to completing all the required fields, or if some of the entries in the fields do not pass system edits, you will see a task list (in red) at the top of the screen, showing the omitted or erroneous fields. The omitted or erroneous fields will be highlighted in yellow.

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### Cause Of Death

Previous    Cancel    Next    Save & Exit    View Certificate

**Task List**

1. Manner of Death: is Required and is Not Filled.
2. Was an Autopsy Performed? is Required and is Not Filled.
3. Did Tobacco use contribute to Death? is Required and is Not Filled.
4. If Female: is Required and is Not Filled.
5. Actual or Presumed time must be selected.
6. Immediate Cause(s.) must be entered.

Skip these tasks

**Cause Of Death**

30. \*Date Pronounced Dead: 08/12/2013 (mm/dd/yyyy)

31. \*Time of Death(24-hour): 1230  Actual  Presumed

32. \*Was case Medical Examiner or Coroner Contacted? YES

33 Part I. \* Cause Of Death:

NOTE: Kentucky data indicate that diabetes is likely underreported on death. If known, document diabetes as a "cause of" or "contributing cause of" death as appropriate in Parts I and II.

PART I. 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. Enter only one cause on each line.

Due To(or As Consequence Of)	Approximate interval B/W Onset and Death
a. <input type="text"/>	<input type="text"/> -- Select --
b. <input type="text"/>	<input type="text"/> -- Select --
c. <input type="text"/>	<input type="text"/> -- Select --
d. <input type="text"/>	<input type="text"/> -- Select --

33 Part II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I

EDRS Menu  
Home  
Email Notification Options  
Change Facility  
Case Menu  
Review Funeral Director Portion  
Cause Of Death  
Sign & Submit  
User Guide  
MC User Guide  
Log Out  
Logout

You may correct the errors and proceed to the next screen. You also have the option to click the **Skip these tasks** button. This will allow you to save the record and return to this screen at a later time for completion.

## SAVING A RECORD PRIOR TO COMPLETION

There may be instances when you are unable to complete the entire process of entering the cause of death details until a later time. In these instances, click the **Save and Exit** button. If you have not completed all the details on the current screen, you will receive a task list as shown in the previous section. Click the **Skip these tasks** button, then click the **Save and Exit** button.

When you are ready to complete the case, select the case from the Active Cases List on the Home Screen.

## MESSAGE BOARD

The KY-EDRS provides the ability to attach message(s) to a particular case.

**The Message Board is a means of communication between Funeral Directors and Assistants, Medical Certifiers and Assistants, Coroners and Deputy Coroners. The OVS will not monitor the messages posted, so please do not attempt to communicate with OVS via the Message Board.**

From the Cases List, click the "Post/View Messages" column for the desired record.

The screenshot shows the 'TRAINING MEDICAL CERTIFIER(MEDICAL CERTIFIER)' interface. It features a navigation menu on the left and a main table of active cases. The table has columns for EDRS Case #, Decedent's Last Name, Decedent's First Name, Date of Death, County of Death, Status, and Post/View Messages. A red arrow points to the 'Post/View Messages' column, highlighting the text 'Post/View Messages' in bold for the record with EDRS Case # E201309230002.

	EDRS Case #	Decedent's Last Name	Decedent's First Name	Date of Death	County of Death	Status	Post/View Messages	Print	History
Select	E201309260002	KAUF	BENNIE	04/07/2013	MCCRACKEN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309250006	ALLENS	TERRI	05/05/2013	WARREN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309250005	COLEMAN	WILLIAM	04/01/2013	FRANKLIN	ACCEPTED BY MEDICAL FACILITY	Post/View Messages	Print	History
Select	E201309250002	HART	JIM	05/01/2013	ROWAN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309230002	TYREE	ALICE	09/21/2013	WARREN	SUBMITTED TO MC	<b>Post/View Messages</b>	Print	History
Select	E201309230001	LANE	JERRY	09/20/2013	MCCRACKEN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309040002	SMITH	SANDY	06/30/2013	JEFFERSON	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201309030002	RABBIT	GEORGE	09/03/2013	FRANKLIN	SUBMITTED TO MC	Post/View Messages	Print	History
Select	E201308140001	JOHNSON	ALICE	08/12/2013	MADISON	ACCEPTED BY MEDICAL FACILITY	Post/View Messages	Print	History
Select	E201307090003	COLLINS	MARY	01/01/2013	FRANKLIN	ACCEPTED BY MEDICAL FACILITY	Post/View Messages	Print	History

If a message is attached to a particular record, the words **Post/View Messages** will be in bold type.

The Message Board Screen shows a history of messages attached to the record. To add a new message, type the message in the text box and click the **Submit** button.

**Message Board**

**Case Information**

EDRS Case #:	E201309230002
Decedent Name:	ALICE MARIE TYREE
Date of Death:	09/21/2013
County Of Death:	WARREN
Certificate Type:	ELECTRONIC
Certificate Status:	SUBMITTED TO MC

**Message History**

Date & Time	Posted By	Notes
9/26/2013 2:31:35 PM	DEENA.JONES@EXTERUAT.UATCIT.UAT	PLEASE CHECK DOD.

**Post A Message**

Message:

THIS IS A TEST!

## RECORD IS REJECTED BY OFFICE OF VITAL STATISTICS

There may be instances when the OVS detects an erroneous or questionable entry and rejects the record. In these instances, the record will show on the medical certifier's active cases list with "Rejected by OVS" in the status column. The medical certifier will receive an email notification of the status change if the appropriate selection has been made in the "Email Notification Options". (Please refer to the section below for further information on Email Notification Options.) It is recommended that you receive email notifications for all activity. This will enable you to have real-time knowledge of every progressing step for each case.



Select the record from the active cases list, and the screen below will be shown.

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**View Certificate Rejection Information**

Return to Previous Search View Certificate

**Decedent**

1a. Decedent's Name: **BARBARA**

3. Date of Death: **09/03/2013**

4. Social Security Number: Verification Info: Attempts: **1** Status: **VERIFIED**

7. County Of Death: **JOHNSON**

29. Facility Of Origin:

50. Facility Of Completion: **JOHNSON COUNTY CORONER**

Certificate Type: **ELECTRONIC**

**Items Previously Rejected**

Item14. DECEDENT'S USUAL OCCUPATION (Kind of work done during most of working life. Do not use retired)  
*Original Entry:* HOUSEWIFE  
*Reason for Rejection:* PLEASE CHECK SPELLING

Return to Previous Search View Certificate

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Rejected items are listed, including the reason for rejection. After review of this information, click the **Next** button to go to the appropriate screen. The rejected item will be highlighted.

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## Cause Of Death

Previous    Cancel    Next    Save & Exit    View Certificate

**Cause Of Death**

30. \*Date Pronounced Dead: 07/02/2010 (mm/dd/yyyy)

31. \*Time of Death(24-hour): 1430  Actual  Presumed

32. \*Was case Medical Examiner or Coroner Contacted? YES

**33 Part I. \* Cause Of Death:**

*NOTE: Kentucky data indicate that diabetes is likely underreported on death. If known, document diabetes as a "cause of" or "contributing cause of" death as appropriate in Parts I and II.*

PART I. 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. Enter only one cause on each line.

Due To(or As Consequence Of)	Approximate interval B/W Onset and Death	
a. OLD AGE	UNKNOWN	UNKNOWN
b. _____	_____	-- Select --
c. _____	_____	-- Select --
d. _____	_____	-- Select --

33 Part II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in Part I

34. \*Manner of Death: NATURAL

35. \*Was an Autopsy Performed? YES

36. \*Were Autopsy findings available to complete the cause of death? YES

37. \*Did Tobacco use contribute to Death? NO

38. \*If Female: NOT PREGNANT WITHIN PAST YEAR

Previous    Cancel    Next    Save & Exit    View Certificate

Done Local intranet

Correct the item, and resubmit the record to OVS.


## EMAIL NOTIFICATION OPTIONS

The KY-EDRS can automatically generate emails to users whenever the status of a case changes. Users have the ability to manage what types of notifications they would like to receive. Select Email Notification Options from the left menu bar to customize your preferences.

**YOU MUST SET YOUR EMAIL NOTIFICATION PREFERENCES ON THIS SCREEN TO RECEIVE EMAIL NOTIFICATIONS. IF YOU DO NOT SET YOUR PREFERENCES, YOU WILL NOT RECEIVE EMAIL NOTIFICATIONS.**

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 **Email Notification Options**

**EDRS Menu**  
Home  
Email Notification Options  
Change Facility

**User Guide**  
MC User Guide  
**Log Out**  
Logout

**Email Notification**

This system is designed to help you keep informed of any status changes related to death certificate cases you have initiated with the Vital Statistics by sending Email notifications.

If you would like to be notified of status changes related to your cases, please enter Email address(es).

\*Primary Email Address:

Secondary Email Address:

1-If a case is assigned to me  
 2-If a case assignment is recalled (reassigned)  
 3-If Vital Statistics returns my case to Funeral Director for correction  
 4-If Vital Statistics returns my case for correction  
 5-If Vital Statistics returns my case to Funeral Director and me (the Medical Certifier) for correction  
 6-When Vital Statistics approves and assigns a State File Number to my case  
 7-When Funeral Director submitted case to Certifier

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You have the option of providing two email addresses to be used for notification. It is recommended that you receive email notifications for all activity. This will enable you to have real-time knowledge of every progressing step for each case.

Select your preferences from the list provided, and click the **Save** button after making your selections.

NOTE: If you have access to more than one role (Funeral Director and Coroner, for example) you should select your email options for each role. The options do not have to be the same for each of your roles.

**IT IS IMPORTANT TO CHECK YOUR EMAIL MESSAGES DAILY TO PREVENT DELAYS IN PROCESSING DEATH CERTIFICATES!**

## MEDICAL CERTIFIER ASSISTANT

If a medical certifier assistant is set up to input data into the KY-EDRS, the medical certifier assistant must submit the record(s) to the medical certifier or coroner for final review and submission to the OVS. After completing the cause of death information, the medical certifier assistant will see the screen shown below.

The screenshot shows the 'Submit to Certifier for review' section of the KY-EDRS interface. The left sidebar contains navigation menus: 'EDRS Menu' (Home, Email Notification Options, Change Facility), 'Case Menu' (Review Funeral Director Portion, Cause Of Death, Assign Certifier), 'User Guide' (MC User Guide), and 'Log Out' (Logout). The main content area has a header with 'Previous', 'Cancel', 'Next', and 'View Certificate' buttons. Below is the 'Decedent Information' section with the following details: EDRS Case #: E201006110003, 1a. Decedent Name: ALICE JUNE WILSON, 3. Date of Death: 05/27/2010, 4. Social Security Number: NONE, and 7. County Of Death: DAVIESS. The 'Submit to Certifier for review' section contains the instruction: 'Please select the Certifier from below list to review the case and submit to the OVS.' The 'Medical Certifier/Coroner:' dropdown menu is currently set to '-- Select --'. There is an unchecked checkbox for 'To the best of my knowledge, death occurred at the time, date, and place and due to the causes stated.' and a 'Submit to Certifier' button. The footer of the section also includes 'Previous', 'Cancel', 'Next', and 'View Certificate' buttons.

The medical certifier assistant will select the Medical Certifier or Coroner from the drop-down list. Check the box next to “To the best of my knowledge...”, and then click the **Submit to Certifier** button.

This screenshot is identical to the previous one but includes a large red arrow pointing to the 'Submit to Certifier' button. Additionally, the 'Medical Certifier/Coroner:' dropdown menu is now populated with the value 'Blankenship, Carolyn'. The checkbox for 'To the best of my knowledge, death occurred at the time, date, and place and due to the causes stated.' is now checked.

The medical certifier or coroner may then review the record, edit if necessary, and submit it to the OVS.

## CHANGING FROM ONE FACILITY OR ROLE TO ANOTHER

You may have requested and been granted access to more than one facility, or more than one role. For instance, some funeral directors also serve as coroners, or a medical certifier assistant may prepare records for more than one medical certifier facility. It is not necessary to logout and login again to switch from one role or location to another. Simply click the **Change Facility** button on the left menu bar. The system will reflect the Select Facility Screen, where you can make the appropriate selection.

## REGISTRATION

The KY-EDRS web application utilizes the Kentucky Online Gateway (KOG) as its authentication and security portal. Future applications to be used by the citizens of the Commonwealth will also fall under the KOG umbrella and will be added to this user group. To obtain access to the KY-EDRS, you must first register as a KOG user. This is a one-time registration process and **EACH USER MUST HAVE A UNIQUE EMAIL ADDRESS.**

### Set Up an Account

Go to URL <https://kog.chfs.ky.gov/home/> (for LIVE-DATA "PRODUCTION").

Click **Create an Account**.

Kentucky Online Gateway

Help English

Contact us

Welcome to the CHFS network.

Please select the account type you have in the system.

I am a Kentucky Citizen or Business Partner

I already have an account

Sign In

Need to create a Citizen account?

Create Account

I have a CHFS Network Account

I am a CHFS contractor, employee, or agent/vendor.

CHFS Sign In

Complete the fields on the **User Profile Form**. Required fields are marked with an asterisk (\*).

**Keep in mind that the Username you choose is the name that will be shown in the KY-EDRS history whenever you create, edit or submit a record.**

The screenshot shows the 'Kentucky Online Gateway' interface with a 'DEV' label. The main content area is titled 'Please complete your Kentucky Online Gateway Profile'. Below this, it says 'Please fill out the form below and click Submit when finished.' and 'All fields with \* are required.' The form includes the following fields:

- \* First Name: citedrs
- Middle Name: (empty)
- \* Last Name: user01
- \* Username: citedrs.user01
- \* Password: (masked with dots)
- \* Verify Password: (masked with dots)
- \* E-Mail Address: citedrs.user01@keups.net
- \* Verify E-Mail Address: citedrs.user01@keups.net
- Telephone: 333-333-3333
- Extension: (empty)
- Street Address 1: St 1
- Street Address 2: St 2
- City: London
- State: Kentucky (dropdown menu)
- Zip Code: 46532
- Question: In what city were you born? (Enter full name of city only) (dropdown menu)
- \* Answer: screenshot
- Question: What was the name of your first pet? (dropdown menu)
- \* Answer: screenshot

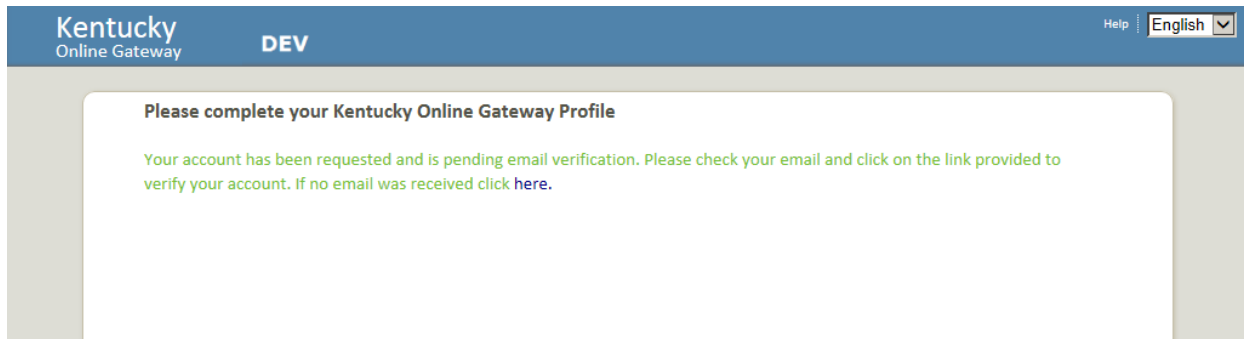
At the bottom of the form, there are two buttons: a green 'Submit' button and a grey 'Cancel' button. A red arrow points to the 'Submit' button.

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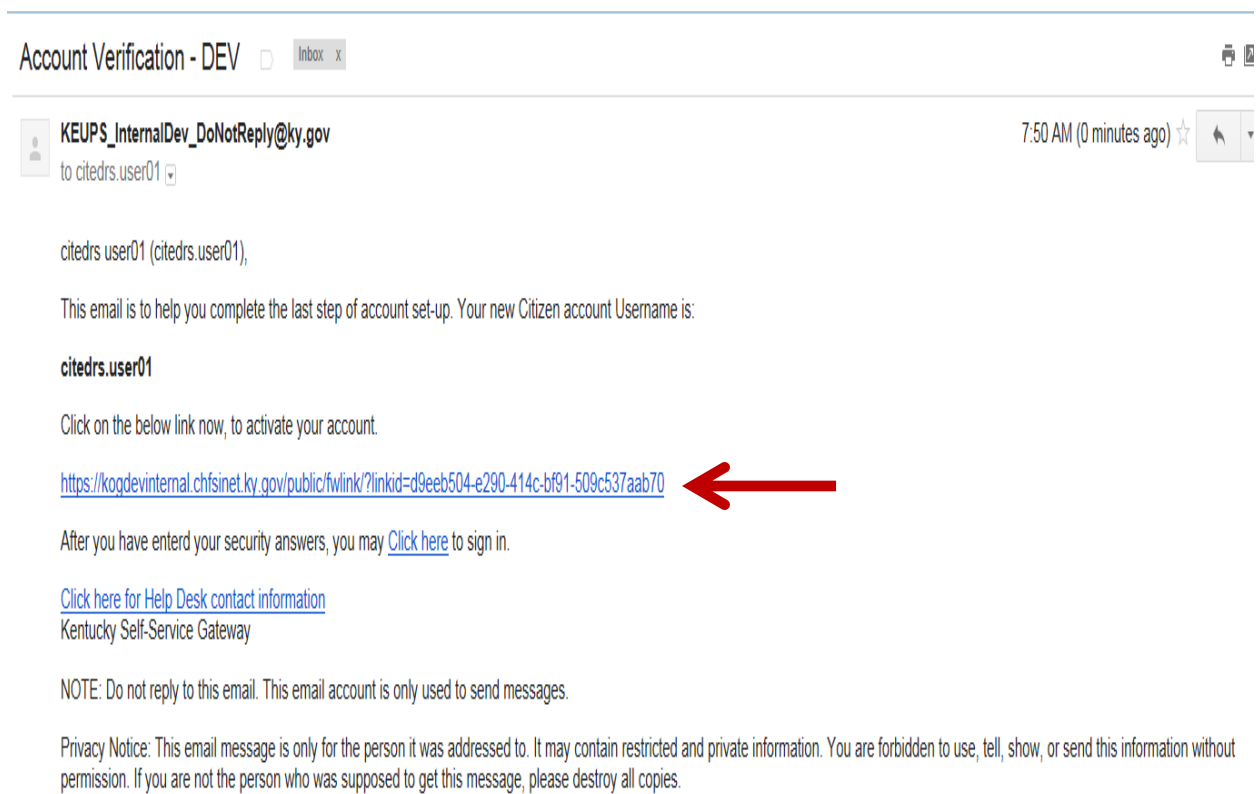
Select two security questions from the drop down box, and enter the answer to each question.

Click the **Submit** button.

The confirmation screen shown below will be displayed.



An email will immediately be sent to the email address shown on the User Profile form. Click the link shown in the email. **YOU MUST CLICK ON THE LINK SHOWN ON THE EMAIL WITHIN FOUR HOURS, OR YOUR ACCOUNT WILL BE DELETED.**



The screen shown below will be displayed. Enter the answers to the two security questions, **exactly as the answers were entered on the User Profile Form**, and then click the **Verify Account** button.

Kentucky Online Gateway DEV Help English

**Validate New Account**

To verify your identity, please answer the following security question(s).

Question In what city were you born? (Enter full name of city only)  
\*Answer screenshot

Question What was the name of your first pet?  
\*Answer screenshot X

**Verify Account** ←

The screen shown below will be displayed.

Kentucky Online Gateway DEV Help English

**Validate New Account**

**Success**  
Your account was successfully created. Please [click here](#) to access Kentucky Online Gateway and request additional access.

**Congratulations! You are now a registered KOG user!!**

## Access to KY-EDRS

The next step is to request access to specific roles and facilities in the KY-EDRS. Click the **click here to access Kentucky Online Gateway** button (as shown above), and you will be taken to the KOG login screen shown below.



The screen shown below will be displayed. Enter your username and password, and then click the **Log In** button.

**Kentucky**  
Online Gateway

DEV

Help | English

### Citizen Log In

Login with your Kentucky Online Gateway Citizen Account.

Username or Email Address [Forgot Username?](#)

Password [Forgot Password?](#)

**Log In**

[Resend Account Verification Email](#)

Don't already have a  
Kentucky Online Gateway Citizen Account?

**Create An Account**

**WARNING**  
NOTICE: This is a government computer system and is the property of the Commonwealth of Kentucky. It is for authorized use only regardless of time of day, location or method of access. Users (authorized or unauthorized) have no explicit or implicit expectation of privacy. Any or all uses of this system and all files on the system may be intercepted, monitored, recorded, copied, audited, inspected, and disclosed to authorized state government and law enforcement personnel, as well as authorized officials of other agencies, both domestic and foreign. By using this system, the user consents to such at the discretion of the Commonwealth of Kentucky. Unauthorized or improper use of this system may result in administrative disciplinary action and/or civil and criminal penalties. The unauthorized disclosure of Data containing privacy or health data may result in criminal penalties under Federal authority.

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[State Employee Gateway Login](#)

The screen shown below will be displayed. Click on [Request access here](#).

The screenshot shows the Kentucky Online Gateway user interface. At the top, there is a blue header with the text "Kentucky Online Gateway" on the left, "DEV" in the center, and "Welcome citedrs user01" on the right. To the right of the welcome message are links for "My Account", "Sign Out", and "Help", and a language dropdown menu set to "English". Red arrows point to these links with the annotation "Select to see account information".

Below the header, the main content area is titled "citedrs user01, Welcome to Kentucky Online Gateway". To the right of this title are two red annotations: "Select here to Sign Out" and "Select here for Contact Information".

Underneath is a "Message Area" with three lines of text: "Knock Knock! Who's there? Doughnut! Doughnut who? Doughnut ask, it's a secret.", "Knock Knock! Who's there? Justin! Justin who? Justin time for lunch.", and "Knock Knock! Who's there? Broccoli. Broccoli who? Broccoli doesn't have a last name, silly."

The next section is "Your Applications". To the right of this heading is a red annotation: "Select to request access to additional services/applications". Below the heading, it says: "These are the applications you have been granted access to. Need to access a different application? [[Request access here](#)]." A red arrow points to the "[Request access here]" link.

Below this text is a table with the following content:

Application Name
SNAP Supplemental Nutrition Assistance Program

Below the table, it says: "There are no pending application requests."

At the bottom of the main content area, there is a link: "> Request Access to another application." A red arrow points to this link with the annotation "Select to request access to additional services/applications".

At the bottom of the page, there is a dark grey footer. On the left, it says "Privacy | Terms of Use". On the right, it says "Copyright ©2013 Commonwealth of Kentucky. All Rights Reserved."



The screen shown below will be displayed. Select KY-EDRS.

**Kentucky**  
Online Gateway

**UAT**

Welcome screen capture | My Account | Logout | Help | English

New Request | My Requests

### Request Application Access

Select An Application | Select Roles | Role Prerequisites | Confirm Changes

Select an Application you wish to be granted Access to:

Citizen Applications  Business Partner Applications

Application	Audience	Select
KHBE Self Service Portal UAT1 KHBE Self Service Portal UAT1	Citizens, Business Partners	Select
<b>KY -EDRS</b> Kentucky Electronic Death Registration System	Citizens, Business Partners	Select
CHFS SP Public Visitors Utilize to support all CHFS SharePoint sites..	Citizens, Business Partners	Select
KARES Program for National and State Background Checks for Direct Patient Access Employees of Long Term Care Facilities and Providers.	Citizens, Business Partners	Select
KVETS Birth Index To Verify Birth Certificates	Citizens, Business Partners	Select
Mock HBE Application Mock HBE Application	Citizens	Select
NEDSS National Electronic Disease Surveillance System	Citizens, Business Partners	Select
OTIS Web (TRAIN) Online Tracking Information System	Citizens, Business Partners	Select
SNAP Web Portal Supplemental Nutrition Assistance Program (Formerly Food Stamps)	Citizens, Business Partners	Select

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The following screen will be displayed.

Kentucky Online Gateway UAT

Welcome screen capture | My Account | Logout | Help | English

New Request My Requests

### Request Application Access

Select An Application Select Roles Role Prerequisites Confirm Changes

Search for a Facility

Facility Type  ex.(Kerr - for Kerr Funeral Home)

Facility Name

County

Search

Select the roles you wish to request or remove for the (KY -EDRS)

Available Roles

There are no Roles available for selection.

Current Roles

Previous Next

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Select the facility type from the drop-down box (County Coroner, Medical Certifier or Funeral Home). Enter one word in the Facility Name and Click **Search**.

**DO NOT SELECT A COUNTY UNLESS YOU ARE A CORONER OR DEPUTY CORONER.**

The roles available for that facility will be listed as shown below. Select MC for Medical Certifier, or MCA for Medical Certifier Assistant. Select CR for Coroner, DCR for Deputy Coroner, or CRA for Coroner Assistant. Select FD for Funeral Director, or FDA for Funeral Director Assistant. Select AA for Administrative Approver role. You may select both FD or MC and AA if you plan to be the Administrative Approver for your facility. Click the boxes for the appropriate role(s) for that facility, and then click the **Next** button.

**PLEASE REFER TO PAGE 44 OF THIS GUIDE FOR MORE DETAILS ON THE ADMINISTRATIVE APPROVER ROLE.**

New Request
My Requests

### Request Application Access

✓  
 Select An Application

●  
Select Roles

○  
 Role Prerequisites

○  
 Confirm Changes

Search for a Facility

Facility Type Funeral Home ▼

Facility Name training ex.(Kerr - for Kerr Funeral Home)

County ▼

Search

Click to Add access to the Roles found below:

Select the roles you wish to request or remove for the (KY -EDRS)

**Available Roles**

Roles	PreRequisites	Request
Training Funeral Home - FD Funeral Director		<input checked="" type="checkbox"/>
Training Funeral Home - FDA Funeral Director Assistant		<input type="checkbox"/>
Training Funeral Home - AA Administrative Approver		<input type="checkbox"/>

**Current Roles**  
You have not selected any roles

◀ Previous

Next ▶

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The screen shown below allows entry of required credentials (license number, certificate number, etc), and the expiration date of the credential. Also, enter the **exact text as you would like your signature to appear on the death certificate**. Then click the **Next** button.

Kentucky Online Gateway UAT Welcome screen capture | My Account | Logout | Help | English

### Request Application Access

Select An Application | Select Roles | **Role Prerequisites** | Confirm Changes

The roles you have requested require the following credential details to complete the request. Click Next when finished.

Required Credentials

Training Funeral Home - FD

- 1 Enter the expiration date for the license number entered above.  
12/31/2013
- 2 Enter your Funeral Director License Number for access to "Training Funeral Home"  
123456
- 3 Enter the exact text for your signature. (Example: John A. Doe, M.D.)  
screen capture | X

Previous Next

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A screen will be displayed to review the roles you have requested, the credentials you have supplied, and the text for your signature. Click the **Previous** button to make any necessary changes. If no changes are required, click the **Submit Request** button.

**Kentucky**  
Online Gateway

UAT

Welcome screen capture | My Account | Logout | Help | English

### Request Application Access

Select An Application    Select Roles    Role Prerequisites    **Confirm Changes**

Confirm Request

Requested Application	Requested Role	Requested Action
KY-EDRS	Training Funeral Home - FD	Add to Role

Submitted Credentials

Training Funeral Home - FD

- 1) Enter the expiration date for the license number entered above.
  - 12/31/2013
- 2) Enter your Funeral Director License Number for access to "Training Funeral Home"
  - 123456
- 3) Enter the exact text for your signature. (Example: John A. Doe, M.D.)
  - screen capture

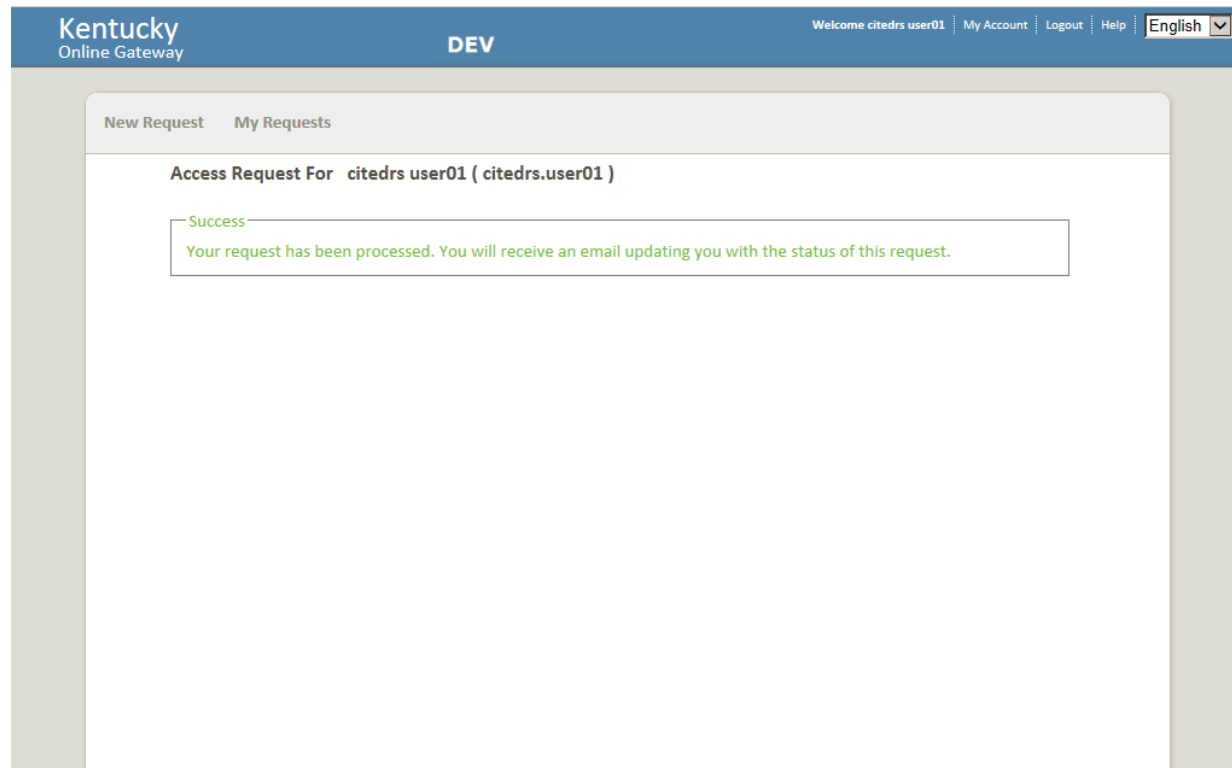
[← Previous](#)    [Submit Request](#)

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After clicking the **Submit Request** button the following screen will be displayed. If you are registering for an assistant role, the Administrative Approver at your facility must first approve the request. The Office of Vital Statistics staff will then review the request, and you will receive an email when your request has been approved, or you will be notified of any reason for denial.



## Administrative Approver Role

Each facility requires at least one Administrative Approver. This person will approve any requests for Medical Certifier **Assistant** or Coroner **Assistant** roles for that facility. Generally, a physician or coroner will act as the Administrative Approver for a facility. However, a physician or coroner may delegate this role to an assistant. To designate an assistant to an Administrative Approver role, complete the Administrative Approver User Profile Form shown on the last two pages of this user guide, and mail to the Office of Vital Statistics at the address shown on the form. After allowing time for the mailed form to reach the Office of Vital Statistics, the assistant should also register for the AA (Administrative Approver) role in the KY-EDRS, following the steps shown above. Upon receipt of the electronic request, the Office of Vital Statistics will check to ensure that a properly completed and authorized paper form has been received. If so, approval will be granted to the assistant for the Administrative Approver role, and the assistant will be notified by email of the approval.



## Processing Requests as an Administrative Approver

If you are the administrative approver for your facility, it is your responsibility to approve any requests for Medical Certifier Assistant or Coroner Assistant. Log in using your username and password. Select **Request** from the screen shown below.

The screenshot shows the Kentucky Online Gateway user interface. At the top, there is a blue header with the text "Kentucky Online Gateway" on the left, "DEV" in the center, and "Welcome citedrs user01 | My Account | Sign Out | Help | English" on the right. Below the header, the main content area is white. It starts with a welcome message: "citedrs user01, Welcome to Kentucky Online Gateway". To the right of this message are three red arrows pointing to "My Account", "Sign Out", and "Help" in the header, with the text "Select to see account information" below them. Below the welcome message is a "Message Area" with three lines of text: "Knock Knock! Who's there? Doughnut! Doughnut who? Doughnut ask, it's a secret.", "Knock Knock! Who's there? Justin! Justin who? Justin time for lunch.", and "Knock Knock! Who's there? Broccoli. Broccoli who? Broccoli doesn't have a last name, silly." To the right of the message area are two red arrows pointing to "Sign Out" and "Help" in the header, with the text "Select here to Sign Out" and "Select here for Contact Information" below them. Below the message area is a section titled "Your Applications". To the right of this title is a red arrow pointing to "[Request access here]", with the text "Select to request access to additional services/applications" below it. Below the title is a paragraph: "These are the applications you have been granted access to. Need to access a different application? [Request access here]." Below this paragraph is a table with one row: "SNAP Supplemental Nutrition Assistance Program". Below the table is a text box: "There are no pending application requests." At the bottom of the main content area is a link: "> Request Access to another application." To the right of this link is a red arrow pointing to the link, with the text "Select to request access to additional services/applications" below it. At the bottom of the page, there is a dark blue footer with "Privacy | Terms of Use" on the left and "Copyright ©2013 Commonwealth of Kentucky. All Rights Reserved." on the right.

Select KY-EDRS.

**Kentucky**  
Online Gateway

**UAT**

Welcome screen capture | My Account | Logout | Help | English

New Request | My Requests

### Request Application Access

Select An Application | Select Roles | Role Prerequisites | Confirm Changes

Select an Application you wish to be granted Access to:

Citizen Applications  Business Partner Applications

Application	Audience	Select
KHBE Self Service Portal UAT1 KHBE Self Service Portal UAT1	Citizens, Business Partners	Select
<b>KY -EDRS</b> Kentucky Electronic Death Registration System	Citizens, Business Partners	Select
CHFS SP Public Visitors Utilize to support all CHFS SharePoint sites..	Citizens, Business Partners	Select
KARES Program for National and State Background Checks for Direct Patient Access Employees of Long Term Care Facilities and Providers.	Citizens, Business Partners	Select
KVETS Birth Index To Verify Birth Certificates	Citizens, Business Partners	Select
Mock HBE Application Mock HBE Application	Citizens	Select
NEDSS National Electronic Disease Surveillance System	Citizens, Business Partners	Select
OTIS Web (TRAIN) Online Tracking Information System	Citizens, Business Partners	Select
SNAP Web Portal Supplemental Nutrition Assistance Program (Formerly Food Stamps)	Citizens, Business Partners	Select

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### Request Application Access



Search for a Facility

Facility Type: Funeral Home

Facility Name: training ex.(Kerr - for Kerr Funeral Home)

County:

**Search**

Click to Add access to the Roles found below:

Select the roles you wish to request or remove for the (KY -EDRS)

Available Roles

Roles	PreRequisites	Request
Training Funeral Home - FD Funeral Director		<input type="checkbox"/>
Training Funeral Home - FDA Funeral Director Assistant		<input type="checkbox"/>
Training Funeral Home - AA Administrative Approver		<input type="checkbox"/>



Current Roles  
You have not selected any roles

**Previous**    **Next**

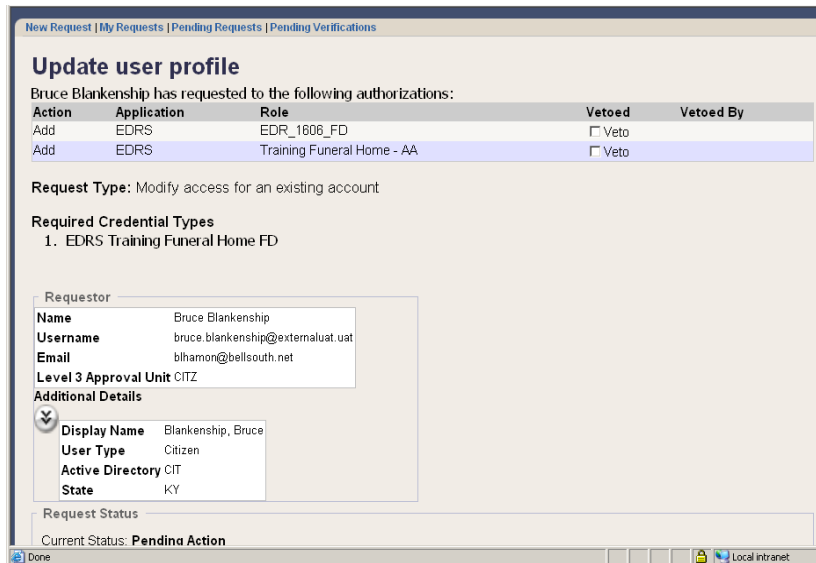


A screen showing requests pending your approval will be shown.

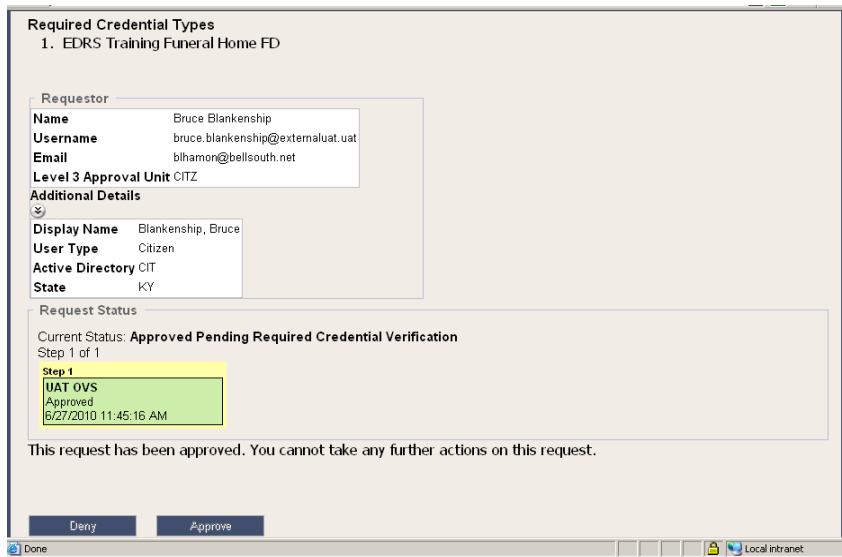
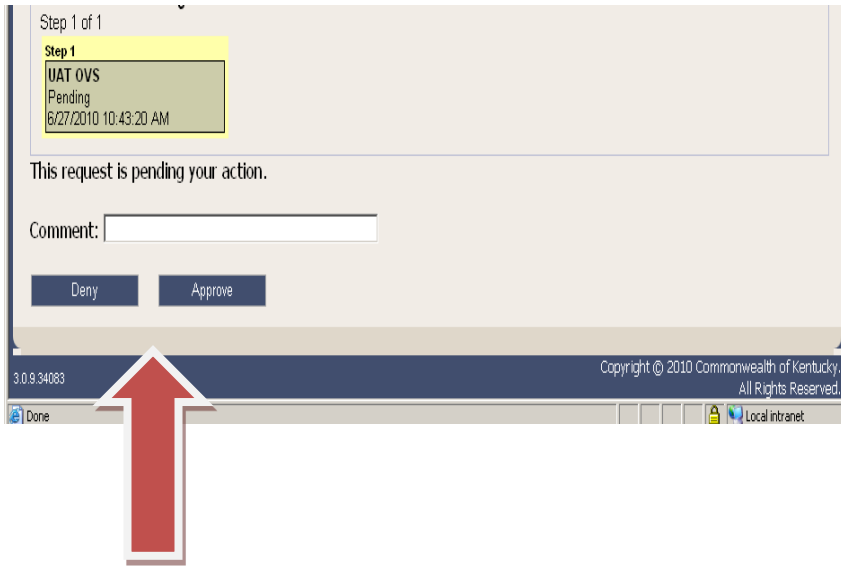


Click **View Details**.

The screen shown below provides additional details for the access request.



You may now click **Approve** or **Deny** to approve or deny the access request from this user.



The Office of Vital Statistics will review the request and grant final approval. The new user will receive an email notification of the approval status.

