

Electronic Death Registration System

Medical Facilities



November 2018

EDRS Web Access

EDRS Website:

alabamapublichealth.gov/edrs

Click on **Login to AL-EDRS**.

ADPH Website:

alabamapublichealth.gov

Click on “ADPH Login Portal.”

Click on “Security Portal.”

Logging In

Enter your
username and
password, then
click “Login”



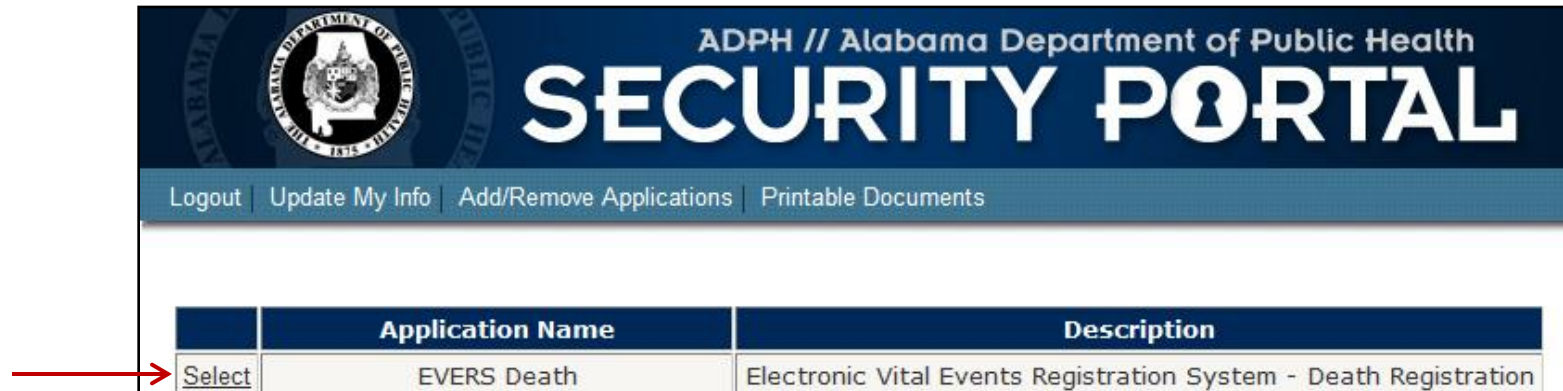
Security Portal Login

username

password

Login

[username/password help](#)



ADPH // Alabama Department of Public Health

SECURITY PORTAL

[Logout](#) | [Update My Info](#) | [Add/Remove Applications](#) | [Printable Documents](#)

	Application Name	Description
Select	EVERS Death	Electronic Vital Events Registration System - Death Registration


Select EVERS Death to go to your EDRS home page.

EDRS Home Page

Electronic Death Registration

Electronic Vital Events Registration System (EVERS)

Center For Health Statistics
ALABAMA DEPARTMENT OF
PUBLIC HEALTH



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TRNG Hospital - (Montgomery, AL)

Pending Records

	EDR #	Legal Name	Medical Name	Date of Death	Birth Date	Sex	County of Death	Funer.Direct. Signed	Certifier Signed	Verification Printed	Legal Errors	Medical Errors
Select	RXR10027	Record, Training	Record, Training	06/01/2014	12/01/1950	M	Montgomery	X		X		

Pending Signature

	EDR #	Legal Name	Medical Name	Date of Death	Birth Date	Sex	County of Death	Funer.Direct. Signed	Certifier Signed	Verification Printed	Legal Errors	Medical Errors
Select	RXR10024	Staff, Emergency	Staff, Emergency	04/15/2014	06/13/1955	M	Montgomery		X			

1. Pending Records - records that are in various stages of completion.
2. Pending Signature - records that are pending the signature of either the funeral home director or medical certifier.
3. An "X in a column indicates an action that has occurred on the record.
4. Legal Errors are corrected by the funeral home.
5. Medical Errors are corrected by the medical certifier.
6. A record cannot be filed until errors are corrected.

EDRS Home Page

Status of Recent Signed and Submitted Death Record Certificates								
	EDR #	Legal Name	Medical Name	Date of Death	Birth Date	Sex	County of Death	Certificate Status
Select	NXJ10009	Bama, Al A	Bama, Al A	10/01/2018	01/15/1965	M	Mobile	PROCESSING
Select	NXJ10007	Champion, Essie C	Champion, Essie C	10/03/2018	03/15/1955	F	Mobile	FILED
Select	NXJ10006	Jingle, John Jacob	Jingle, John Jacob	10/01/2018	06/22/1942	M	Mobile	FILED PENDING COD
Select	NXJ10008	Test, John A	Test, John A	10/04/2018	12/15/1925	M	Mobile	UNDER CHS REVIEW

The **Status of Recent Signed and Submitted Death Record Certificates** grid provides a detailed description of the certificate status.

1. Processing – The death certificate is waiting to be filed.
2. Filed – The certificate is on file and ready for issuance.
3. Filed Pending COD – The certificate is on file and ready for issuance, but the cause of death is pending.
4. Under CHS Review – The certificate is under review for an edit that must be cleared by the Center for Health Statistics.

NOTE: A filed certificate will remain on the home page for 7 days after filing.

Create New Record



If you are not sure whether a certifier or facility is an EDRS user, check the Active Users/Facilities List before creating a record. Click on **Active Users/Facilities** from your home page.



To begin creating a new death record, click on **Create** and then **New Record** .
Anyone authorized to use EDRS on behalf of a facility can create a new death record.

CREATE NEW DEATH RECORD

Enter Year of Death :

Enter the year of death and click "Next."

Create New Record (Cont'd)

CREATE NEW DEATH RECORD

Decedent First Name <input type="checkbox"/> Unnamed	Decedent Middle Name	Decedent Last Name <input type="checkbox"/> Unknown	Suffix
<input type="text" value="Training"/>	<input type="text"/>	<input type="text" value="Record"/>	<input type="text" value="None"/>

Sex: ☒ Male ☐ Female ☐ Unknown

Last Name Prior to First Marriage:

Date of Birth:	<input type="text" value="12/01/1950"/>		<input type="checkbox"/> Unknown
Social Security Number:	<input type="text" value="999-99-9999"/>		<input type="checkbox"/> Unknown
Date of Death:	<input type="text" value="01/01/2016"/>		<input type="checkbox"/> Found

	Years	Months	Days	Hours	Minutes	
Age:	<input type="text" value="65"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Approximate

1. Enter the decedent's name or check "Unnamed," or "Unknown."
2. Select a Suffix from the drop down box, if applicable. "MD" is not a suffix.
3. Click on a button for the decedent's Sex.
4. Last Name Prior to First Marriage is optional on this screen.
5. Enter the decedent's Date of Birth. Do not enter "/"
6. Enter the Social Security Number. Do not enter "-."
7. Enter the Date of Death. Do not enter "/" **Do not** check "Found."
8. When the Date of Death is entered, the age will calculate.
9. If the Date of Birth is unknown, enter the estimated age, and check "Approximate."

Create New Record (Cont'd)

Place of Death:

Hospital:

Address:

City:

State:

Zipcode:

Hospital Status:

Hospice Care at Time of Death: ☐ Yes ☒ No ☐ Unknown

Medical Record Number:

Coroner/ME Case Number:

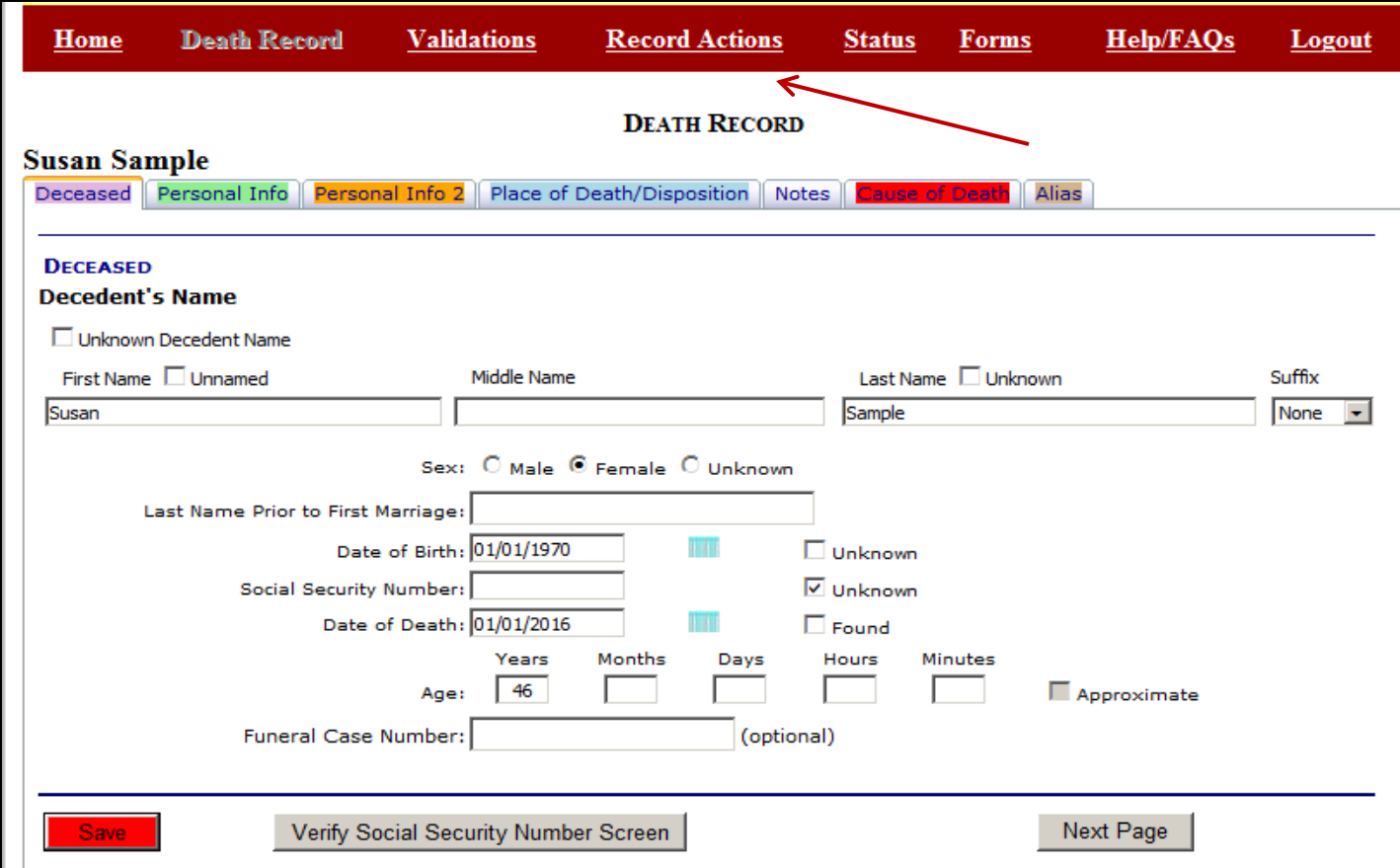
Funeral Home Case Number:

Who will handle the disposition of the body? ☒ Funeral Home ☐ Facility

Select Funeral Home:

1. The Place of Death name and address will populate based on the user's log in information for hospitals, nursing homes, inpatient hospices, and assisted living facilities.
2. The Hospital Status question will only appear for hospitals.
3. The Hospice question must be answered for all decedents. If the decedent was under hospice care, select the hospice from the drop down list. If a hospice is creating the record, this information will populate.
4. The Medical Record Number is optional.
5. The Disposition of Body defaults to Funeral Home. Select the funeral home from the drop down list.
6. If the facility is handling the disposition, choose "Facility," and the facility name will populate. Choosing "Facility" gives the medical facility staff access to the pages usually completed by the funeral home.
7. To create the new death record, click on **Create Record**.
8. Click **Cancel** if you do not wish to proceed with creating the record.

Assign Record to Medical Certifier



Home **Death Record** **Validations** **Record Actions** **Status** **Forms** **Help/FAQs** **Logout**

DEATH RECORD

Susan Sample

Deceased **Personal Info** **Personal Info 2** **Place of Death/Disposition** **Notes** **Cause of Death** **Alias**

DECEASED

Decedent's Name

☐ Unknown Decedent Name

First Name ☐ Unnamed Middle Name Last Name ☐ Unknown Suffix

Susan [] Sample None

Sex: ☐ Male ☒ Female ☐ Unknown

Last Name Prior to First Marriage: []

Date of Birth: 01/01/1970 ☐ Unknown

Social Security Number: [] ☒ Unknown

Date of Death: 01/01/2016 ☐ Found

Years Months Days Hours Minutes

Age: 46 [] [] [] [] [] ☐ Approximate

Funeral Case Number: [] (optional)

Save **Verify Social Security Number Screen** **Next Page**

1. Once the record is created, you will be taken to the home screen of the new record.
2. The new record now appears on the home pages of the funeral home and medical facilities that were selected when the record was created.
3. The new death record must now be assigned through EDRS to the medical certifier.
4. Click on **Record Actions** to go to the assignment screen.

Assign Record to Medical Certifier (Cont'd)

New Test Record

Assign/Notify **Abandon Record**

Select next Reviewing/Editing Authority:

Funeral Homes Hospitals Nursing Homes Physician Offices/Clinics Hospices Coroners/MES User List **Certifiers**

User List Name Holmes, Melissa

	Facility	Name	Address	City
Select	Adams Nursing Home	Holmes, Melissa	1555 Hillabee Street	Alexander City, Alabama
Select	Coosa Valley Medical Center	Holmes, Melissa	315 West Hickory Street	Sylacauga, Alabama
Select	Elba Nursing and Rehabilitation Center	Holmes, Melissa	987 Drayton Street	Elba, Alabama
Select	TRNG Physician	Holmes, Melissa	201 Monroe St	Montgomery, Alabama

Select Addressee from grid above.

TO: Adams Nursing Home (Holmes, Melissa) Remove Selected Addressee

Action Message: Add Cause of Death

Additional Comments (WARNING: Do NOT include Personal Information in the comments.)

STOP. Remember there are new Ownership rules. If you are assigning this record to a certifier you can do ONLY One of the following: 1) Assign the record to a doctor's office, 2) assign the record to ONLY one doctor or 3) assign the record to a Coroner or 4) assign the record to a Medical Examiner. If you try to send to multiple certifiers only the last certifier on the list can access the record.

Send Message

1. Click on the colored tab to select the certifier type.

2. Search for certifier by last name. The system will retrieve a list.

3. Make a selection from the list.

4. The name will appear in the addressee box.

5. Select an Action Message.

6. Comments are not required. Do not enter confidential information. Comments appear in the email and are recorded in the record status.

7. Click "Send Message."

1. The certifier will receive an email notification through EDRS that a record has been assigned.
2. The record will also appear on their home page.
3. When a person dies in a facility, the time of death is entered when the record is created.
4. The time of death can be found on the **Cause of Death** page.

Time of Death

The decedent's name and date of death move over to this page when the record is created. Both items can be corrected here if needed.

* Do not check "Found" next to the date of death. A "Found" body is one that is found outside of a medical facility.

DEATH RECORD

Susan Sample

Deceased Personal Info Personal Info 2 Place of Death/Disposition Notes **Cause of Death** Alias

CAUSE OF DEATH

Medical Name

Decedent's First Name ☐ Unnamed Decedent's Middle Name Decedent's Last Name ☐ Unknown Suffix

Susan [] Sample [None]

Medical Record Number: [] optional

Coroner/ME Case Number: [] optional

Dates/Times

Date of Death: 01/01/2016 ☐ Approximate ☐ Found ☐ Unknown

Time of Death: 10:15 ☐ AM ☒ PM ☐ Noon ☐ Midnight ☐ Military ☐ Unknown

When date of death is unknown, date Pronounced (usually completed by Coroner/Medical Examiner) is required.

Date Pronounced Dead: []

Time Pronounced Dead: [] ☐ AM ☐ PM ☐ Noon ☐ Midnight ☐ Military

Save Record/Changes **Validate**

Be sure to Save the record after inserting data or making changes.

1. After entering the time of death, scroll to the bottom of the page, and click on **Save Record /Changes**.
2. Click on **Home** to return to the home page or **Logout** to exit EDRS.
3. If the procedure in your facility is that you are to complete the cause of death section for the certifier, see instructions that follow.

Cause of Death

Causes <input type="checkbox"/> Pending		
Do not type the cause of death in all capital letters, unless it is an accepted abbreviation for which there is only one meaning such as COPD.		
A. Immediate Cause (Final Disease or condition resulting in death):	Approximate Interval Between Onset and Death	
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Unknown
B. Underlying Cause (Due to or as consequence of):		
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Unknown
C. Underlying Cause (Due to or as consequence of):		
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Unknown
D. Underlying Cause (Due to or as consequence of):		
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Unknown

1. If the cause of death is not known, click the “Pending” box. When “Pending” is selected, all other questions are grayed out and the record is ready to be signed by the certifier.
2. Otherwise, enter the Immediate Cause and Underlying Cause(s.)
3. For Lines A, B, C, and D, as you enter a cause of death, entries that begin with what you typed will appear in a drop down box. You do not have to use the sample entries.
4. Lines A, B, C, and D are limited to 100 characters.
5. Enter an interval for each cause, or select “Unknown.”

Other Significant Conditions

A. Immediate Cause (Final Disease or condition resulting in death):	Approximate Interval Between Onset and Death	
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Unknown
B. Underlying Cause (Due to or as consequence of):	<input type="text"/>	<input type="checkbox"/> Unknown
C. Underlying Cause (Due to or as consequence of):	<input type="text"/>	<input type="checkbox"/> Unknown
D. Underlying Cause (Due to or as consequence of):	<input type="text"/>	<input type="checkbox"/> Unknown

Other Significant Conditions
Contributing to death but not resulting in the underlying cause(s) stated above:

Add

Remove

Other Significant Conditions is limited to 120 characters.
Click "Add" or "Remove" to make changes to the Other Significant Conditions.

Tobacco & Pregnancy Questions

Did Tobacco use contribute to death?	<input type="radio"/> Yes
	<input type="radio"/> No
	<input type="radio"/> Probably
	<input type="radio"/> Unknown
If Female, was there a pregnancy?	<input type="radio"/> Not Pregnant Within The Past Year
	<input type="radio"/> Pregnant At Time Of Death
	<input type="radio"/> Not Pregnant, but Pregnant within 42 Days of Death
	<input type="radio"/> Not Pregnant, but Pregnant 43-365 days Before Dth
	<input type="radio"/> Unknown if pregnant within last year
	<input checked="" type="radio"/> Not Applicable

1. Answer the tobacco question for all decedents.
2. Answer the pregnancy question, if applicable.
3. The Pregnancy question will be answered automatically for male decedents.

Manner of Death

Manner/Autopsy

- Manner of Death:
- ☐ Accident
 - ☐ Homicide
 - ☐ Suicide
 - ☐ Undetermined Circumstances
 - ☐ Pending Investigation
 - ☐ Natural Cause

1. Select a Manner of Death.
2. If the Pending box was checked, Pending Investigation will be answered automatically.
3. If Accident, Homicide, or Suicide is chosen, the Injury section will open and must be completed.

Autopsy & Toxicology

Autopsy Conducted: ☐ Yes
☐ No
☐ Unknown

If Autopsy was performed, were the findings considered in determining cause of death?

☒ Yes
☐ No

1. Answer the Autopsy question,
2. If *Yes*, answer the findings question.
3. If *No* or *Unknown*, the findings question will not open.

Toxicology Conducted: ☐ Yes
☐ No
☐ Unknown

If Toxicology was performed, were the findings considered in determining cause of death?

☒ Yes
☐ No

1. Answer the Toxicology question,
2. If *Yes*, answer the findings question.
3. If *No* or *Unknown*, the findings question will not open.

Cause of Death - Injury Section

Injury

Transportation Accident: ☐ Yes ☒ No ☐ Unknown

How Injury Occurred:

Date of Injury: ☐ Unknown

Hour of Injury:

☐ AM ☐ PM ☐ Noon ☐ Midnight ☐ Military ☐ Approximate Time ☒ Unknown

Injury at Work: ☐ Yes ☒ No ☐ Unknown

Place of Injury:

Specify:

Injury Location

Injury Location: ☒ United States ☐ US Territory ☐ Another Country ☐ Canada

State:

County:

City:

If Other, specify

Address (See Instruction Below):

Saving the Medical Certification

Injury

Transportation Accident: ☐ Yes ☒ No ☐ Unknown

How Injury Occurred:

Date of Injury: ☐ Unknown

Hour of Injury:

☐ AM ☐ PM ☐ Noon ☐ Midnight ☐ Military ☐ Approximate Time ☒ Unknown

Injury at Work: ☐ Yes ☒ No ☐ Unknown

Place of Injury:

Specify:

Injury Location

Injury Location: ☒ United States ☐ US Territory ☐ Another Country ☐ Canada

State:

County:

City: If Other, specify

Address (See Instruction Below):

Address Field: The address, body of water, wooded area, etc. that is entered here is what will appear on the certified copy of the death certificate. Please type it exactly as you want it to be stated on the death certificate.

Be sure to Save the record after inserting data or making changes.

1. After completing the Medical Certification Section, click on **Save Record/Changes**.
2. Click on **Validate** to check the record for errors.
3. If there are no errors, the record is ready for the medical certifier to review and sign.
4. Click on **Home** to return to the home page or **Logout** to exit EDRS.
5. If there are errors, the system will go to the **Validations** page.

Record with Errors – Verify As Is

Verify or Correct the Entered Data						
		Error Status	Decedent	DOD	Error Message	Error Code
Select	Edit Status	Error in Data	Cotton Candy	09/01/2018	You have indicated the cause of death is "Pending" for this individual. Please verify that is correct.	BR002052

Verify or Correct the Entered Data						
		Error Status	Decedent	DOD	Error Message	Error Code
Select	Update Cancel	<input type="radio"/> Error in Data <input type="radio"/> Corrected <input checked="" type="radio"/> Verified as Is	Cotton Candy	09/01/2018	You have indicated the cause of death is "Pending" for this individual. Please verify that is correct.	BR002052

Verify or Correct the Entered Data						
		Error Status	Decedent	DOD	Error Message	Error Code
Select	Edit Status	Verified as Is	Cotton Candy	09/01/2018	You have indicated the cause of death is "Pending" for this individual. Please verify that is correct.	BR002052

A Pending Cause of Death requires verification. To verify a cause of death:

1. Select "[Edit Status](#)."
2. Select "Verified As Is."
3. Select "[Update](#)."

After verifying, return to the **Cause of Death** page to save the medical certification.

Record with Errors - Must Correct

These Errors Must Be Corrected				
	Decedent	DOD	Error Message	Error Code
Select	Al Bama	06/01/2018	You indicated that a toxicology was performed on the deceased. You must indicate if the findings of the toxicology were used to determine the cause of death.	BR003106

1. Some errors cannot be verified as is, and must be corrected.
2. Click on [Select](#) to return to the **Cause of Death** page to make the required corrections stated in the Error Message.
3. Once corrections are made, save the medical certification.

CHS Review

Status of Recent Signed and Submitted Death Record Certificates								
	EDR #	Legal Name	Medical Name	Date of Death	Birth Date	Sex	County of Death	Certificate Status
Select	NXI10001	Candy, Cotton	Candy, Cotton	09/01/2018	07/25/1942	F	Montgomery	UNDER CHS REVIEW

When the home page indicates a record is Under CHS Review, an edit has occurred that must be reviewed by the Center for Health Statistics. The record is either released for issuance, or sent back to the funeral home or medical certifier for correction.

Pending Records												
	EDR #	Legal Name	Medical Name	Date of Death	Birth Date	Sex	County of Death	Funer.Direct. Signed	Certifier Signed	Verification Printed	Legal Errors	Medical Errors
Select	NXI10001	Candy, Cotton	Candy, Cotton	09/01/2018	07/25/1942	F	Montgomery	X		X		

If a record is released back for correction, it will appear on the home page in red, and the medical certifier's signature is removed.

Home	Death Record	Validations	Record Actions	Status	Forms	VS	Help/FAQs	Logout
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DEATH RECORD



Cotton Candy

Deceased
Personal Info
Personal Info 2
Place of Death/Disposition
Notes
Cause of Death
Alias

Select the record from the home page, and go to the Status page of the record.

Status

The Status page shows all activity on a death record.

VIEW RECORD STATUS

Cotton Candy

	Date	User	Facility
Death Record Created:	09/27/2018	Joan Styres	Baptist Medical Center East
Legal Data Last Save:	10/01/2018	Joan Styres	Leak-Memory Chapel Funeral Home
Medical Data Last Save:	09/27/2018	Joan Styres	Baptist Medical Center East
Certified:			
Signed:	10/01/2018	Joan Styres	Leak-Memory Chapel Funeral Home
Certificate Status:	PENDING COD		
Certificate Submitted:			
Certificate Filed:			

Record Activity:

Date	Assigned From	Assigned From Facility	Assigned To	Assigned To Facility	Comments
9/27/2018 9:51:46 AM	Joan Styres	Baptist Medical Center East	Baptist Medical Center East	Baptist Medical Center East	New Record - Created and Assigned
9/27/2018 9:51:46 AM	Joan Styres	Baptist Medical Center East	Leak-Memory Chapel Funeral Home	Leak-Memory Chapel Funeral Home	New Record - Funeral Home Assgn
9/27/2018 9:52:24 AM	Joan Styres	Baptist Medical Center East	Joan Styres	Alabama Heart Care	A New Record has been created and assigned.;

Date	Activity	User	Facility
10/01/2018	Unlock Medical RecordCorrect date of death	Joan Styres	ADPH

Instructions for correcting the error are sent when the record is released. The instructions can be found at the bottom of the Status page. In this case, the date of death must be corrected before the record can be submitted again.

Correcting an Error

Crimson Urgent Care - (Tuscaloosa, AL)												
Pending Records												
	EDR #	Legal Name	Medical Name	Date of Death	Birth Date	Sex	County of Death	Funer.Direct. Signed	Certifier Signed	Verification Printed	Legal Errors	Medical Errors
Select	NXG10004	Record, Test	Record, Test	02/01/2018	01/01/1925	M	Montgomery					

1. If an error is discovered on the Cause of Death page *before the death certificate is filed*, it may be unlocked and returned to the certifier. To have a record unlocked, call the Help Desk at **334-206-2754**.
2. When the record is unlocked, the certifier's signature is removed, and the record appears in red on the home page.
3. The certifier will then be able to make corrections, save, and sign the record.

If an error is discovered *after the death certificate is filed*, corrections to the Cause of Death must be made with a Supplemental Medical Certification. Questions about Supplemental Medical Certifications should be directed to the Special Services Division at **334-206-2637**.

Notes

The screenshot displays the 'Electronic Death Registration' (EVERS) system interface. At the top, the header includes the system name and the Alabama Department of Public Health logo. A navigation bar contains links for Home, Death Record, Validations, Record Actions, Status, Forms, Help/FAQs, and Logout. The main content area is titled 'DEATH RECORD' and shows a 'Training Record II' with tabs for Deceased, Personal Info, Personal Info 2, Place of Death/Disposition, Notes, Cause of Death, and Alias. The 'Notes' tab is active, showing a list of notes currently in the system for the deceased. Below this is a text input area for new comments or notes, with a red box and arrow indicating where to type. A 'Save Notes' button is also present, with a red box and arrow indicating where to click to save the notes. The interface also includes 'Previous Page' and 'Next Page' buttons.

Electronic Death Registration
Electronic Vital Events Registration System (EVERS)

Center For Health Statistics
ALABAMA DEPARTMENT OF
PUBLIC HEALTH

[Home](#) [Death Record](#) [Validations](#) [Record Actions](#) [Status](#) [Forms](#) [Help/FAQs](#) [Logout](#)

DEATH RECORD

Training Record II

[Deceased](#) [Personal Info](#) [Personal Info 2](#) [Place of Death/Disposition](#) [Notes](#) [Cause of Death](#) [Alias](#)

NOTES
Notes Currently in the system for Deceased:

Enter New Comments or Notes Below:

1. Type Notes here.

Save Notes

2. Save the Notes. Once saved, the Notes move here.

[Previous Page](#) [Next Page](#)

Notes can be added to a record and saved for future reference.
The Notes do not appear on the death certificate.

Alias Name

DEATH RECORD

John A Test Jr

[Deceased](#) [Personal Info](#) [Personal Info 2](#) [Place of Death/Disposition](#) [Notes](#) [Cause of Death](#) [Alias](#)

Do not enter nicknames for an Alias Name. An Alias Name is a false name used to conceal one's identity; an assumed name.

Alias Name(s)

DECEASED ALIAS

Alias

No Alias names have been entered in the database.


1. An Alias name must be a completely different name than the legal name which appears on the [Deceased](#) page.
2. An Alias Name **is not** a:
 - Nickname - Bubba or Junior
 - Professional Title – Dr. John Doe or John Doe, MD
 - Version of the same name – Johnny /John
 - Maiden Name – The Last Name Prior to First Marriage is on the [Deceased](#) page and the parents' names are on the [Personal Info 2](#) page. The maiden name does not need to be shown as an alias.
3. An alias name can be entered for a person who had a legal name change in a court of law. The name prior to the court ordered name change would be shown as the alias name.
4. An alias name is a false name used to conceal identity or an assumed name.


Search

SEARCH

Baptist Medical Center East - (Montgomery, AL)

Record Type
☒ Pending/Submitted/Certified
☐ Pending
☐ Submitted/Certified
☐ Abandoned
☐ Supplemental

Search By:
☐ Year: 
☒ Criteria:
☒ Legal ☐ Medical

County of Death: 

The Search function provides several ways to look for a decedent's record. You can only search for Death Certificates which you certified in the past two years.

Decline Record

The screenshot displays the 'Electronic Death Registration' (EDRS) system interface. At the top, the header includes the system name and the Alabama Department of Public Health logo. A navigation bar contains links for Home, Death Record, Validations, Record Actions, Status, Forms, Help/FAQs, and Logout. The 'Death Record' link is highlighted with a red arrow. Below the navigation bar, the 'Test Record' section is active, with 'Decline Record' highlighted in yellow. The main form area is titled 'Decedent Record' and contains fields for First, Middle, Last, and Suffix names, as well as Sex, DOB, DOD, and SSN. The 'Last' field contains the text 'Record'. Below these fields is a text area for notes, with a prompt: 'Notes are REQUIRED to Decline a record.' A note at the bottom states: 'NOTE: Once you decline this record, you and anyone in your facility will NOT have access to the record.' At the bottom of the form, there is a 'Decline Record?' label and two buttons: 'Yes, Decline.' (highlighted with a red box) and 'No, Cancel.'

1. If a record is assigned to you in error, you can return the record to the sender.
2. Select **Record Actions**.
3. Select **Decline Record**.
4. You must enter notes when declining a record. A brief explanation for the declination is sufficient.
5. Click **Yes, Decline**.
6. The system will send an email to the record creator which includes the notes, notifying them that the record has been declined.
7. The record will be removed from your home page.

Alabama Medical Certification Review Form

1. Click on **Forms**.
2. Select [Medical Information](#).
3. The system generates a PDF which can be printed and forwarded to the certifier for review.

Home	Death Record	Validations	Record Actions	Status	Forms	Help/FAQs	Logout
ALABAMA MEDICAL CERTIFICATION REVIEW FORM							
<p>EVERS EDR Forms</p> <p>Verification of Personal Information</p> <p>Application for Death Certificate</p> <p>Authorization for Out-of-State Disposition</p> <p>Cremation/Burial at Sea Authorization</p> <p>Letter of Non-Contagion</p> <p>Notice of Disinterment</p> <p>Medical Information</p>		<p>Medical Name of Deceased: Al A Bama</p> <p>Alias Names (AKA) if any:</p> <p>Date & Time of Death: 06/01/2018 0615 AM</p> <p>Date & Time Pronounced Dead (Coroner/ME):</p> <p>County of Death: Tuscaloosa County</p> <p>City/Town or Location: Tuscaloosa</p> <p>Cause(s) of Death:</p> <p>A. <u>Immediate Cause</u> (Final disease or condition resulting in death): <u>Approximate Interval Between Onset and Death</u></p> <p>Fall Unknown</p> <p>B. <u>Underlying Cause</u> (Due to or as a consequence of): <u>Approximate Interval Between Onset and Death</u></p> <p>C. <u>Underlying Cause</u> (Due to or as a consequence of): <u>Approximate Interval Between Onset and Death</u></p> <p>D. <u>Underlying Cause</u> (Due to or as a consequence of): <u>Approximate Interval Between Onset and Death</u></p> <p>Other Significant Conditions (Contributing to death but not resulting in the underlying cause(s) above):</p> <p>Manner of Death: Accident</p> <p>Autopsy: No If yes, were findings considered in determining cause:</p> <p>Toxicology: Yes If yes, were findings considered in determining cause: No</p> <p>Did tobacco use contribute to the death: No</p> <p>Transportation accident: No Transportation Location:</p> <p>Pregnancy: Not Applicable</p> <p>How injury occurred: Accidental fall</p> <p>Date and Hour of Injury: 06/01/2018 Unknown Injury at work: No</p> <p>Place of injury: Home Location of injury: Home</p> <p>Name and Title of Person Completing Cause of Death: Joan Styres</p> <p>Address of Person Completing Cause of Death: 1718 Veteran's Memorial Parkway Tuscaloosa Alabama 35404</p> <p>Certifier License Number: JS123</p> <p>The above information will be recorded on the decedent's death certificate. This form is for review purposes only and may not be used for any purpose where a certified copy of the death certificate is required.</p>					

Helpful Hints

1. The personal information completed by the funeral home and the medical certification sections operate independently of each other. The funeral home director can complete and sign the certificate and does not have to wait for the medical certifier. The medical certifier can complete and sign the certificate and does not have to wait for the funeral home.
2. After a record is created, regardless of who created it, the **Deceased**, **Personal Info 1**, **Personal Info 2**, and **Place of Death/Disposition** pages belong to the funeral home and only the funeral home staff can correct information on these pages.
3. After a record is created, regardless of who created it, corrections to the **Cause of Death** page can only be made by the medical facility staff or certifier.
4. If a record is assigned to a facility in error at the time of creation, the record can be reassigned through Record Actions.
5. When a record is to be assigned to a physician, first assign the record to the physician's office, where applicable, and then to the physician.
6. Center For Health Statistics staff cannot make corrections on electronic death certificates. Corrections that need to be made prior to filing the record must be made by the funeral home or medical facility/certifier.

EDRS Informational Website

alabamapublichealth.gov/edrs

The EDRS Informational Website contains:

- Training Materials
- Facility User Authorization Form
- User Agreement
- Medical Certifier Agreements (Physician, CRNP, CNM)
- Instructions for Requesting Access to EDRS
- Contact Information for Area Trainers

Need Assistance?



For assistance with Electronic Death Registration, call the Help Desk at **334-206-2754**.



For assistance with completing a Supplemental Medical Certification, or to find out the status of one that has been submitted, call the Special Services Division at **334-206-2637**.