

Good Life. Great Mission.

DEPT. OF HEALTH AND HUMAN SERVICES

NEBRASKA DEPARTMENT of HEALTH & HUMAN SERVICES (DHHS) VITAL RECORDS ELECTRONIC REGISTRATION SYSTEM (ERS) BIRTHING REFERENCE TRAINING MANUAL Revised December 2020



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INFORMATION FOR COMPLETING THE CERTIFICATE OF LIVE BIRTH

Required by Sections 71-602, 71-604, 71-607, 71-640.01, and 71-640.03 Revised Statutes of Nebraska

Certificates are permanent records and official copies are made from them. Therefore, it is essential that the certificates be prepared in accordance with the following standards:

- > Use the Nebraska Electronic Registration System to complete birth certificate registration process.
- > Do not complete certificates in all capital letters. Capitalize only the first letter of each proper noun.
- Spell entries correctly. Verify names which sound the same, but have different spellings (Smith vs. Smyth, Gail vs. Gayle, etc.).
- > A mother is legally married even though she is legally separated from husband/spouse.
- A Fetal Death Certificate is required to be filed for an infant that has advanced to the 20th week of gestation or more and is born dead. A Fetal Death Certificate is not required if the fetus has not advanced to the 20th week of gestation.

BIRTH (HOSPITAL/BIRTH CENTER) PERSONNEL

Hospital/Birth Center Personnel will be responsible for data entry of the Birth record. They will need to be familiar with the data entry process as a whole – which starts from sign-on, to calling up a new entry screen and/or searching for an existing Event record, to screen navigation and familiarity of field types, to working with the edit error process, the save and update functions and the informant verification process.

Additionally, printing will need to be mastered in terms of setting up printer as well as selection of the document type (worksheets, etc.) to be printed.

Other system functions such as running reports will be looked at as well.

Refer problems not covered in these instructions to the Vital Statistics Office by calling one of the direct numbers located in the Contacts, Help Desk, and Birth Desk section of this manual.

DEFINITION OF LIVE BIRTH

The following definition has been adopted by the World Health Assembly and is recommended for use in the United States.

LIVE BIRTH: Live birth is the complete expulsion or extraction from its mother of a product of human conception, irrespective of the duration of pregnancy, which, after such expulsion or extraction, breathes or shows any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached.

IMPORTANT: If an infant breathes or shows any other evidence of life after complete delivery even though it may be only momentary, the birth must be registered as a live birth and a death certificate must also be completed.

A STANDARD CERTIFICATE OF BIRTH SHALL BE FILED WITHIN FIVE (5) BUSINESS DAYS AFTER THE BIRTH PER NEBRASKA STATUTE 71-604.

Special characters: If you need to put accents (tildes) like: \tilde{n} , \dot{a} , \dot{e} , \dot{i} , \dot{N} . You need to press **SHIFT** + ~ **KEY** until you find the correct accent. You will need to type the letter first then do the SHIFT + ~ KEY (The ~ is located next to #1 key on your keyboard).

Extra spaces around punctuation are not allowed. For example: Do not include spaces around a hyphen or other punctuation such as an apostrophe. Any other characters like: periods, number signs, commas, etc., a warning box will appear.

Suffix: Suffixes such as Jr I II III IV are allowed. Suffixes such as The I, The II, The III are not allowed. Suffixes with periods, number signs, commas, etc. are also not allowed. If a suffix is not on the dropdown list and entered manually, Social Security Administration will not process the card. The parent will need to contact Social Security Administration for further instructions.

Field Help: In many of the fields containing the text cursor you can select F1 and you will see additional information about that field. Screen shot below:

Home	File∓	Search +	Documents/Faxes -	Action-	Linking -	Tools -	Batch +	Help v				Ø	18
							Field Hel	D	×				
		th: New	ner Father Facil	Field Id: 3	32155 (A. Pren	nature ROM)			ts present.	•	Save	
		Onset of La A. Prematu B. Precipito					u 0	=12 hours) Spontaneous «"), 12 hours or more befo					
		C. Prolonge	ed Labor >=20 hours										
		None of Th	e Above										
		🔲 Unknown											

If you **Hover** over a selected field label it will display the fields Help text. You will need to put your cursor over the label of the field in order to see the help text. Screen shot below:



QUICK REFERENCE GUIDE

The VRS System has a Quick Reference Guide on keyboard shortcuts located in the Help Link. Click on Help> Quick Reference Guide. Screen shot below. There are more keyboard shortcuts below. See page 5 for additional shortcuts.



		Quick Reference Guide
Keyboard Shortcuts	Search Expressions -	
Keyboard Shortcu	ıts	
Action		Shortcut Keys
New Record		Death - Ctrl D Birth Ctrl B
Move to next field		Tab
Move to previous field	I	Shift Tab
Move to first field of n	ext section	Ctrl 0
Clear a field – clears fie	eld where cursor is	Ctrl Z or Delete
Entering dates in a dat	e field	T Today
		F Increments date by one day
		B Decrements date by one day
		U All 9's for unknown
		X All 8's for not applicable
Checkbox Toggle		Spacebar (when checkbox is in focus)
Close Window		Alt F4
Save		Ctrl S
Error Messages		R Rekey the field
		S Skip the field
		V Override the field and move on
		ОК

KEYBOARD SHORTCUTS

The **Tab** key moves the user from field to field within the data entry form. Before the field is exited, it is edited for errors (unless the edits for the field are overridden or the field is queried). Fields are ordered left to right, top to bottom, in normal reading order. When the **Tab** key is pressed in the last enterable field on a page, the notebook selects the next page and the text cursor is placed in the first enterable field on that next page. If a page contains no enterable fields, it is skipped.

Shift-Tab moves the user to the previously held field. It will not automatically switch pages.

Delete

Put the cursor in the text field and hit the Delete key.

F1

Depressing **F1** displays field help for the field your cursor is on.

Ctrl-0 (zero)

The data entry form is built from labeled boxes which are referred to as paragraphs (in Windows terminology, group boxes). Pressing **Ctrl-0** will move the text cursor from the present field to the first enterable field in the next paragraph.

Ctrl-R

This brings up a dialog box to 'Reload the page' with a warning indicating that the changes might not be saved.

Ctrl-C

This key copies the highlighted text to the clipboard. The field contents are not altered from the clipboard.

Ctrl-V

Pastes the contents of the Windows clipboard into the field containing the text cursor. The contents pasted by **Ctrl-V** replaces whatever may otherwise be in the field.

Ctrl-X

This shortcut cuts the present field and copies its contents to the Windows clipboard. From the clipboard, it can be pasted into another data entry field, or into another Windows application which supports the clipboard.

T (F and B)

On many date fields the user can enter a "**T**", for "today", and the current system date will display. Additionally, the values "**F**", for "forward" (the next following date), and "**B**", for "back" (or, the immediately preceding date), are available. These values may be repeatedly entered to continue the process of either advancing or reversing the date one day at a time.

Ctrl-S

This saves the current Event. This is equivalent to the File / Save menu item or Save Icon.

Left Mouse Click

The left mouse button can be used to place the text cursor in a particular field by clicking when the mouse cursor is over the desired field. The left mouse can also select notebook pages by clicking on the tab for the desired page.

Right Mouse Click

A menu of options for a field may be displayed by clicking the right mouse button when the mouse cursor is positioned over the field. This can be used to clear a field.

Alt-F4

This key combination displays a dialog box indicating Leave Site? With a message displaying 'Changes you made may not be saved.' If you click on the Leave button, Windows will close the web browser.

Check Box Fields

A left mouse click will toggle the checked state of a check box field. Pressing the space bar when the field is selected also toggles the state.

Combo Box Fields

Combo box fields associated with a dropdown list of values, are indicated by a small box with an inverted triangle to the right of the field. When a combo box is selected, several keys are operative. **Up** and **Down** arrows change the field contents to the next available value from the list. Clicking on the inverted triangle with the left mouse button also toggles the drop-down list. Typing a partial character string when the field is selected will position the list to the first selection that begins with that string. For example, in a list of US States, typing "A" positions to "Alabama" and "ALAS" positions to "Alaska". If user types "AL", "Alabama" is displayed. If you start typing and you type something in error, you can use the Backspace key to remove or use the Delete key to restore the dropdown list.

NOTE: If entry is not in dropdown list, type it in manually and the field will turn orange. Orange indicates that the field was manually entered. If queried or overridden the field(s) turn aqua blue.

'U' in date field – If you type in a U for unknown in the date field it will fill in all 9's for the date.

SUBSCRIPTION PAGE

The following link will take you to the Subscription page. Select the link that best fits your job and interests. You can also subscribe to the subscriptions page and each time it is updated with information you will be notified via an email alert.

http://dhhs.ne.gov/Pages/Vital-Records-Partners.aspx

Note: Subscription Page is also located in the Help menu after login.

E-LEARNING TOOL

https://www.cdc.gov/nchs/training/BirthCertificateElearning/

Note: e-Learning tool is also located in the Help menu after login. It is recommended that each person that enters in birth records completes this training.

GUIDE FOR BIRTHING HOSPITALS

https://www.cdc.gov/nchs/data/dvs/GuidetoCompleteFacilityWks.pdf

Note: Guide for Birthing Hospitals is also located in the Help menu after login. If you would like a hard copy of the guide email Vital Records at <u>DHHS.VitalRecords@nebraska.gov</u> and indicate how many copies you would like.

DEFINITION OF TABS AND PARAGRAPHS IN ERS

Tabs – Tabs are referred to the tabs at the top of the webpage where you enter the information on child, mother and father. Tabs are labeled Child, Mother, Father, Facility, Medical, Newborn, Flags and Complete. Screen shot below has a red rectangle around the tabs with a label indicating tabs.

Paragraph – Refers to each section in a particular tab, for example 'System' and 'Mother/Parent Current Legal Name' are paragraphs in the Child Tab. Screen shot below. The word 'Paragraph' in italics with yellow labels is listed in each paragraph below. In this document the paragraphs are identified as black Italic font.

Birth: New	Start New	Image count: 0 Notes count:	0 Alerts: N	No alerts present.	▼ Save
Child Mother Father Facility Medic	al Newborn Flags	Complete TABS	5		
System PARAGRAPH State File Number NE State File Number	Local File Number	Created By	Date Created	d Date Modifie	ed
Modified By User Loc. Good Li	ition e Birth Place	Reg Type	Code	Record Status	
Mother/Parent Current Legal Name Social Security Number First Name Suffix	Middle		Last		
Mother/Parent Name at Birth First Name Middle	1PH	Last		Suffix	
Child PARAGRAPH First Middle		Last		Suffix	
Mother's Medical Number Date of Birth	Time Unit	¥			
					Next

NOTES UTILITY

The user can also add a note to the record or a particular field at any time, even after the user has finalized the record by selecting Actions and Show Notes.

Click on Actions>Show Notes:

Ŧ	Action -	Linking -	Tools +	Batch -	Help +	
	Review Er	rors/Queries				
	Show Not	es			_	
		Cillia	momor	Father	Facility	Medica
		Syster	n			
		State Fi	le Number	NE	State File N	lumber
		00470	0.000	-	1005	

Notes window displays. Click 'New' button to add a new note.

						Notes			
Notes Id	Field Name	Note	Create Date	Modify User Id	Modify User	Modify Date	Is Active	Application Function	
163629	Record	This is a test!	2018-12-14T13:31:17.3306817-06:00	25877	Laurie Mccall	2018-12-14T13:31:17.3306817-06:00	true		View
					N	ew Close			

Type in your note and click Save.

	Note	s		
Field Name:Record Security Function:	Field Label:Rec		Active?	
B I ∐ ebe Format ▼ 2 ▼ ▼ 2 2	S ∃ ■ ∷= (inherited font)		herited size)	¥
1				
5	Sava	Cancol		

You can see in the Notes grid that your Note was successfully saved.

The user can also right click in a field to add Notes. Choose any field, right click and Select Notes

st Nan			Middle						
	lie		widdle						
Mary		Sho	w Page Errors						
		Site	Information						
hild		Note	S						
irst		Inse	rt Current Date						
Robert		Clea	r Field						
			rt Default Value						
lother's	Medical N	umber							
						Notes			
Notes Id	Field Name	Note	Create Date	Мо	odify User Id	Modify User	Modify Date	Is Active	Application Function
163629	Record	This is a test!	2018-12-14T13:31:17.3	3306817-06:00 258	877	Laurie Mccall	2018-12-14T13:31:17.3306817-06:00	true	
163630	Record	Doing another test he	re! 2018-12-14T13:40:16.5	5950754-06:00 258	877	Laurie Mccall	2018-12-14T13:40:16.5950754-06:00	true	

NOTE: Once a note is added, the 'Notes Count' highlighted in green at the top will display a count of the notes that were added. You can look at notes by either clicking on the Actions>Notes or double clicking on the green highlighted box that says Notes count.

			\frown					
		Image count: 0	Notes count: 1	Alerts:	No alerts present.	*	Save	
m	Flags	Complete						

The show notes button on the complete tab can also be selected to view Notes:

Chil	d Mother	Father	Facility	Medical	Newborn	Flags	Complete	
Co	omplete							
Но	spital Complete	ed Ho	spital Comp	leted Date	Email Address			
Ν	l			#				
She	ow Notes							
	Shov	v Notes						

OVERRIDES AND QUERIES

Depending upon the field and the given user's security role, options of **Override** and **Query** may also be available.

The queries and overrides errors will now display on the right side of the screen. You can click on the blue link to take you back to the tab and field that has an error for you to fix it or you can select the choices available which are R for Rekey, S for Skip, O for Override and Q for Query. If you hit R it will take you back to the field. Be sure to scroll down if you have a lot of errors. After you fix an error it will disappear from the list.

If a user queries a field or overrides an edit, data regarding the error and field will be stored and further clarification in the 'Reason Edit was Overridden' field can be made on the Complete tab. If any field is overridden be sure to complete the 'Reason Edit was Overridden' is filled out on the Complete tab. The field will turn aqua blue. The examples below displays two validation errors along with snapshots of the errors. If you click on R for Rekey it will take you to the field with the error.

Validation	Errors			
Child > Mother/Par Legal Name > Please verify full mid R S O Q Bypass	Middle ddle name.			
Mother/Parent Current Le	egal Name			
Social Security Number	First Name	Middle	Last	
			Jones	
654-65-1111	Jane			

(Child			
F	irst	Middle	Last	Suffix
	Matthew		Jones	•

HOW TO SEARCH WITHIN ERS

Search Criteria

On the Search Screen, first note that there are two tabs – the Search Criteria tab and the Search Results tab.

The **Search Criteria** tab is where the criteria for the search are entered. The **Search Results** tab is where the results (record entries, if any) of that search is displayed.

Searching by Zip Code: If you search by the zip code and put in a partial zip code it will bring back all the results that have those numbers in it. If you put in the County and/or City it will filter the zip code for that particular County and City. See below:

06852 16852 26852	1	Name of Attendant/Certifier		Date of Birth (String)	
36852 46852		Resident County		Resident City	
66852			•		•
68520	•	City Limits		Payment Source	
6852	•		•		•

You can search by using the following special characters as well:

 Sear 	ch criteria
--------------------------	-------------

%	Smi%
_	Sm_th
,A or ,D	Ascending or D escending
NULL	
<>NULL	
$(\mathbf{X} + \mathbf{Y})$	Records with a value <i>between</i> (and including) X and Y
IN(A+B+C)	Records with a value in that listed set
>,>=,<>,<,<=	Other operators

To search on Date fields you will need to include the slashes "/", for example: 01/04/2019

Fields included on the **Search** tab have been selected for their relevancy to the search for each Event. They typically include name fields, key date fields, facility fields and the like. Any one of these fields by itself is sufficient to institute the search. For example, a name field alone will yield search results. If, however, you wish to refine the search, additional search criteria can be entered in additional fields thereby narrowing the results set.

Note, though, that while a greater number of fields used in the search will result in a more refined set of results, **each** of the criteria entered becomes part of the match process and this, in turn, necessitates a greater accuracy in those criteria that are entered. Entering '**Betty**' for a woman's first name, for example, will cause the entire search to fail if the person's name is known to the system as '**Elizabeth**'.

In addition to entering exact information for the search, other options are possible.

% - The **percent sign is a wildcard** and allows the user to not enter some letters in the search field. For example, if the exact spelling of the child's last name is not known, the user could enter the characters of the child's last name that are known and use the % to signify the remaining letters. If, for example, "**Smi%**" is used in the search field, it would find and display all records that started with "**Smi**". Or, if the last part of the child's name was known, the user could enter

"%son" to locate all names that ended in "son".

_ (the **underline character**) – This character is used to denote that exactly **1** letter is unknown and can be anything.

,A or ,D – When a ",A" is put in a search field, the resulting records will displayed in **a**scending order on that field. If a ",D" is put in a search field, the results will be in **d**escending order on that field. This is used when a large result is expected. It can be used in combination with other search criteria.

NULL – When this word is used in a search field, the records with an empty (or, **null**) value are displayed. For example, this might be used in the **State File Number** field to display those records that have not been numbered yet.

<> NULL – This indicates a **not** null, or not empty, value – i.e., some sort of value is present. (X+Y) – This is interpreted as "Search for records that have a value BETWEEN X and Y". This actually includes the values X and Y too. This can be used for any field including the state file number and the date fields that are true dates and not just string representations of the dates. True dates are usually the dates that cannot have an unknown component. IN(A+B+C) – This search construction directs that at least one of the listed values be present – *either* A *or* B or C.

Other operators – These include >,>=,<>,<,<=. For example the operator >= will find records with a value greater than or equal to the rest of the search field entered. To find a last name that is greater than or equal to **M**, for example, the characters >=**M** would appear in the Last Name field. The <> operator means "**not equal to**".

From menu click on Search>Birth. The 'Search (Birth)' screen displays:

File+	Search +	Documents/Faxes -	Tools +	Batch +	Help +			
	Birth							
	Message	System		Searc	ch (Birth)			
		nformation		Search	Criteria Search Result			
	Hearing S							Clear Search
	User Mair			State	File Number	Year		NE State File #
				Date	of Birth	Record Status		Child's First Name
							•	
				Child	I's Middle Name	Child's Last Name		Child's Suffix
								•
				Child	I Last Name (Soundex)	Sex		Paternity Queue
							•	
				Facil	ity Name	Mother/Parent First Name		Mother/Parent Middle Name
					•			
				Moth	er/Parent Last Name	Mother/Parent Birth Last Name		Father/Parent Legal First Name
				Fath	er/Parent Legal Middle Name	Father/Parent Legal Last Name		Father/Parent Legal Suffix
								·
				User	Location / Facility Name	Father/Parent Last Birth Name		State of Birth
								·
				Cour	nty of Birth	Birth Local File Number		Hospital Completed
					•			
				Doug	glas County Complete	Alert Count		Reject Queue
				(Sys	tem use only!)	BIRTHID		Created By
				Moti	ner/Parent Married?	Grams		Reg Type Code
				Infar	nt transferred?	Child's Medical Record #		Mother's Medical Number
					•			
				HINE	FO record?	Mother Date of Birth		Prenatal Date Began
				Nam	e of Attendant/Certifier	Date of Birth (String)		Resident State
					*			•
				Resi	dent County	Resident City		Resident Zip
					•		•	· · · · · · · · · · · · · · · · · · ·
				City	Limits	Payment Source		Hepatitis B?
					•		•	

SAVE VS SAVE WITHOUT EDITS

Save without edits if you have limited information or if you get interrupted and want to save an incomplete record. You can Save without Edits and come back to it later.

When you come to the Birth Attendant field and the Birth Attendant is not listed in the dropdown list you can save without edits so you can add your Birth Attendant. Otherwise you must use Save icon before you complete the record to validate you do not have any edit errors or skipped fields.

lome	File -	Search -	Document
	New		•
	Save		CTRL+1
	Save V	Vithout Edits	CTRL+2
	Save A	s Twin	
	Relogir	ı	
	Log Ou	ıt	

HELP LINK

If you click on the Help link in the toolbar you will see that the following forms have been added.

Birth Facility Worksheet Birth Mother Worksheet Birth Mother Worksheet Spanish Birth Multiple Birth Worksheet SSA Form 2853 SSA Form 2853 Spanish

Home File - Search - Documents - Action -	Linking - Tools - Batch -	Help -		▲	1	95
Birth: 4330648		Quick Reference Guide	Image count: 0 Notes count: 0 Alerts: 0			*
Child Mother Father Facility Medical New	wborn Flags Complete	Site Information				
Mother/Parent Current Legal Name		Show Page Errors				
Social Security Number First Name			Last			
545-64-5645 Jane		Birth Certificate Application	Johnson			
Suffix		Birth Facility Worksheet				
*		Birth Mother Worksheet				
		Birth Mother Worksheet Spanish				
Mother/Parent Name at Birth		Birth Multiple Birth Worksheet				
First Name	Middle		Suffix			
Jane	Ann	E-Learning for Birth Reporting	•			
		Guide for Birthing Hospitals				
Child		Password Station				
First	Middle	SSA Form 2853	Suffix			
Robert	Andrew	2	n 🔹			
Mother's Medical Number		SSA Form 2853 Spanish				
ABC1234		Subscription Page				
Date of Birth Time of Birth	Time Unit	Vital Statistics Reports				
04/13/2010 m 04:50	AM					
04,13/2010 [2]	AW					
Long Child's Name						

ENABLE JAVASCRIPT

You will need to enable javascript in your browser in order to use the NX system. Instructions below on how to enable for Chrome, Internet Explorer, Firefox and Safari.

Chrome

Click on the ellipsis in the upper right of the page.

:

Select settings

New tab	New tab					
New window	New window					
New incogn	New incognito window Ctrl+Shift+					
History	History					
Downloads			Ctrl+J			
Bookmarks			•			
Zoom	- 10	+ %00	50			
Print			Ctrl+P			
Cast						
Find			Ctrl+F			
More tools			•			
Edit	Cut	Сору	Paste			
Settings						
Help			•			
Exit						

In the search bar type in Javascript. Click on the arrow next to Site Settings.

rivacy and security	
Sync and Google services More settings that relate to privacy, security, and data collection	•
Allow Chrome sign-in By turning this off, you can sign in to Google sites like Gmail without signing in to Chrome	-
Send a "Do Not Track" request with your browsing traffic	
Allow sites to check if you have payment methods saved	-
Preload pages for faster browsing and searching Uses cookies to remember your preferences, even if you don't visit those pages	-
Manage certificates Manage HTTPS/SSL certificates and settings	
Manage security keys javascript keys and create PINs	•
Site Settings Control what information websites can use and what content they can show you	Þ

Click the arrow next to Javascript

Q javascript	8
← Site Settings	0
All sites	
View permissions and data stored across sites	+
Permissions	
Cookies Allow sites to save and read cookie data	•
Location Ask before accessing	•
Camera Ask before accessing	•
Microphone Ask before accessing	•
(v) Motion sensors Allow sites to use motion sensors	•
Notifications Ask before sending	•
JavaScript Allowed	•

You want to make sure the button next to allowed is set to the right. If not move the button to the right and then your Javascript is enabled.

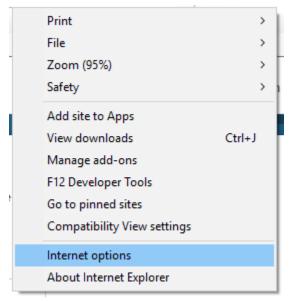
← JavaScript	Q Search
Allowed (recommended)	-
Block	Add
No sites added	
Allow	Add
No sites added	

Internet Explorer

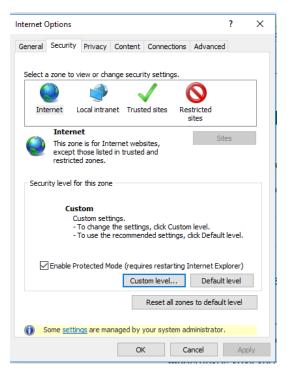
Click on the gear in the upper right corner of the window.

ŝŝ

Select Internet Options



Click on Custom Level button



Scroll to Scripting. Under Active Scripting check the radio button by Enable.

Security Settings - Internet Zone	×
Settings	
Websites in less privileged web content zone can navigate in Disable Enable	
O Prompt	
Scripting	
Active scripting	
O Disable	
Enable	
O Prompt	
Allow Programmatic clipboard access	
O Disable	
O Enable	
Prompt	
S Allow status bar updates via script	
Disable Foshle	
*Takes effect after you restart your computer	
Reset custom settings	
Reset to: Medium-high (default) ~ Reset	
OK Cancel	

Click the OK button and you now have javascript enabled.

Firefox

In address bar, type "about:config" (with no quotes) and hit enter. The following will display. Click on Accept this Risk.

about:config	×	+				
← → ♂	企	😢 Firefox	about:config		☆	
C Most Visited	실 Getting Started 🚦	NX - Train				
				Δ	This might void your warranty!	
					This might vola your warranty.	
					Channing share a diamond a string and ha baseful to the stability assume, and a strong of this and institution. Var	
					Changing these advanced settings can be harmful to the stability, security, and performance of this application. You should only continue if you are sure of what you are doing.	
					Show this warning next time	
					· Show this working lead the	
					I accept the risk	

The following screen displays. In the search bar type "javascript.enabled" (without the quotes) and hit enter.

🔅 Most Visited	Getting Started	Ν	NX - Train

Search: D			
Preference Name	▲ Status	Туре	Value
accessibility.AOM.enabled	default	boolean	false
accessibility.accesskeycausesactivation	default	boolean	true
accessibility.blockautorefresh	default	boolean	false
accessibility.browsewithcaret	default	boolean	false
accessibility.browsewithcaret_shortcut.enabled	default	boolean	true
accessibility.delay_plugin_time	default	integer	10000
accessibility.delay_plugins	default	boolean	false
accessibility.force_disabled	default	integer	0
accessibility.handler.enabled	default	boolean	true
accessibility.indicator.enabled	default	boolean	false
accessibility.mouse_focuses_formcontrol	default	boolean	false
accessibility.support.url	default	string	https://su
accessibility.tabfocus	default	integer	7
accessibility.tabfocus_applies_to_xul	default	boolean	false
accessibility.typeaheadfind	default	boolean	false
accessibility.typeaheadfind.autostart	default	boolean	true
accessibility.typeaheadfind.casesensitive	default	integer	0
accessibility.typeaheadfind.enablesound	default	boolean	true
accessibility.typeaheadfind.enabletimeout	default	boolean	true

The following will display. If the Value column is true your javacscript is enabled.

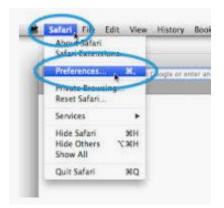
🏠 Most Visited 💊 Getting Started 🔃 NX - Train			
Search: \wp javascript.enabled			
Preference Name	▲ Status	Туре	Value
javascript.enabled	default	boolean	true

If it is False you can highlight the row and right click and the Toggle button will display. Click on Toggle and it will change the value from False to True. If you don't have access you will need to contact your IT department.

▲ Status	Туре	Value	
modified	boolean	false	
			<u>T</u> oggle
			<u>С</u> ору
			Copy <u>N</u> ame
			Copy <u>V</u> alue
			Ne <u>w</u> >
			<u>R</u> eset

Safari

Click the Safari menu, choose Preferences. Make sure you have a Safari window open and active.



Click on the Security tab the click the Enable JavaScript checkbox to enable or disable JavaScript



Close the Preferences window. JavaScript is now enabled.

ELECTRONIC REGISTRATION SYSTEM (ERS) INSTRUCTIONS

Electronic Registration System (ERS) Log on Screen https://vrers-dhhs.ne.gov/WebSvcVrers

Enter: User Name, Password Click: Log In

State E-Vit		cord System 12/07/2018 myVRS Test
	Jser name: Password:	Enter your user name Enter your password
	2	Login Reset password

The following Information box may display with a message if there is a message to display: The box will have messages like when the office is closed, system is down for maintenance, etc. Click 'X' to close the message.

Information	
Testing the Broadcast Message. This is just a test. If this was a real message, it would say something else.	0

The following page will display: This page will display messages for all users in the 'Attention All Users' section and/or you may have messages under the header of 'Messages' for only certain roles.



NOTE: In the Help menu you can also access the eLearning tool, Guild for Birthing Hospitals as well as the Subscription page.

User can hit F1 key which displays context-sensitive help for the field containing text. You will need to hover over the label of the field.

To enter a New Birth follow the instructions below:

Click on File>New>Birth to enter a new birth certificate. Or you can use the keys CTRL + B.

File -	Search -	Tools -	Batch -	Help+
New		•	Birth	CTRL+B
Delegir			Message	System
Relogir	I		Hearing I	nformation CTRL+I
Log Ou	t		Hearing	Screening CTRL+e

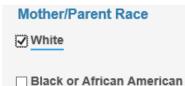
The Registration screen will open to start the Birth Registration process. By default the Child's tab will display first. **Please note:** All information for Child's, Mother's and Father's tab will come from the Mother's worksheet.

th: New				Ima	ge count: 0 Note	es count: 0	Alerts: 0			۳	Save
Child Mother Fat	her Facility	Medical	Newborn	Flags	Complete						
System											
State File Number	NE State File I	lumber	Local File Nu	mber	Created By		Date Created	d	Date Modified		
					Laurie McC	all				())	
Modified By		Jser Locatio	on			Reg Type	Code	Record Statu	IS		
		Good Life E	Birth Place					NORMAL	•		
Mother/Parent Currer	nt Legal Name										
Social Security Number	First Name			Middle			Last				
Las											

**Header is not frozen in IE...this feature only works in Chrome and Safari. It is highly recommended to use Chrome or Safari when using this application. Each field that is in focus will be highlighted yellow to indicate which field you are on. If it is a checkbox field the label will be underlined. Also, if you use IE when tabbing the screen will flash and this is why it is recommended to use Chrome.

EX: Field in focus in the above snap shot is the social security number.

EX: Check box in focus



Child Tab

hild Mother Father Fa	cility Medical	Newborn Flags	Complete					
System State File Number NE Stat	e File Number L	ocal File Number	Created By		Date Created	1	Date Modified	Ē
Nodified By	User Location Good Life Birth	1 Place		Reg Type Cod	e	Record Statu NORMAL	IS V	
Mother/Parent Current Legal N social Security Number First Nz 		Middle			Last			
Mother/Parent Name at Birth First Name	Middle		Last			Suffix		
Child First	Middle		Last			Suffix		
Nother's Medical Number								

System paragraph - overview

This section is for Vital Records use. Your name (Created by) will be entered as you create the record. User location will be automatically filled in with the location you logged in as.

Record Status: Defaults to Normal

Mother/Parent Current Legal Name paragraph - Full Name after marriage, if married.

Social Security Number - If none, please enter 000-00-0000 and put a comment in the Note Utility when completing the record. If she refuses, then enter 999-99-9999 and put a comment in the Note Utility when completing the record. If she refuses, the record will not be filed until the number is provided.

First Name – Enter Mother's First Name

Middle Name – Enter full middle name, do not enter initials. If no middle name leave blank and put a comment in the Notes Utility when completing the record. Use only middle initial if on birth certificate.

Last Name - If more than one last name, you can enter them in this box. If married and keeping name at birth, put a comment in the Note Utility when completing the record.

Note: In the Name fields of any paragraph the first letter of the first name, middle name and last name will automatically capitalize after tabbing off the field.

Mother/Parent Current	Legal Name		
Social Security Number	First Name	Middle	Last
313-44-4414	Willie	Marie	Mccall
0. 17			

You can also 'Ignore the Casing' rules by deleting the name in it and right click in the field and choose 'Ignore Casing Rules'. This allows you to capitalize whatever letters need to be capitalized, for example: van Buren. The casing rules are automatically turned on for each field. If you need another name field to be capitalized differently you will need to turn off casing rules for that field.

Last	
1	Show Page Errors
	Site Information
	Insert Current Date
	Clear Field
	Ignore Casing Rules
	Insert Default Value

Suffix - if any – select from dropdown, Jr, I, II, III, IV, etc.

Mother/Parent Name at Birth (Maiden Name) paragraph - Full Name as it appears on her current birth certificate.

First Name – Enter full first name.

Middle - If none leave blank and put a comment in the Note Utility when completing the record. Do not enter initials, must be full name, unless only middle initial is on her birth certificate.

Last - If more than one last name, you can enter them in this box.

Suffix, if any – select from dropdown list Jr, I, II, III, IV, etc.

Child paragraph

Child's given or surname cannot be separated by commas or periods, it can be hyphenated

First - If parents have not decided what to name the child, you can leave this information blank. You still need to enter the last name. Later on they can add the name at Vital Records office. A social security card will not be issued without a first name.

Middle - If none, leave blank and put a comment in the Note Utility when completing the record, otherwise enter full middle name unless parents indicate only initial on birth certificate.

Last - If more than one last name, you can enter them in this box

Suffix, if any – select from dropdown list Jr, I, II, III, IV, etc.

Mother's Medical Number – This is from Facility Worksheet. This is an optional field. This is your last entry on this window. If you Tab, the system will take you to the next screen.

Note: You will not enter the following information at this time, information will populate from further entries: **Sex; Date of Birth; Time of Birth; Time Unit; Long Child's Name** (System will populate)

Mother's Tab

Birth: New	Start New	Image count: 0 Notes count: 0	Alerts: 0	• Save
Child Mother Father Facility	Medical Newborn Fl	lags Complete		
Mother/Parent Residence Address Street Name & Number		ide City Limits?		
Country United States	State ZIP	- Combined	•	
County	City, Town/Location	Zip Code		
Mother/Parent Mailing Address Same as residence? State	City, Town/Locatie	on Zip Code		
Mother/Parent Demographics Date of Birth Age	Country of Birth United States	Birth Sta	ite 🗸	
Birth City	Education		•	
Mother/Parent Origin Spanish/Hispanic/Latina? Mexican?	Puerto Rican?	Cuban?	Other Ethnicity	

Mother/Parent Race			
Black or African Americ	can		
🗆 American Indian/Alaska	Native If Other Sp	pecify	
Asian Indian			
Chinese			
🗆 Filipino			
Japanese			
Korean			
Uietnamese			
Other Asian	If Other Specify		
Native Hawaiian			
Guamanian or Chamorr	o		
🔲 Samoan			
Other Pacific Islander	If Other Specify		
Other	If Other Specify		
🗆 Unknown			
Mother's History			
Receive WIC?	Height (feet)	Height (inch.)	Prepreg. Weight (Ibs.)
	mber of Cigarettes Per		
3 Mo. Before Pregnancy	First Trimester	Second Trimester	Third Trimester
Marital - At Birth/Conc	eption/Any Time Betwe	en	
Mother/Parent Married	3 Way Paternity?	Paternity Completed?	Parent's Consent Given

Mother/Parent Residence Address paragraph - P.O. Box cannot be entered. It needs to be the physical address of residence.

Country – Defaults to United States. If you need to change the Country simply delete United States out of the field and select the Country you need. Note: If you change the Country you will receive a message, screen shot below. Select the Country you need from the dropdown, if not in the dropdown list type it in manually and select override button located within the message and continue.

	Mother > Mother/Parent Residence Address > Country Usually the Mother's Country of Residence is the United States.
Country	You have entered something other than the United States.
Albania 🔻	R S O Q Bypass: 1 2 3 4

State – Enter the State name. If the US State or US Territory is not available in the dropdown list, check to make sure the Country is United States.

You can filter on Country, State and Zip-Combined fields. The Country field will be defaulted to United States. If your Country is United States then filter on State and then Zip-Combined field. Once you put in your State, the Zip combined field will filter on what you enter. For example if I type in '681' I will see all zip codes starting with a 681 and their associated country and city. You can put in as many characters you want to narrow down your search. Once you find your zip combined select it and it will autofill the County, City, Town/Location and Zip Code fields. In the Zip-Combined field, you can also use the Country or City in your search.

681 • 68101-Omaha-Douglas • 68101-Omaha-Sarpy • 68102-Omaha-Douglas • 68103-Omaha-Sarpy • 68103-Omaha-Douglas • 68104-Omaha-Douglas • 68103-Omaha-Douglas • 68104-Omaha-Douglas • 68104-Omaha-Douglas •	
68101-Omaha-Sarpy 68102-Omaha-Douglas 68102-Omaha-Sarpy 68103-Omaha-Douglas 0 68103-Omaha-Sarpy 68104-Omaha-Sarpy 68104-Omaha-Douglas	
68102-Omaha-Douglas 68102-Omaha-Sarpy 68103-Omaha-Douglas 68103-Omaha-Sarpy 68103-Omaha-Sarpy 68103-Omaha-Sarpy 68104-Omaha-Douglas V	
68102-Omaha-Sarpy 68103-Omaha-Douglas 68103-Omaha-Sarpy 68104-Omaha-Douglas	
68103-Omaha-Douglas 68103-Omaha-Sarpy 68104-Omaha-Douglas	
o 68103-Omaha-Sarpy 68104-Omaha-Douglas	
68104-Omaha-Douglas	
Country State ZIP - Combined	
United States Vebraska Kebraska Kebraska	•
County City, Town/Location Zip Code	
Douglas + Omaha + 68101	*

If city of Scottsbluff is used in the Zip-Combined field, all zip-county-city combinations for Scottsbluff will be displayed:

State			ZIP - Combined
Nebraska 🗸		,	scottsbluff
City, Town/Location			69361-Scottsbluff-Scotts Bluff 69361-Scottsbluff-Sioux 69363-Scottsbluff-Scotts Bluff 69363-Scottsbluff-Sioux

If you change the Country to another Country besides United States you will need to type in the remaining fields and choose Other-Not in list for the Zip Combined field. Then you will type in the County, City, town/Location and Zip Code, if they apply. See below:

Mother/Parent Residence	Address		
Street Name & Number		Apt. No.	Inside City Limits?
			•
Country		State	ZIP - Combined
Mexico	•	Jalisco	•
County		City, Town/Location	Zip Code
Anything	•		• •

If you put in a Zip Code in the Zip Combined field that is not in the list, select 'Other – Not in list'. This will put in asterisks and Other in any of the following fields: County, City, Town/Location and Zip Code. You will need to type in the County, City, Town/Location and Zip Code fields with the correct information.

Country	State	ZIP - Combined	
United States 🔹	· · · · · · · · · · · · · · · · · · ·	Other-Not in list	•
County	City, Town/Location	Zip Code	
Other 🗸	*	× v	

Street Name & Number – Enter the street name and number.

Apt. No. – Enter apartment number if there is one

Inside City limits? Select from dropdown list, Y/N/U

Country – Enter Country

State – Enter State

Zip – **Combined** – Type in Zip Code and it will display the city-county with it so you can select the correct zip code and city-county. If the Zip Combined is not available select 'Other - not in list' from the dropdown list. See below:

	ZIP - Combined	
Other-Not in list	Other-Not in list	

County – Enter the County name. If the County is not available in the dropdown list, verify the State entered.

Country		State		ZIP - Combined	
United States	•	Nebraska	•	Other-Not in list	•
County		City, Town/Location		Zip Code	
Nuckolls	•	Cadams		▼ 68978 ▼	

City, Town or Location – Enter the City, Town or Location by typing the name or selecting from dropdown list. If the City, Town or Location is not in the dropdown type it directly in the field and the field will turn orange, this is OK.

Zip Code – Enter zip code from dropdown list or type it in if it is not available and the field will turn orange. Example screenshot above:

Mother/Parent Mailing Address paragraph - You can enter P.O. Box addresses in this section.

Same as Residence? Select Y or N. If yes is selected, system will populate with the residence address. If no is selected, you will have to complete the State; City, Town or Location; Street Name and Number; Apt Number; Zip Code fields.

Mother/Parent Demographics paragraph

Date of Birth - month/day/year (System will calculate age).

Country of Birth - Select from drop down menu. If foreign country selected, system will skip the state and city and take you to the Education field. If Country is not in the drop down menu, contact the help desk.

If mother was born in a United States Territory, enter the Country as United States, pick the United States Territory as the State and then enter the city which may be found in the drop down menu. The United States Territories include: American Samoa; Guam; Northern Marianas; Puerto Rico; and Virgin Islands. If mother was born in a foreign country, only enter the country.

Birth State - Select from drop down menu.

Birth City - If not listed in the drop down menu, type in the city manually and the field will turn orange.

Education - Select from drop down menu.

Mother/Parent Origin paragraph

Spanish/Hispanic/Latina? Y or N.

If you select **Y** you will have to answer the following:

- Mexican? Y or N
- **Puerto Rican?** Y or N
- Cuban? Y or N
- Other Ethnicity? Y or N (if Y is selected, you will need to enter information for: Specify other field. Do not enter Hispanic, Spanish, Latina, Mexican, Cuban, Puerto Rican as these were already specified by the specific Y/N questions. The "Other" category is for selections that are not already listed. Examples include Guatemalan, Costa Rican, Salvadorian, etc.

Mother/Parent Race paragraph

Select all that applies. Select by clicking with mouse or by tabbing through the fields and using the space bar to check the box. You can navigate to the next paragraph by using CTRL + 0 or by using your mouse and clicking on the Next button.

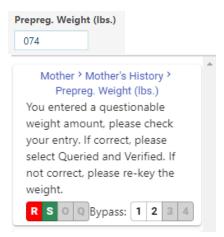
Mother's History paragraph

Receive WIC? Y or N

Height (feet)

Height (inches)

Pre-pregnancy Weight (lbs) If weight is under 75 pounds or over 300 pounds a message will display. Example screenshot below: Click on Rekey if you typed it in incorrectly. Click on Query and Verified 1 if you typed it in correctly and confirmed the information is correct. Add a comment in the 'Reason Edit was Overridden' in the Complete tab. Field will turn aqua blue.



Smoking – Average Number of Cigarettes Per Day paragraph

3 Mo. Before Pregnancy – Enter count First Trimester – Enter count Second Trimester – Enter Count Third Trimester – Enter Count Note: Enter the number of cigarettes smoked per day for each time period. If none, enter 00 in each box. Do not enter packs or partial packs. One pack equals 20 cigarettes. If mother smokes ½ a cigarette enter 1, not .5, round up and not down. DO NOT ENTER DECIMALS.

Marital – At Birth/Conception/Any Time Between paragraph

Mother/Paternal Married field – See Notes below

If Married = Y	'3 Way Paternity' = Y
Marital - At Birth/Conception/Any Time Between	System will move automatically to the
Mother/Parent Married 3 Way Paternity? Paternity Completed? Parent's Consent Given Y Y N N	Father's tab to complete the Father's information.
	Note : The 'Paternity Completed' and 'Parent's Consent Given' fields will be greyed out. * You will need to mail the completed 3 way paternity form to Vital Records.
Marital - At Birth/Conception/Any Time Between Mother/Parent Married 3 Way Paternity? Paternity Completed? Parent's Consent Given Y N N N	'3 Way Paternity' = N System will move automatically to the Father's tab to complete the Father's information.
	Note : The 'Paternity Completed' and 'Parent's Consent Given' fields will be greyed out.
If Married = N	'Paternity Completed' = Y
Marital - At Birth/Conception/Any Time Between	'Parent's Consent Given' = Y
Mother/Parent Married 3 Way Paternity? Paternity Completed? Parent's Consent Given N N Y Y	System will go to Father's tab. The Father's information needs to be completed.
Marital - At Birth/Conception/Any Time Between	'Paternity Completed' = Y
Mother/Parent Married 3 Way Paternity? Paternity Completed? Parent's Consent Given	'Parent's Consent Given' = N
N N Y N	System will go to Father's tab. The Father's information will be greyed out and the Father will not be on the record.
	Note : The '3 Way Paternity' field will be greyed out.
If Married = N	If 'Paternity Completed' = N
Marital - At Birth/Conception/Any Time Between Mother/Parent Married 3 Way Paternity? Paternity Completed? Parent's Consent Given	the 'Parent's Consent Given' field is greyed out and system will automatically go to Father's tab
N N N	Note : System goes to Father's tab. The Father's information will be greyed out.

Note: For further explanation refer to the Omission of Husband's Information on Birth Certificate page 53.

Father's Tab

th: 3497118		Image count: 0 Notes	count: 0 Alerts:	No alerts present.	Save
Child Mother Father Facility	Medical Newborn Flags	Complete			
Father/Parent Legal Name					
First	Middle	Last		Suffix	
Harold	Bob	Johnson		Jr 🔹	
Social Security Number					
546-54-5454					
Father/Parent Name at Birth					
First	Middle	Last		Suffix	
Harold	Bob	Johnson		Jr 💌	
Sex of Father/Parent					
M •					
Father/Parent Demographics					
Date of Birth Age	Country of Birth	Birth	State	Birth City	
06/15/1985	United States	 Nel 	braska 🔹	Omaha	•
Education					
HIGH SCHOOL GRADUATE OR GED	•				
Father/Parent Origin					
Spanish/Hispanic/Latino? Mexican?	Puerto Rican?	Cuban?	Other Ethnic	sity	
N •	N 🔻	N •	N 🔻		
If Other Specify					
Father/Parent Race					
Vhite					
Black/African American					
American Indian/Alaska Native	If Other Specify				
Asian Indian					

rth: Ne	W				S	tart New	Image count: 0	Notes count: 0	Alerts:	No alerts present.	*	Save
Child	Mother	Father	Facility	Medical	Newborn	Flags	Complete					
Asiar	n Indian											
Chine	ese											
🗆 Filipi	no											
🔲 Japa	nese											
Korea	an											
Vietn	amese											
Other	r Asian		If Other Spec	fy								
🗆 Nativ	re Hawaiian											
🗆 Guan	nanian or C	hamorro										
🗆 Samo	oan											
Other	r Pacific Isla	ander	If Other Spec	fy								
Other	r		If Other Spec	fy								
🗷 Unkn	iown											
SSN R	equest											
Reques	t SSN for C	hild? In	formant(s) R	elationship t	to Child							
	ant First Nar	no (Combo	A) I	nformant Mi			Informant I	.ast Name (Coml	2)	Informant Suffix Nar	20	
morma	Int First Mar	ne (Combo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		uure marrie			ast name (COM	10Z)		lic	

Father/Parent Legal Name paragraph

Social Security Number. If none, please enter 000-00-0000 and put a comment in the Note Utility. If he refuses, then enter 999-99-9999 and put a comment in the Note Utility. If he refuses, the record will not be filed until the number is provided.

First – Enter father's first name.

Middle – Enter father's middle name. If none leave blank and put a comment in the Note Utility. Do not enter initials, must be full name, unless only middle initial is on birth certificate.

Last – Enter father's last name. If more than one last name you can enter them in this box.

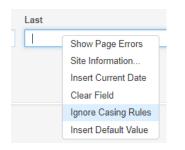
Suffix, if any – Select from dropdown list, Jr, I, II, III, IV, etc.

Note: In the Name fields of any paragraph the first letter of the first name, middle name and last name will automatically capitalize after tabbing off the field.

Father/Parent Legal Name		
First	Middle	Last
Joseph	Alan	van Buren

You can also 'Ignore the Casing' rules by deleting the name in it and right click in the field and choose Ignore Casing Rules. This allows you to capitalize whatever letters need to be capitalized, for example: van Buren. The casing rules are turned on for each field. If you need another name field to be capitalized differently you will need to turn off casing rules.

Note: You will need to turn off the casing rules for the last name in the *Father/Parent Name at Birth paragraph* before typing in the Legal Name so it will be copied correctly to the *Name at Birth paragraph*.



Father/Parent Name at Birth paragraph

Father's name at birth is what is to be used from their current birth certificate. If adopted do not include their name at birth before adoption.

First Name – Copies the First Name from the Father/Parent Legal Name paragraph.

Middle - Copies the First Name from the Father/Parent Legal Name paragraph.

Last - Copies the First Name from the Father/Parent Legal Name paragraph.

Suffix, if any – select from dropdown list Jr. I, II, III, IV, etc.

Father/Parent Demographics paragraph

Date of Birth - mm/dd/yyyy, age will be calculated by system.

Country of Birth – Enter father's country by selecting from drop down menu. If foreign country selected, system will skip the state and city and take you to the education field. If not on drop down menu, contact the help desk.

If father was born in a United States Territory, enter the Country as United States, pick the United States Territory as the State and then enter the city which may be found in the drop down menu. The United States Territories include: American Samoa; Guam; Northern Marianas; Puerto Rico; and Virgin Islands. If father was born in a foreign country, only enter the country.

Birth State - Select from drop down menu.

Birth City - If not listed in the drop down menu, type in the city manually. The field will turn orange.

Education - Select from drop down menu.

Father/Parent Origin paragraph

Spanish/Hispanic/Latino? Y or N

Note: If you select Y you will have to answer the following:

- Mexican? Y or N
- **Puerto Rican?** Y or N
- Cuban? Y or N;
- Other Spanish/Hispanic/Latino? Y or N, if Y is selected, you will need to enter information for: Specify other field. Do not enter Hispanic, Spanish, Latino, Mexican, Cuban or Puerto Rican as these were already specified by the specific Y/N questions. The "Other" category is for selections that are not already listed. Examples include Guatemalan, Costa Rican, Salvadorian, etc.

Father/Parent Race paragraph

Select all that applies (select by clicking with mouse or by tabbing through the fields and using the space bar). You can navigate to the next paragraph by using CTRL + 0 or by using your mouse and clicking on the next selection

SSN Request paragraph

Request SSN for Child? Y or N field with the parent's permission, if Y is selected, information from the birth record will be sent to Social Security for the purpose of creating the Child's Social Security number and card. The card will be sent to the mailing address listed on the record. If child is not named, a Social Security card will not be issued.

Informant(s) Relationship to Child – Select from dropdown



Informant Fields: After Relationship is selected the Informant fields will be populated and protected and you will be taken to the Facility tab. If you want to see the information populated before going to the next tab click anywhere on the current screen.

Informant First Name (Combo1)	Informant Middle Name	Informant Last Name (Combo2)	Informant Suffix Name
			•

Note: If a parent is not providing information such as an aunt, then type 'Aunt' in the Informant Relationship to Child dropdown list. Then type in the aunt's name in the Informant name fields.

SSN Request			
Request SSN for Child?	Informant(s) Relationship to Child		
Y 💌	Aunt		
Informant First Name (Combo1)	Informant Middle Name	Informant Last Name (Combo2)	Informant Suffix Name
Informant First Name (Combol)	Informant Middle Name	Informant Last Name (Comboz)	Informant Suttix Name
Jill	Elizabeth	Jackson	

Facility Tab

Note: All information for Facility, Medical and Newborn tabs can be found on the Facility Worksheet.

Birth: New				Start No	ew Image	count: 0 Note:	s count: 0	Alerts: 0		Save
Child Mot	ther Fathe	r Facility	Medical	Newborn	Flags	Complete				
Mother's Current Lega	al First Name			Middle				Last		
Suffix	¥	Medical Recor	d Number							
Facility Facility Nam						Facility Coun	-		Facility State	
Pawnee Co	ounty Memorial	Hospital			*	United State	s	•	Nebraska	•
County of Bi	irth		City, Town, o	r Location of B	irth		Zip Code		Type of Place of Birth	
Pawnee		•	Pawnee Cit	у		Υ.	68420	•	HOSPITAL	Ψ.
Mother's H Prenatal Car Previous Liv Living	e?	Prenatal Care Previous Live Deceased	Ē	Last Prenatal Month/Year of Birth 99/9999	Ē	Total Prenata Total Other P Outcomes		Last Menses 99/99/9999 Month/Year 99/9999		
 B. Diabete C. Hyperte D. Hyperte E. Hyperte F. Previou G. Previou H. Vaginal 	es: Prepregnan es: Gestational ension: Prepre ension: Gestati ension: Eclamp s Preterm Birtl us Poor Outcor bleeding	gnancy-Chroni ional-PIH; Pree osia hs	clampsia							

Birth: N	ew				s	tart New	Image count: 0	Notes count: 0	Alerts:	No alerts present.	Save
Child	Mother	Father	Facility	Medical	Newborn	Flags	Complete				
🗆 J: F	ertility-Enha	ncing Drugs	s, Artificial/II	ntrauterine In	semination						
🗆 K. A	ssisted Rep	roductive Te	echnology (I	VF/GIFT)							
🗆 L. P	revious Ces	arean									
M. Hov	w Many										
Non	e of The Abo	ove									
🗆 Unk	nown										
	tions prese	ent or treat	ed								
□ A. C											
C. H											
	hlamydia										
	epatitis B										
	epatitis C										
	• e of The Abo	ove									
🗆 Unk	nown										
	etric Proce	dures									
	erclage										
	ocolysis										
	ephalic - Su										
	ephalic - Fai										
	e of The Abo	ove									
🗆 Unk	nown										
										Ne	et .

Mother's paragraph - Information from this section is for informational purposes (helps you identify the record) and will populate automatically from other areas of the record.

Facility paragraph

Facility Name – This information will automatically populate and depends on what location your login is associated with.

If information is correct, tab once to Mother's History.

If this is a home birth, you will need to type in the address where birth occurred in the 'Facility Name' field and click on Override. The field will turn aqua blue. You will also need to select the country, state, city, zip code and the type of place of birth (such as home birth planned or home birth not planned) in the fields.

Facility				
Facility Name		Facility Country	Facility State	
1234 A STREET	•	United States	 Nebraska 	•
County of Birth	City, Town, or Location of Birth	Zip Code	Type of Place of Birth	
Lancaster	Lincoln	• 68508	HOMEBIRTH - PLANNED	*

If this birth did not occur in a hospital or freestanding birthing center, enter the street name and number of the place where the birth occurred in the 'Facility Name' field. If this birth occurred en route to a hospital or freestanding birthing center, that is, in a moving conveyance, enter the city, town, village, or location where the child was first removed from the conveyance. If the birth occurred in international waters or air space, enter "boat" or "plane."

Mother's History paragraph

General instructions for dates. If part of the date is known such as the month or day, use 99's for the part that is unknown. For example, if only the year of the date of last menses is known, enter 99's for the month and day such as 99/99/2019. If only the month and year is known, enter 99 in the day, example is 01/99/2019. If the complete date is unknown, then enter 99/99/9999 or you can type in 'U' and it will fill the date field with 99/99/9999.

Prenatal Care - Y or N. If N (no prenatal care), the prenatal care dates will automatically be filled in with 88/88/8888 (not applicable) and Prenatal Visits will be 00 on Save. If Y then enter in dates and number of visits.

Prenatal Care Began – Date field (mm/dd/yyyy)

Last Prenatal Care – Date field (mm/dd/yyyy)

Total Prenatal Visits – Enter #. If Prenatal Care is Y and if Total Prenatal Visits entered is 00 the following error message will display. Enter the number of visits or enter 99 if unknown. The Prenatal Care field should be N instead of Y if the number of Prenatal Visits are 00.

Mother's History			
Prenatal Care?	Prenatal Care Began	Last Prenatal Care	Total Prenatal Visits
Y	06/15/2018	09/18/2018	00
Facility > Mother's History > Total Prenatal Visits The field PRENATAL CARE? indicates mother did have some prenatal care. Please specify amount greater than zero. R S Bypass: 1 2			

Last Menses Date – Date field (mm/dd/yyyy)

Previous Live Births Living – Enter Number (00, 01, 02, 03, etc). If this birth was a multiple birth such as a twin and lived, the previous birth such as first born of a twin would be included in this number.

Previous Live Births Deceased – Enter Number (00, 01, 02, 03, etc). If this birth was a multiple birth such as a twin and died, the previous birth such as first born of a twin would be included in this number.

Month/Year of Last Live Birth –Enter mm/yyyy. If month is unknown enter 99. If year is also unknown enter 9999. If this was a multiple birth, such as a twin, the month and year of the first born would be entered.

Total Other Pregnancy Outcomes – Enter Number (00, 01, 02, 03, etc)

Month/Year of Last Other Outcome – Enter mm/yyyy. If month is unknown enter 99. If year is also unknown enter 9999.

If a number is entered other than 00, you will have to complete Month/Year.

Risk Factors paragraph

Select all that apply. To check the checkbox you can use the mouse or use the space bar and then hit tab to go to next risk factor in this paragraph.

Infections Present or Treated paragraph

Select all that apply. To check the checkbox you can use the mouse or use the space bar and then hit tab to go to next infection in this paragraph.

Obstetric Procedures paragraph

Select all that apply. To check the checkbox you can use the mouse or use the space bar and then hit tab to go to next obstetric procedure in this paragraph.

Note: If any selections conflict due to system edits, the system will prompt you to verify or correct selections. If you have unknown or none of the above checked with anything else, the system will display a message indicating that by clicking Unknown or None of the Above, all other checks will be cleared.

Medical Tab

Birth: New	Start New Image count: 0	Notes count: 0 Alerts: No alerts pres	sent. Save
Child Mother Father Facility Medical	Newborn Flags Complete		
Onset of Labor A. Premature ROM B. Precipitous Labor <3 hours C. Prolonged Labor >=20 hours None of The Above Unknown			
Delivery Date of Birth Time of Birth	Time Unit		
Attendant/Certifier Name of Attendant/Certifier	•	Title MD 🔻	
Mailing Address 2727 S. 144th St Suite 280	City Omaha	State Nebraska	Zip Code 68144
Payment / Medical Record Payment Source Child's Medic	al Record #		
Mother Mother Transferred?		City Transferred From	Weight at Delivery?
	۲		
Characteristics of Labor and Delivery A. Induction of Labor 			

Birth:	New				S	tart New	Image count: 0	Notes count: 0	Alerts:	No alerts present.	Save
Child	I Mother	Father	Facility	Medical	Newborn	Flags	Complete				
B	. Augmentatio	n of Labor									
C	. Non-vertex Pr	resentation									
D	. Steroids-Gluo	ocorticoids									
E E	. Antibiotics										
🗆 F.	Chorioamnior	itis									
G	. Meconium										
■ H	. Fetal Intolera	nce									
□ I.	Epidural/Anes	thesia									
N N	one of The Abo	ove									
🗆 U	nknown										
	thod of Deliv										
	mpted Forceps		Von Sunne	ooful	Attempted Va		essful ⊚ Yes Su	iccostul			
	I Presentation	accessiai) Tes Succe	ssiui	Birth Route	is Unsucc		liccession			
				•				•			
Mat	ternal Morbid	lity									
	. Transfusion										
	. Perineal Lace										
C	. Ruptured Ute	rus									
D	. Unplanned Hy	ysterectomy									
E E	. Admission to	ICU									
□ F.	Unplanned OF	R Procedure									
□ N	one of The Abo	ove									
🗆 Un	known										
										Ne	xt

Onset of Labor paragraph

Select all that applies

Delivery paragraph

Date of Birth – Date field, enter mm/dd/yyyy

Time of Birth – Enter Hour/Minute (00/00)

Time Unit: AM/PM/Noon/Midnight. Select from drop down menu) If Hour/Minute is answered 12:00, a selection of Noon or Midnight is required.

Attendant/Certifier paragraph

Name of Attendant/Certifier – Start typing the name of the attendant in the dropdown list and select the name. In order to see the whole list in the dropdown, delete the current name in the field and the dropdown list will display all names in list. If the attendant is not on the list and you want to add the attendant before continuing, do a Save Without Edits to save current record. To add the Birth Attendant, see page 49.

Note: If the Attendant Name is not in the list select 'Other-Not in List'. This will allow the Attendant Name, NPI, Title, Mailing Address, City, State and Zip Code to open up so you can type in all the information. If the Attendant Name is only being used once or twice you do not need to add it to the Attendant list. However, if the Attendant is going to be used often, then see page 49 in regards on how to add an Attendant.

When adding a Home Birth the following fields will open up so you can type in the Attendant name, NPI, title, mailing address, city, state and zip code.

Attendant/Certifier			
Attendant Name and Address			
		*	
Attendant Name (Last Suffix, First M	ddle)	NPI	Title
Mailing Address	City	State	Zip Code

If you are entering a record for another facility and the attendant name is not in the dropdown, choose Other-Not in List and manually enter the information.

Title; Mailing Address; City; State; and Zip Code will normally populate from the table. If the name is manually entered, these fields will all need to be manually entered.

Payment/Medical Record paragraph

Principal Source of Payment - Select from dropdown list. If not in the dropdown list, type in the source of payment manually and the field will turn orange. You should seldom need to manually enter this information in this field.

Child's Medical Record # - Optional

Mother paragraph

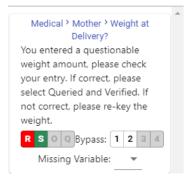
Mother Transferred? - Y or N

If **Yes**, you need to select from the dropdown list **Facility Mother Transferred from.** If name not in dropdown list type in the name manually and tab to next field, the field will turn orange.

If No, it will remain blank and the fields will be protected.

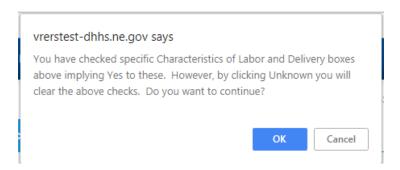
Mother's Weight at Delivery – Enter number in pounds. Note: If weight is less than 75 lbs or greater than 350 lbs an error message will display. Also if there is a weight loss of 50 lbs or more or weight gain of more than 150 lbs. Example below:





Characteristics of Labor and Delivery paragraph

Select all that apply – If nothing is selected the system will prompt you to complete the missing area. If you select any of the Characteristics of Labor and Delivery along with 'Unknown' or 'None of the Above' a message box will display indicating that you have checked specific Characteristics of Labor and 'Unknown' or 'None of the Above'. However, clicking on Unknown or None of the Above you will clear the above checks. Snapshot of message below.



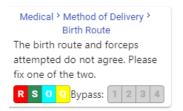
Method of Delivery paragraph

If you choose Yes Successful for Attempted Forceps, it will automatically fill in the Birth Route with Forceps. Similar with Attempted Vacuum. **Note:** You will need to use your mouse to leave the radio buttons in Attempted Forceps and Attempted Vacuum.

Method of Delivery				
Attempted Forceps	Attempted Vacuum			
○ No ○ Yes Unsuccessful ● Yes Successful	● No ○ Yes Unsuccessful ○ Yes Successful			
Fetal Presentation	Birth Route			
· · · · · · · · · · · · · · · · · · ·	FORCEPS	•		

If you select a different Birth Route the system will display an error message indicating that the birth route and forceps attempted do not agree. Rekey with the correct birth route.

Method of Delivery			
Attempted Forceps	Attempted Vacuum		
○ No ○ Yes Unsuccessful Yes Successful	No O Yes Unsuccessful O Yes Successful		
Fetal Presentation	Birth Route		
· · · · · · · · · · · · · · · · · · ·	SPONTANEOUS 🗸		



Maternal Morbidity paragraph

Select all that applies – If nothing is selected the system will prompt you to complete the missing area. If you select any of the Maternal Morbidity along with 'Unknown' or 'None of the Above' a message box will display indicating that you have checked Maternal Morbidity and 'Unknown' or 'None of the Above'. However, clicking on Unknown or None of the Above you will clear the above checks. Snapshot of message below.

vrerstest-dhhs.ne.gov says						
You have checked specific Maternal Morbidity boxes above implying Yes to these. However, by clicking None you will clear the above checks. Do you want to continue? If yes then click Okay, if no then click Cancel.						
	ОК	Cancel				



Newborn Tab

th: New				Image count: 0 Note	s count: 0 Alerts: No aler	ts present. 🔻
Child Mother Fath	er Facility	Medical Newb	om Flags	Complete		
Newborn Information						
Weight Units	Grams	Pounds		Ounces		
¥						
Estimate of Gestation	Sex	Apgar 5		Apgar 10	Plurality	Birth Order
	•		•	•		
Abnormal Conditions						
A. Ventilation - Followi	ng Delivery					
B. Ventilation - > 6 hou	rs					
C. NICU admission						
D. Surfactant						
E. Antibiotics - Epsis						
F. Seizure						
G. Birth Injury						
None of The Above						
Unknown						
Congenital Anomalies						
A. Anencephaly						
B. Spina Bifida						
C. Cyanotic (Heart Dise	ease)					
D. Congential Hernia						
E. Omphalocele						

irth: New				S	tart New	Image count: 0	Notes count: 0	Alerts:	No alerts present.	•	Save
Child Mothe	Father	Facility	Medical	Newborn	Flags	Complete					
F. Gastroschi	sis										
🔲 G. Limb Redu	ction										
🔲 H. Cleft Lip											
🔲 I. Cleft Palate											
🗆 J. Downs											
K. Downs Ka	yotype Confi	med									
🗆 L. Downs Kar	yotype Pendi	ng									
M. Chromoso	mal Disorder										
🗆 N. Congen. K	aryotype Con	firmed									
🗆 O. Congen. K	aryotype Pen	ding									
🗆 P. Hypospadi	35										
None of The	Above										
🗆 Unknown											
Other											
Infant transferre	ed? Fa	cility Infant	Transferred	То			•	City Trans	ferred To		
Infant Living?	ls	Infant being	breast fed a	t discharge?		Adopted?		Paternity (Completed Date		
•		•				•					
										Nex	t

Newborn Information paragraph

Weight Units – Select one from the dropdown P = Pounds; G = Grams; U= Unknown

Enter the birth weight of the child in pounds and ounces if **P** was selected or in grams if **G** was selected. **Grams, Pounds and Ounces**

If you get the following edit error please double check your entries for date of birth, menses date, birth weight and gestational age. If all entries are correct then you will need to select Queried and verified (Bypass 1).

Newborn Information	1				
Weight Units	Grams	Pounds	Ounces		
G 🔻	1400	3	01		
Estimate of Gestation	Sex	Apgar 5	Apgar 10	Plurality	Birth Order
37	M 💌	06 💌	88 💌	01	88
Validat	ion Errors				
Newborn > Newb	oorn Information				
According to the					
weeks or month					
(birth date-men	ses date), this is				
either a question					
weight or a que					
of last menses. F					
Birth Weight, Da					
Menses Date fie	lds are correct.				
R S O Q Byp	ass: 1 2 3 4				

Estimate of Gestation - # of weeks

Sex – Select F, M, N from dropdown. N can be used if the gender cannot be determined.

Apgar 5 – Select number from dropdown list. If the 'Apgar 5' score is 6 or higher, the Apgar 10 score will not be needed and an 88 (not applicable) will be defaulted in the 'Apgar 10' minute score. If this score is unknown, then 99 should be entered.

Apgar 10 – Select number from dropdown list. Only required when the 'Apgar 5' score is 5 or less. If the 'Apgar 10' score is 00, then a question will ask you if the baby died. If this score is unknown, then 99 should be entered.

Plurality - If 1 is entered the Birth Order field will be disabled and by default an 88 will display. If 2 or more are entered in the Plurality field you will have to complete Birth Order field. Plurality is twins, triplets, etc.

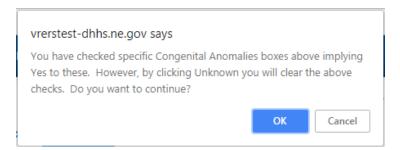
Abnormal Conditions paragraph

Select all that applies – If nothing is selected the system will prompt you to complete the missing area. If you select any of the Abnormal Conditions along with 'Unknown' or 'None of the Above' a message box will display indicating that you have checked Abnormal Conditions and 'Unknown' or 'None of the Above'. However, clicking on Unknown or None of the Above you will clear the above checks. Snapshot of message below.

vrerstest-dhhs.ne.gov says	
You have checked specific Abnormal Cond Yes to these. However, by clicking Unknow checks. Do you want to continue?	17.5
	OK Cancel

Congenital Anomalies paragraph

Select all that applies – If nothing is selected the system will prompt you to complete the missing area. If you select any of the Congenital Anomalies along with 'Unknown' or 'None of the Above' a message box will display indicating that you have checked Congenital Anomalies and 'Unknown' or 'None of the Above'. However, clicking on Unknown or None of the Above you will clear the above checks. Snapshot of message below.



Other paragraph

Infant Transferred? – Select Y or N. If Yes, then you will need to select **Facility Infant Transferred To** from drop down list. If name is not in the dropdown list type it in manually and field will turn orange. Type in the city in the **City Transferred To** field. If No, Facility Infant Transferred to and City Transferred To will be disabled and protected.

City Transferred to: Will populate once you select Facility from the dropdown list.

Infant Living – Select Y or N. Is infant alive when record was completed? Refer to the Guide for Birthing Hospitals for more information.

Is Infant being breast fed at discharge? – Select Y or N

Adopted? – Select Y or N. If unknown select N.

Paternity Completed Date - Hospital must complete if paternity was completed (mm/dd/yyyy). Paternity Completed date cannot be before the date of birth.

th: New				St	art New	Image count: 0	Notes count: 0	Alerts:	No alerts present.	Save
Child Mother	Father	Facility	Medical	Newborn	Flags	Complete				
Flags										
The Event Year	HINF	O record?		Alert Count		Birth State NE	I			
Print										
Ok to Print										
Reason You Cannot	Print									
Print Number										
Flags Ready & D	ates Sent									
SSA Ready?	Date	Sent to SS	A	NCHS Ready	?	Sent to NCF	HS			
Sent to Immunizatio	on Sent	to Immuniz	ation							
									Ν	ext

Flags Tab (For Vital Records Use Only)

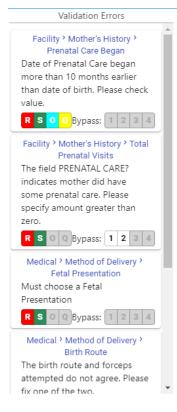
Complete Tab

Complete			
Hospital Completed	Hospital Completed Dat	te	Email Address
Ν		*	
Show Notes			
Show Notes			
Reason Edit was Overridden			
Douglas County			
Douglas County Complete	Completed Date		Reject Queue
Ν			
Registrar			
Registrar Signed			
Fosler, R. L.	.		_
			B

Once you get to this point you are ready to Save the record. Click on the Save button in the upper right, If there are errors you can also look at the Errors icon on the Toolbar. These errors must be resolved by completing or skipping the field(s) before you can Save the record.



Or you can go to the Errors Validation list on the right side of the screen to resolve all errors. After the record is Saved, please verify that all information is correct including names are spelled correctly. Please see Informant Verification form on page 55. If Acknowledgement of Paternity, see page 61.



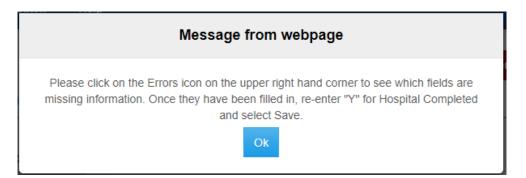
Complete paragraph

Hospital Completed - Select **Y** in Hospital Completed field when you are finished with the record. If any field(s) was overridden and/or query and verified you must put reason(s) in the 'Reason Edit was Overridden' field. If there aren't any fields that were Overridden and/or Queried, you can Complete and Save the record. Click on the Save button in the upper right.

Once \mathbf{Y} is selected and the record is saved successfully without any edit errors, the record will be placed in the Vital Records Work Queue (either State or Douglas County). The record will no longer be able to be changed by the hospital. If this field has an \mathbf{N} and the record is saved, the hospital can continue to make changes to the record.

Be sure to put all other comments in the Notes Utility. Other comments, would be for example, you verified spelling of the first name or last name or if there was only a middle initial and not a full middle name. If you want to quickly display all the notes associated with the record click on Show Notes button in the Complete paragraph.

There are additional edits on the Hospital Completed field. If there are any additional edit errors you can also look at the Errors icon on the Toolbar. These errors must be resolved before the record can be completed. If you select a \mathbf{Y} and Save and have errors, the Y will change to an N and the following message will display:



NOTE: If saving a record after you have already completed the record (hospital complete = Y), you will get the following save error. You cannot Save the record after Completing the record. Please contact Birth Registration Clerk or Help Desk for further assistance if the record needs updated or corrected. See Contacts, Help Desk, and Birth Desk on page 78.

Save Error × Error(s) occured during save. Sorry, you did not meet the update criteria for making changes on this record. You must meet the save criteria for B2_HOSP_IS_COMPLETE before you can update the record.

Hospital Complete Date - will be automatically populated with the current date

Hospital Reject(s)

If certificate information is rejected by the State or Douglas County, the person completing the record will receive an email. The record will be in your **Reject Queue** for you to correct or verify. Vital Records will enter the reason(s) the record was rejected in the Notes Utility.

Make the corrections, put a Y back in the Hospital Completed box and save the record. Create a new comment in the Notes Utility with an explanation and save. It will go out of your work queue and back into the Vital Records Work Queue to process.

Douglas County paragraph

Douglas County Complete; Completed Date

These fields are for Douglas County Vital Records and not for hospital use.

Registrar paragraph

Registrar Signed - System will populate based on the county of birth.

HOW TO CLOSE OUT OF NX SYSTEM (VRS)

When you are done working in NX VRS and you are ready to close the application, follow the instructions listed below.

If you have multiple tabs open be sure to close all the tabs except one. Close the tabs starting on the right side until one tab is left open.

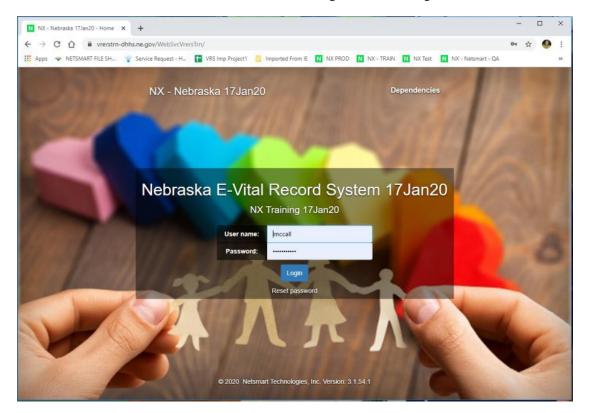
Close here and here.



When you come to the first tab click on File >Log Out. This will log you completely out of the NX system and take you to the login screen.

Home	File -	Search -	Tools -	Batch -	Help -
	New		+		
	Relogir	ı			
	Log Ou	ıt			

Then click on the 'X' on the web browser located on the right to close the login window.



INSTRUCTIONS FOR MULTIPLE BIRTHS

If you have a multiple birth such as a twin, complete the entry of the first twin and save the record. Correct any errors and save again. Once the first record is correct, then make changes such as the child's name, gender, time of birth, birth order, etc... and Save as Twin (File—>Save as Twin).



This will keep the first record and insert another record without the need to enter every field again. Repeat for triplets, etc. Once all records are completed and accurate, then submit to the state by putting in a Y for hospital complete and save (see above).

To enter the twin or multiple births click on the Child tab and go to the Child paragraph. Type over the First Name and Middle Name. A few fields are listed as examples of fields that potentially are different. See Facility Worksheet for multiple births.

- Previous Live Births-Living
- **Previous Live Births-Deceased** (if applicable)
- Month/Year of Last Live Birth
- Total Other Preg Outcomes
- Month Year of Last Other Outcome
- Attempted Forceps
- Attempted Vacuum
- Apgar Scores
- Abnormal Conditions of the Newborn

Complete tab

Hospital Completed – Select **Y** in Hospital Completed field when you are finished with the record. If any field(s) was overridden and/or query and verified you must put reason(s) in the 'Reason Edit was Overridden' field. If there aren't any fields that were overridden, you can Complete and Save the record. Click on the Save button in the upper right.

INSTRUCTIONS FOR ACKNOWLEDGMENT OF MATERNITY

The Acknowledgement of Maternity went into effect 11-14-2020. Nebraska law allows the name of the biological mother to be listed on the birth record of a child instead of the birth mother. The person giving birth is the information that will need to be on the mother's worksheet. If the biological mother is married her husband's information will be listed as the father on the birth record. If the biological mother is not married then Acknowledgment of Paternity will need to be completed to add the biological father to the birth record.

Note: If the person giving birth is married her husband's information should not be collect as his name will not be put on the birth record.

When you receive and Acknowledgment of Maternity form you will enter the birth record into NX as you normally do. The only difference is you will be adding a note indicating that there is an Acknowledgment of Maternity so the State Birth Clerk will know we are waiting for the Acknowledgment of Maternity form before completing the record.

After entering in the birth record and saving the record click on Actions >Show Notes.

Action -	Linking +	Tools -
Review Err	ors/Queries	
Show Note	es	

Click on New botton

Notes Id Field Name Note Create Date Modify User Id Modify User Modify Date Is Active Application Function
Hotes in the and the create back mouny oser in mouny back is Active Application runchon

Enter the following in the body of the Notes section. 'Ackowlegment of Maternity'

B	urity I	Fun U	etion	1:			 •	 ✓ ✓ 	Is Active			
	mat	-	•	0		rited fo		•	(inherite		•	
	•	Ŕ	ה נ	3								
• .ckr	owle				ernity.							

Once you have clicked on the Save button it will close automatically and will display the following.

		Notes											
Notes Id	Field Name	Note	Create Date	Modify User Id	Modify User	Modify Date	ls Active	Application Function					
218533	 Record	Acknowledgment of Maternity	2020-12- 11T14:54:08.973	28919	Laurie McCall	2020-12- 11T14:54:08.973	true		View				

Send the Acknowledgment of Maternity form(s) to State Vital Records, PO Box 95065, Lincoln, NE 68508.

WORK QUEUES

On the home page the Work Queues are located in the upper right corner of the page. Records rejected will be in the Hospital Rejects queue. Hospital records that are not completed are located in the Hospital H queue. The Number in the blue circle indicates how many records need to be completed.



ATTENTION ALL USERS!

Using someone else's user name to log-in is a violation of security provisions for electronic filing. You MUST use your own user name to log-in. Email DHHS.VRRS@nebraska.gov to request additional user names.

Messages

From	Subject	Message	Received	Event	Local File Number	
Laurie Mccall	Smith's record	Please keep a look out for Joe Smith's records. This record will need	12/17/2018 12:00:00 AM			View

When clicking on the Hospital Rejects queue or Hospital H queue it will take you to the Search screen with the number of records in the queue that you selected. Be sure to scroll to the right with the scroll bar at the bottom so you can see additional fields.

Work Queue: Hospital H

Flat View						Ir	nages: 0 Notes: 0	Displa
Froup By:								
State File Number 🛛 🗸	Year ~	NE State File # ~	Date of Birth ~	Active? ~	Record Status ~	Child's First Name 🛛 🗸	Child's Middle Name 🗸 🗸	Chil
	2018		10/26/2018	т	NORMAL	Johnny	Damion	Jone
	2018		10/26/2018	т	NORMAL	Robert	Drew	And
	2018		11/02/2018	т	NORMAL	Tabby	Adoptfieldtest	Jone
	2018		06/11/2018	т	NORMAL	David	Joe	And
	2018		11/01/2018	т	NORMAL	Child	Pup	Wol
	2018		11/05/2018	т	NORMAL	Allan	Bobó	Snic
	2018		11/29/2018	т	NORMAL	Robert	Andrew	Allei
	2018		11/30/2018	т	NORMAL	Pj		Pau
	2018		12/06/2018	т	NORMAL	Robert		Goñ
	2018		12/06/2018	т	NORMAL	James	Robert	Edw
	2018		12/14/2018	т	NORMAL	Robert	Bob	Johr
	2018		03/08/2018	т	NORMAL	Alyssa	Ann	Mcc
	2018		01/15/2018	т	NORMAL	Alan	Robert	Mcc

If you are anywhere else in the application you can click on the Work Queues icon in the Toolbar on any page and the work queue will display. If you click on the Work Queues icon again then the work queues disappear. Screen shot below:

ne File - Search - Documents/Faxes - Action - Linking -	Tools+ Batch+ Help+					A 0 😐)
Birth: New		Start New Image count: 0	Notes count: 0 Alert	ts: No alerts present.	* Save	Work Queues Hearing-HINFO	4
Child Mother Fa	ther Facility Medical New	wborn Flags Complete					
Mother's						Hearing-NICU	0
Current Legal First Nan	e Middle	le	Last			Hearing-OP-Not-Final	0
Maria			Stear	ims		Hearing-OP-Planned	•
Suffix	Medical Record Number	_				Hospital H	•
		-				Hospital Rejects	6
Facility							
Facility Name		Facility Co United Sta		Facility State Nebraska			
Laurie Hospital					•		
County of Birth	City, Town, or Locati		Zip Code	Type of Place of Birth			
Lancaster	• Lincoln	•	68510	HOSPITAL	•		
Mother's History							
Prenatal Care?	Prenatal Care Began Last P	Prenatal Care Total Prena	tal Visits Last M	fenses Date			
N *		(99/99	9/9999 💼			
Previous Live Births-		h/Year of Last Live Total Other	Preg Month	/Year of Last Other Outcome			
Living 01	Deceased Birth 00 02/20		99/99	999			
Risk Factors							
A. Diabetes: Prepreg	lancy						
📄 B. Diabetes: Gestatio	nal						
C. Hypertension: Pre	regnancy-Chronic						
D. Hypertension: Get	tational-PIH; Preeclampsia						
E. Hypertension: Ecl	mpsia						
F. Previous Preterm I	lirths						
G. Previous Poor Ou	come						

MESSAGES ICON

On the Toolbar there is an icon for messages so you can view your messages from here as well as on the Home page.



Once you click on the messages icon a dropdown displays the link to view your messages.



Click on the link and it will take you to your messages for you to view.

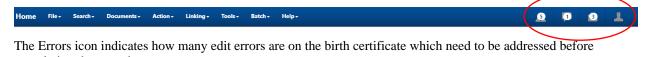
	Messages								
From	Subject	Message	Received	Event	Local File Number				
	-				Local The Number				
Laurie Mccall	Smith's record	Please keep a look out for Joe Smith's records. This record will need	12/17/2018 12:00:00 AM			View			

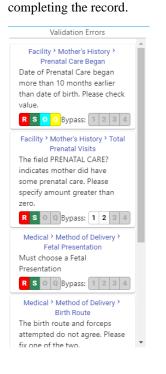
Click on the view button in order to view your message.

	View Message	
From	Laurie Mccall	
Subject	Smith's record	
Received	12/17/2018 12:00:00 AM	
Event		
Local File Number		
Message	Please keep a look out for Joe Smith's records. This record will need processed quickly as the parents are leaving the country and will want the ssn.	
	Mark as read OK Cancel	

ERRORS ICON

The Errors icon is located on the Toolbar to the far right along with messages, work queues and profile.





HOSPITAL REJECTS WORK QUEUE

To go to Rejects go to Home page and select Hospital Rejects in the Work Queues.



Work Queues	
Hearing-HINFO	4
Hearing-NICU	0
Hearing-OP-Not-Final	0
Hearing-OP-Planned	0
Hospital H	0
Hospital Rejects	2

ATTENTION ALL USERS!

Using someone else's user name to log-in is a violation of security provisions for electronic filing. You MUST use your own user name to log-in. Email DHHS.VRRS@nebraska.gov to request additional user names.

Messages

From	Subject	Message	Received	Event	Local File Number	
Laurie Mccall	Smith's record	Please keep a look out for Joe Smith's records. This record will need	12/17/2018 12:00:00 AM			View

Click on Hospital Rejects in the Work Queue on the Home page

Work Queue: Hospital Rejects

						C	mages: 0 Notes: 0	Displa
roup By: State File Number V.	′ ×	NE State File # ~	Date of Bi	Activ ~	Record Stat ~	Child's First Name 🗸 🗸	Child's Middle Na ~	Child
20	018		01/05/2018	т	NORMAL	Bob		Smit
20	018		10/18/2018	т	NORMAL	Bambam	Andrew	Flints

Select the row you need to make corrections by highlighting and selecting Display or double clicking on the row. The reason why the record is rejected will be in the Notes Utility.

BIRTH ATTENDANT

To Add Birth Attendant(s) go to Tools>New>Birth Attend



ATTENTION ALL USERS!

Using someone else's user name to log-in is a violation of security provisions for electronic filing. You MUST use your own user name to log-in. Email DHHS.VRRS@nebraska.gov to request additional user names.

Messages

From	Subject	Message	Received	Event	Local File Number	
Laurie Mccall	Smith's record	Please keep a look out for Joe Smith's records. This record will need	12/17/2018 12:00:00 AM			View

Birth Attendant page will display:

h Attendant: Ne	w	Start New	Image count: 0 Notes count: 0	Alerts: 0		
	Birth Attendant					
Birth Attendant						
First Name	Middle Name	Last Name	Name Suffix	Title	NPI	
			•		•	
 Required. 	LSFM Name		User Location	F	-314 - 0 - 4 -	
	LSFM Name				cility Code	
			0176	• ()176 •	
State	City	ZIP C	ode Address	1		
Nebraska 🔹		*	*			
Attendant Name and Ad	ldress					
Birth Attendant ID						
Begin Date Voided	End Date Voided	Modified Date	Modified UserID			
Ē	Ē		Ē			

Complete the following fields:

First Name - Enter the First Name

Middle Name – Enter the Middle Name (Optional)

Last Name – Enter Last Name

Name Suffix - If Any

Title – Choose from the dropdown list

NPI – Enter 10 digit NPI number

LSFM – Will be auto populated after the attendant fields have been entered

User Location - Prepopulated

Facility Code - Prepopulated
State – Enter State
City – Enter City
Zip Code – Enter Zip Code
Address 1 – Enter the address of the Birth Attendant
Birth Attendant ID – This will get created on save
Begin Date Voided – Leave blank when adding a Birth Attendant
End Date Voided – Leave blank when adding a Birth Attendant

Modified Date – Auto populated with today's date

Modified UserID - Auto populated with UserID of who created record

Click the Save button in the upper right corner. A message will appear indicating the record was saved successfully. Click the OK button. Screen shot below:

Message from webpage
The record saved sucessfully.
Ok

Duplicate Attendants: If you are adding an Attendant that is already in the system you will get an error message indicating that there is a duplicate record. If you can't find the existing record when searching, contact Vital Records Help Desk with a snap shot of the error message:

irth Attendant: 409	4	Image	count: 0 Note:	s count: 0 A	lerts: 0			•	Save
Birth Attendant									
Birth Attendant First Name Erika	Middle Name	Last Name De Mont	Name Suffix		Title	T	NPI 5454545445		
LSFM Name De Mont,Erika		User Location 1014A	•	Facility Code 1014	•				
State Nebraska v	City Omaha	ZIP Code • 68122	Ŧ	Address 1 6829 North	72nd Street				
Attendant Name and Addr De Mont,Erika-6829 North		Save Error Error(s) occured durin	g save.	×					
Birth Attendant ID 4094 Begin Date Voided 01/01/2005	End Date Voided 06/30/2019	There are duplicate reco Field Values: NAME_FIRST = Erika NAME_LAST = De Mon USER_LOCATION_CO ADDRESS1 = 6829 Nor	t DE = 1014A	re not saved.					
					•			Next	

BIRTH ATTENDANT SEARCH

In order to Search for a Birth Attendant you will need to go to Tools>Search>Birth Attend. Then type in any of the fields you want to search on. In the example below we are searching for all records in the Last Name field using a % (wild card).

Note: For more information on how to Search refer to Search within ERS page 11.

Search (Birth Attendant)

Search Criteria	Search Result				
First Name		Last Name		LSFM Name	Clear Search
		F%			
Title		Facility Code		User Location Code	9
	•		T		•
City		NPI			
	•	1			

Once you click on the Search button the Search Results grid will display all records associated with Last Name starting with F in this example. Choose which record you would like to modify. See How to Search for more information.

NOTE: Do not user Facility Code or User Location Code in your searches as the search results will only display attendants available at your facility.

earch Criteria	N Attendan									
Caren Onicha	Startin Kesuk									
Flat View								Images: 0	Notes: 0 Dis	pla
Group By:									_	
First Name 🗸 🗸	Last Name 🗸 🗸	LSFM Name 🗸 🗸	Title v	Facility Co v	User Location Code 🗸 🗸	City ~	NPI ~	ISACTIVE ~	# of Imag	~
Jerry	Fischer	Fischer, Jerry	MD	0176	0176	Omaha		т	0	
Jerry	Fischer	Fischer , Jerry	MD	0176	0176	Beatri		т	0	
Jerry	Fischer	Fischer, Jerry	MD	0176	0176	Lincoln		т	0	

BIRTH ATTENDANT MODIFICATION

To add NPI to an existing Birth Attendant use the Birth Attendant search to locate your birth attendants. Display the record and add the NPI number in the NPI field then click on Save.

Bir	th Attendant: 129	0		Image count: 0	Notes count: 0	Alerts: 0			۳	Save
		Birth Attendant								
	Birth Attendant									
	First Name	Middle Name	Last Name	Name	Suffix	Title		NPI		
	Jerry		Fischer		*	MD	· ·	1		
								 Required. 		

If a Birth Attendant information needs changed, such as an address change, you will need to void the current record (See Birth Attendant Void below) and create a new Birth Attendant record with the new information.

BIRTH ATTENDANT VOIDS

To void a Birth Attendant you will need to put a date in the Begin Date Voided field and the End Date Voided field to void a Birth Attendant. Click Save to save your record.

Begin Date Voided – Date field, this is when the birth attendant started working at the location. If the Begin Date Voided is not known, use 01/01/2005.

End Date Voided – Date field, this is the date the birth attendant left the location. Example below:

Birth Attendant								
Birth Attendant								
First Name	Middle Name	Last Name		Name Suffix		Title		NPI
Jerry		Fischer		· ·		MD	•	1234567890
LSFM Name Fischer, Jerry		User Location 0176	×		Facility Code	×		
i iseret, serry		0170	•		0170	•		
State	City		ZIP Code		Address 1			
Nebraska 👻	Lincoln 👻		68510	•	301 South 70th St.	, Suite 200		
Attendant Name and Address								
Fischer, Jerry-301 South 70th St., Suite 200								
Birth Attendant ID 1290								
Begin Date Voided	End Date Voided	Modified Date		Modified UserID				
01/01/2005	10/04/2019	07/11/2019		11220				

After you click on the Save button a Confirm message box will display indicating the record was saved successfully and do you want to close the current window. Screen shot below.



OMISSION OF HUSBAND'S INFORMATION ON BIRTH CERTIFICATE

Effective April 21, 2017 for any birth record which can't be registered due to noncompliance with NRS 71-640.01 (1) If the mother was married at the time of either conception or birth or at any time between conception and birth, the name of the husband shall be entered on the certificate as the father of the child unless (b) the mother and the mother's husband execute affidavits attesting that the husband is not the father of the child, in which case information about the father shall be omitted from the certificate, or (c) the mother executes an affidavit attesting that the husband is not the father and that the putative father is the father, the putative father executes an affidavit attesting that he is the father, and the husband executes an affidavit attesting that he is not the father. In such event, the putative father shall be shown as the father on the certificate. For affidavits executed under subdivision (b) or (c) of this subdivision, each signature shall be individually notarized.

The parent shall be notified in writing of the fact that their birth certificate will not be registered without the husbands information and that they can request a hearing with DHHS regarding the registration of the birth record. A copy of the notification will be sent to the birthing hospital advising them of the parent options.

MOTHER AND FATHER "NAME AT BIRTH" DEFINED

In Completing the Certificate of Live Birth the Vital Records Office defines name at birth to mean the following: The Original name listed on their birth certificate unless:

• If an adoption took place then the **new adopted name**

OR

• If naturalized then the **new naturalized name**

OR

• If one had a court order legal change of name the new name should be listed

Not to be listed is a name which was changed as a result of marriage.

VITAL RECORDS NO LONGER ACCEPTS REFUSAL LETTERS

As of April 11, 2016 an electronic broadcast was sent advising birth clerks that mother's will no longer be permitted to sign a refusal letter when indicating that their husband is not the biological father of their child. We have been advised that in all cases where the child was conceived during the marriage, the husband will be required to be listed on the birth certificate in accordance with NRS 71-640.01 unless:

- 1. A two way or three way paternity is signed or
- 2. A court order of paternity has been established

NOTE: Vital Records Office will not be accepting refusal letters to complete birth registrations.

PRINTING FORMS/DOCUMENTS

You will need to go to the Help link to view and print blank forms such as worksheets. Click on Help on the toolbar and the list of blank forms will display.

Home File - Search - Documents - Action	n - Linking - Tools - Batch -	Help -		A	1	95	L.
Birth: 4330648		Quick Reference Guide	Image count: 0 Notes count: 0 Alerts: 0			*	Save
Child Mother Father Facility Medical	Newborn Flags Complete	Site Information					
Mother/Parent Current Legal Name		Show Page Errors					
Social Security Number First Name 545-64-5645 Jane		Birth Certificate Application	Last Johnson				
545-64-5645 Jane			Jonnson				
Suffix		Birth Facility Worksheet					
•		Birth Mother Worksheet					
		Birth Mother Worksheet Spanish					
Mother/Parent Name at Birth							
First Name	Middle	Birth Multiple Birth Worksheet	Suffix				
Jane	Ann	E-Learning for Birth Reporting					
		Guide for Birthing Hospitals					
Child		Password Station					
First	Middle	Password Station	Suffix				
Robert	Andrew	SSA Form 2853	on v				
		SSA Form 2853 Spanish					
Mother's Medical Number		Subscription Page					
ABC1234							
Date of Birth Time of Birt	h Time Unit	Vital Statistics Reports					
04/13/2010 🗰 04:50	AM	*					
Long Child's Name							
Robert Andrew Johnson							

Example of forms below.

For pregnancies resulting in the births of two or more live-born infants, infant in the delivery. For each subsequent live-born infant, complete th the pregnancy reportable under State reporting requirements, complete	e "Attachment for Multiple Births." For any fetal loss in
Mother's name:	
Mother's medical record #	
Facility name:	
County of birth:	
City, Town or Location of birth:	Zip Code:
Hospital Freestanding birthing center (Freestanding birthing center is	defined as one which has no direct physical
Freestanding birthing center (Freestanding birthing center is connection with an operative delivery center.) Home birth, Planned to deliver at home (Circle one) Y Clinic/Doctor's Office Other (specify, e.g., taxi cab, train, plane, etc.) Information for the following items should come from the mother's pren	es No
Freestanding birthing center (Freestanding birthing center is connection with an operative delivery center.) Home birth, Planned to deliver at home (Circle one) Y Clinic/Doctor's Office	es No
Freestanding birthing center (Freestanding birthing center is connection with an operative delivery center.) Home birth, Planned to deliver at home (Circle one) Y Clinic/Doctor's Office Other (specify, e.g., taxi cab, train, plane, etc.) Information for the following items should come from the mother's pren mother's chart, as well as the infant's medical record. If the mother's pren mother the prenatal care provider to obtain the record, or a copy of the	es No hatal care records and from other medical reports in the renatal care record is not in her hospital chart, please e prenatal care information. Preferred and acceptable in from sources other than those listed.
Freestanding birthing center (Freestanding birthing center is connection with an operative delivery center.) Home birth, Planned to deliver at home (Circle one) Y Clinic/Doctor's Office Other (specify, e.g., taxi cab, train, plane, etc.) Information for the following items should come from the mother's prem mother's chart, as well as the infant's medical record. If the mother's prevent contact her prenatal care provider to obtain the record, or a copy of the sources are given before each section. Please do not provide information Prenatal	res No hatal care records and from other medical reports in the renatal care record is not in her hospital chart, please prenatal care information. Preferred and acceptable in from sources other than those listed. I records, labor and delivery records) hysician or other health professional first examines

The form will display in separate window. Click on the Printer icon to print the form.

You can print documents when you have the birth record displayed or when a record is highlighted on the Search Results screen, including Work Queues. The documents available to print are located under Documents.

INFORMANT VERIFICATION

After data entry of the Birth record, a **Birth Informant Verification Form** is printed and reviewed by the Mother for accuracy. She can then either make corrections to the form for the hospital to update, or sign the form that the information is accurate. After corrections are made, another form can be printed for the mother to check and sign. The signed document should be kept by the hospital. This is not required to be done by the State but it is best practice. If an error is later found on a record this is proof mother verified information submitted was 'correct'. This may help in making mother pay for an amendment for error(s) later found.

Informant Birth Worksheet Verification Form will display in a separate window:

	Mother's Medical Re	cord Number (hospit	al use only)	39UED	
Please verify that the followin and print the correct informa		orrect. If it is not	correct, p	ease cross out the	e incorrect information
Child's Name/Information	Sex: Male	Date of Birth: 11/	8/2017	Time of Birth: (05:15AM
First: Robert Middle:					
Last: Smith					
Mother's Name at Birth First: Mary					
Middle: Susan					
Last: Smith					
Mother's Current Legal Nam	e/Information				
First: Mary					
Middle: Susan					
Last: Smith					
Date of Birth: 5/15/1984	Birth Place: La	Platte, Nebraska			
Mother's Residence State: Nebraska	County: Doug	100	City or	Town: Omaha	
Street and Number: 1234 Do		145	City of	Town. Onlana	
Zip Code: 68010	Inside City Lir	nits? Yes			
Mother's Mailing Address (if					
(same)		ioenee)			
Mother's Education: High S	chool Graduate or (GED			
Mother of Hispanic Origin?		GED			
Mother of Hispanic Origin? Mother's Race(s): White	No		_		
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for	No herself during thi		No	D	N. 1. 140 Y. L.
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Height: 5 Fee	No therself during thi t ⁸ Inches	s pregnancy?		s Pre-Pregnancy V	Weight: 140 Lbs
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Height: 5 Fee Mother's Cigarette Smoking	No r herself during thi t 8 Inches Before and During	s pregnancy?] 3 Pregnancy:	Mother's	0	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Height: 5 Fee Mother's Cigarette Smoking Three Months bef	No t herself during thi t 8 Inches Before and During ore Pregnancy:	s pregnancy? ; Pregnancy: 0 Second T	Mother's	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food fon Mother's Height: 5 Fee Mother's Cigarette Smoking Three Months bef First Three Month	No r herself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy:	s pregnancy? ; Pregnancy: 0 Second T	Mother's	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Height: 5 Fee Mother's Cigarette Smoking Three Months bef First Three Month Attendant/Certifier Name: 1	No therself during thi 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice	s pregnancy? g Pregnancy: 0 Second T 0 Third Trii	Mother's hree Monti mester of F	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Height: 5 Fee Mother's Cigarette Smoking Three Months bef First Three Month Attendant/Certifier Name: 2 Was Mother Married at Con	No t berself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice ception, Birth, or a	s pregnancy? g Pregnancy: 0 Second T 0 Third Trii my time in betwee	Mother's hree Monti mester of F	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Height: 5 Fee Mother's Cigarette Smoking First Three Months bef First Three Months Attendant/Certifier Name: 1 Was Mother Married at Com If No, was a paternity acknow	No therself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice ception, Birth, or a wledgement comple	s pregnancy? g Pregnancy: 0 Second T 0 Third Trii my time in betwee	Mother's hree Monti mester of F	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Cigarette Smoking Three Months bef First Three Month Attendant/Certifier Name: I Was Mother Married at Con If No, was a paternity acknow	No therself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice ception, Birth, or a wledgement comple	s pregnancy? g Pregnancy: 0 Second T 0 Third Trii my time in betwee	Mother's hree Monti mester of F	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Cigarette Smoking Three Months bef First Three Month Attendant/Certifier Name: 1 Was Mother Married at Con If No, was a paternity acknov Father/Parent Name at Birth First:	No therself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice ception, Birth, or a wledgement comple	s pregnancy? g Pregnancy: 0 Second T 0 Third Trii my time in betwee	Mother's hree Monti mester of F	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Height: 5 Fee Mother's Cigarette Smoking Three Months bef First Three Months Attendant/Certifier Name: 1 Was Mother Married at Com If No, was a paternity acknor Father/Parent Name at Birth First: Middle:	No therself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice ception, Birth, or a wledgement comple	s pregnancy? g Pregnancy: 0 Second T 0 Third Trii my time in betwee	Mother's hree Monti mester of F	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Cigarette Smoking Three Months bef First Three Month Attendant/Certifier Name: 1 Was Mother Married at Com If No, was a paternity ackno Father/Parent Name at Birth First: Middle: Last:	No therself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice ception, Birth, or a wledgement comple	s pregnancy? 3 Pregnancy: 0 Second T 0 Third Trii any time in betwee eted? No	Mother's hree Monti mester of F	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Height: 5 Fee Mother's Cigarette Smoking Three Months bef First Three Month Attendant/Certifier Name: 1 Was Mother Married at Con If No, was a paternity acknov Father/Parent Name at Birth First: Middle: Last: Father/Parent Current Legal	No therself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice ception, Birth, or a wledgement comple	s pregnancy? 3 Pregnancy: 0 Second T 0 Third Trii any time in betwee eted? No	Mother's hree Monti mester of F	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(s): White Did Mother get WIC food for Mother's Height: 5 Fee Mother's Cigarette Smoking Three Months bef First Three Months Attendant/Certifier Same: 1 Was Mother Married at Com If No, was a paternity acknor Father/Parent Name at Birth First: Middle: Last: Father/Parent Current Legal First:	No therself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice ception, Birth, or a wledgement comple	s pregnancy? 3 Pregnancy: 0 Second T 0 Third Trii any time in betwee eted? No	Mother's hree Monti mester of F	hs of Pregnancy:	0
Mother of Hispanic Origin? Mother's Race(5): White Did Mother get WIC food for Mother's Height: 5 Fee Mother's Cigarette Smoking Three Months bef First Three Month Attendant/Certifier Name: 1 Was Mother Married at Con If No, was a paternity acknov Father/Parent Name at Birth First: Middle: Last: Father/Parent Current Legal	No therself during thi t 8 Inches Before and During ore Pregnancy: s of Pregnancy: Martin, Latrice ception, Birth, or a wledgement comple	s pregnancy? 3 Pregnancy: 0 Second T 0 Third Trii any time in betwee eted? No	Mother's hree Monti mester of F	hs of Pregnancy:	0

To print the form, select the printer icon.

The following is an example of what the B Hospital Copy of Certificate would look like.

CHILD'S N. Lauren	AME (First, Middle, Last, Suffix) Elizabeth Johnson							
SEX Female	DATE OF BIRTH (Mo. Dav. Yr.) January 5, 2019	Т	IME OF BIRTH 05:00 PM	TH COUNTY OF E Lancaster				
	NAME (If not institution, give street & n e Birth Place	umber)	CITY, TOWN, O Lincoln	R LOCATIO	N OF BIRTH		ZIP CODE 68510	
NAME OF	ATTENDANT/CERTIFIER		20 C	NPI		TITLE	22.11	
Unknown	Unknown					Cnm		
Unknown	ADDRESS OF ATTENDANT/CERTIFIE , Unknown, Unknown, 99999 NAME AT BIRTH (First, Middle, La		UMBER, CITY, C	OR TOWN, S	TATE, ZIP)			
Laurie	Ann Mccall							
	CURRENT LEGAL NAME (First, Mi				T			
MOTHER'S April 15,	DATE OF BIRTH (Me. Dav. Yr.) 1986	MOTHER'S BIR Alliance, Ne	THPLACE (City & braska	k State, Terri	tory or Foreign (Country)		
RESIDENC Nebraska	E OF MOTHER-STATE	COUNTY Lancaster	CITY. TO Lincoln	WN, or LOC	ATION			
STREET AN 1800 Mai	ND NUMBER OF RESIDENCE n St		2	APT.NO.	ZIP CODE 68502		INSIDE CITY? YES	
	ARENT NAME AT BIRTH (First, Midd Charles Jones	dle, Last, Suffix)	10 ·					
	ARENT CURRENT LEGAL NAME (Fin Charles Jones	rst, Middle, Last,	Suffix)					
FATHER P.	ARENT DATE OF BIRTH 13, 1987	FATHER/PAREN Lincoln, Nel	NT BIRTHPLACE praska	(City & State	e, Territory or Fo	oreign Co	antry)	
					REI			

Nebraska Birth Record--Medical Copy This is NOT a Legal Record--for Hospital and Statistical Purposes only

If you would like to save the document instead of printing it, the instructions follow for various browsers:

To Save as a PDF in Chrome follow the instructions below:

Click on the Printer icon.



Click on the Save icon.

Print

Total: 2 pages

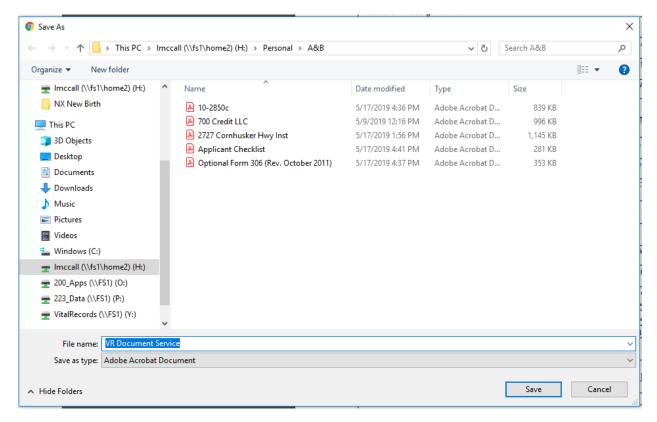
 Save
 Cancel

 Destination
 Save as PDF

 Pages
 All

 Pages per sheet
 1

Save As window displays. You can select your drive and directory you want your document saved to. In the File Name field you can name your document. The Save As Type field defaults to Adobe PDF Files. You will want to leave it as this file type.

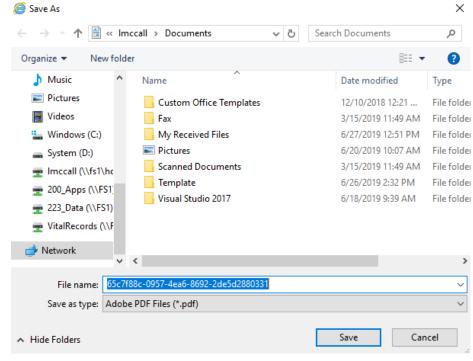


To Save as PDF in Internet Explorer follow the instructions below:

Click on the Save icon



Save As window displays. You can select your drive and directory you want your document saved to. In the File Name field you can name your document. The Save As Type field defaults to Adobe PDF Files. You will want to leave it as this file type.



To Save as PDF in Safari follow the instructions below:

Click on File>Print

File	Edit	View	Histo	ry	Bo
Nev	w Wind	wob		Ħ	N
Nev	v Priva	te Wind	low	合業	IN
Nev	w Tab			Ħ	T
Ope	en File			Ħ	30
Ope	en Loc	ation		Ħ	SL
Clo	se Wir	ndow		ሰዝ	w
Clo	se All	Window	s T	۵ %	W
Clo	se Tab)		Ħ	W
Sav	e As			ŵ #	S
Sha	ire				•
Exp	ort as	PDF			
Ope	en in D	ashboa	rd		
Imp	ort Bo	okmark	s		
Exp	ort Bo	okmark	s		
Prin	1t			Ħ	P

Select printer and then click on Print

Copies:	1 0
Pages:	All
	1 of 2 > >>

To Save as PDF in Firefox follow the instructions below:

Click on the Printer icon



The Print dialog box opens up. Select the printer and click on OK to print the document.

Note: Other documents can be saved the same as above depending on which browser you are using.

rint			
Printer			
Name:	BF223C01	~	Properties
Status:	Ready		
Type:	RICOH MP 5054 PCL 5e		
Where:	IP_10.35.115.173		
Comment:	Ricoh MP 5054 Copier #: 9048		Print to file
Print range		Copies	
All		Number of co	pies: 1 🚔
O Pages	from: 1 to: 1		
) Selecti		11 22	33 Collate
Jelecti	UTI		
		ОК	Cancel
		UK UK	Cancel

PRINTING BIRTH CLERK PATERNITY FORM

Birth clerks must print the Acknowledgement of Paternity form from the system. If the question "Paternity Completed" is answered Y and Parent Consent is Y, the B Paternity Form will appear under the Document/Documents menu after the record is saved.

The form will populate with information entered into the Electronic Birth Registration System, the Informant Verification Form should be approved for accuracy by the Informant (or/and with other quality checks the hospital has in place) before the Acknowledgement of Paternity Form is printed. To print the B Paternity Form, click on Documents> Documents> B Paternity Form.

Documents -	Action +	Lini	cing +	Tools +	Batch +	н
Documents		•	B Hos	pital Copy c	of Certificate	
			B Info	rmant Verifi	cation Form	
Facility M	ledical N	ewbc	B Info	rmant Verifi	cation Span	
	NE State File	Num	B Pate	ernity Form		

TROUBLESHOOTING STEPS FOR PRINTING

Step 1: Turn off Pop-up Blocker for Browser

Internet Explorer

- 1. Click **Tools** or the gear icon.
- 2. Click Internet options.
- 3. Click the **Privacy** tab.
- 4. Uncheck **Turn on Pop-up Blocker**.
- 5. Click OK.

Chrome

- Click the Chrome menu button.
 Note: The button is on the upper-right of the browser and is indicated by three dots.
- 2. Select Settings.
- At the bottom of the page, click Advanced.
 Note: If Advanced is already selected, additional options will be available below it.
- 4. Under Privacy and security, click Content settings.
- 5. Click Popups.
- 6. Click Blocked (recommended).

Note: After the popup blocker is disabled, the option will show as enabled and display Allowed.

Firefox

- 1. Click the **Open menu** button (three bars) in the upper-right corner.
- 2. Click **Options** or **Preferences**.
- 3. Select **Privacy & Security** on the left.
- 4. Uncheck **Block pop-up windows** to disable the pop-up blocker.
- 5. Close and relaunch Firefox.

Safari

- 1. Click the **Safari** menu.
- 2. Select **Preferences** from the drop-down menu.
- 3. Click on Security.
- 4. Uncheck Block pop-up windows

Step 2: Print document within Adobe Reader instead of Browser

All of the following steps will require that you have Adobe Reader installed. Please refer to your admin for more details or download the latest version <u>here.</u>

1. Once you have downloaded the latest version of Adobe, **Run** the file.

📕 Adobe Acro	bat Reader DC Installer	_		\times
٨	Adobe Acrobat Reader DC: Downloading	g	45%	

- 2. Once the installed has completed, click Finish. Adobe Reader will now launch.
- **3.** Try printing once again. If printing is still unsuccessful, continue to the next steps that are specific for your browser.

Firefox (Windows)

Applications

Choose how Firefox handles the files you download from the web or the applications you use while

prowsing.					
igsiring Search file types or applications					
Content Type	Action				
🔋 irc	📧 Always ask				
🔋 ircs	👎 Always ask				
mailto	Use Mail (default)				
Portable Document Format (PDF)	💾 Save File 🗸 🗸				
🔋 webcal	🕄 Always ask				

Google Chrome

- Go to the internet using your Chrome browser.
- Type <u>chrome://settings/content/pdfDocuments</u> in the browser address.
- Switch toggle to Download PDF files instead of automatically opening them in Chrome

\leftarrow	← → C 🏠 💿 Chrome chrome://settings/content/pdfDocuments						
Sett	ings	Q Search settings					
÷	People	← PDF documents					
Ê	Autofill						
۲	Appearance	Download PDF files instead of automatically opening them in Chrome					
Q	Search engine						
	Default browser						
Ċ	On startup						

Microsoft Internet Explorer

- Open Internet Explorer.
- At the top of the screen, choose Tools> Manage Add-ons.
- Under Add-on Types, select Toolbars and Extensions.
- In the Show menu on the left, select "All add-ons".

• In the list of add-ons, select Adobe PDF Reader (Note: If you do not see the Adobe PDF Reader add-on, try the other menu options. For example, on some systems, the add-on appears when you select "Run without Permission").

• Click "Disable" to allow the Adobe PDF Reader add-on to open PDFs in the browser.

Manage Add-ons							
View and manage your Internet Expl	orer add-ons						
Add-on Types	Name	Publisher	Status	Architecture	Load time	Navigation	
🚳 Toolbars and Extensions	Adobe Inc.						
Search Providers	Adobe PDF Reader	Adobe Inc.	Disabled	32-bit and			
Accelerators	Microsoft Corporation						
Tracking Protection	Tabular Data Control	Microsoft Corporation	Enabled	32-bit and			
Macking Protection	Microsoft Shell UI Helper	Microsoft Corporation	Enabled	32-bit and			
	Windows Media Player	Microsoft Corporation	Enabled	32-bit and			
	Microsoft Silverlight	Microsoft Corporation	Enabled	32-bit and			
	Scripting.Dictionary	Microsoft Corporation	Enabled	32-bit and			
	Skype for Business Browser Hel.		Disabled	32-bit and			
	Skype for Business Click to Call		Disabled	32-bit and			
	Microsoft Windows Third Party A						
Show:	Shockwave Flash Object	Microsoft Windows Thir	Enabled	32-bit and			
Currently loaded add-ons	Not Available						
Adobe PDF Reader Adobe Inc.							
ersion: 19.21.20047.354	104	Type:	ActiveX Co	ntrol			
	11, 2019, 4:05 PM	Search for this add	-on via defaul	t search provider			
More information							
							Enable
Find more toolbars and extensions							Close
Learn more about toolbars and exter	isions						Close

Safari/Firefox (Mac)

- In Finder, select a PDF, and choose File > Get Info.
- Click the arrow next to "Open With" to expose the product menu.
- Choose Save File for PDF Content Type

0	otions								×
			页			90		6	÷
	General	Tabs	Content	Applicatio	ons	Privacy	Security	Sync	Advanced
	Search Content Type Action							٩	
	🔁 Portable Document Format (PDF)				?	Preview in	Firefox		~ ^
	🙍 QuickTime Image				?	Preview in	Firefox		
	👰 QuickTime Movie			?	Always ask	:			
	Session Description Protocol (applicat			(applicat	1	Save File			

REPORTS/EXPORTS

Reports

Report Center - Click on Batch>Reports

Tools -	Batch -	Blank Forms -	Help -
	Reports		
	Exports		
			St
			my

Expand Birth to see what reports you can select from. You can also select reports under Hearing as well. This example we are selecting Birth Report for Hospitals.

Available Reports	Report Information
A 📻 Reports	Id: Birth Report for Hospitals
🔺 💼 BIRTH	Name: Birth Report for Hospitals
 Einth Info by Facility 	Description: This report provides a statistical summary for several fields such as birthweight, gestation, apgar scores, race, etc Type: ReportBuilder
Birth Report for Hospitals	Parameter Set:
Birthweights by Child	Parameters
Doctor by Method	Date of Birth:
Hospital Paternity miterative	Reporting Location: @USERLOCATION_DESC
Hearing Detail Report, Inpatient	A
> 📇 Hearing Detail Report, Outpatient	
Hearing Detail Report, Refers	Parameter Set
Hearing Detail Report Transfers	Clear
Export to a file File Format:	
Preview Exe	cute Schedule

Note: You can also export the report to different file formats listed in the File Format dropdown and putting a check in the checkbox next to Export to a file.

The report will open up in a separate window, example below.

HOSPITAL	SUMMARY	REPORT

Total Births= 9	Reporti	ng Location equa	Date of Birth between al Good Life Birth Place	Page 1	12/14/2018
By Mother's Age:			By Father's Age:		
	Number	% of Total		Number	% of Total
17 and under	0	0.0 %	17 and under	0	0.0 %
18-19	2	22.2 %	18-19	0	0.0 %
20-24	0	0.0 %	20-24	1	11.1 %
25-29	2	22.2 %	25-29	0	0.0 %
30-34	4	44.4 %	30-34	0	0.0 %
35-39	0	0.0 %	35-39	0	0.0 %
40 and over	0	0.0 %	40 and over	0	0.0 %
Unknown	1	11.1 %	Unknown	8	88.9 %
By Mother's Race:			By Father's Race:		
White	9	100.0 %	White	4	44.4 %
Black/African American	0	0.0 %	Black/African American	0	0.0 %
American Indian/Alaska Native	0	0.0 %	American Indian/Alaska Native	0	0.0 %
Asian Indian	0	0.0 %	Asian Indian	0	0.0 %
Chinese	0	0.0 %	Chinese	0	0.0 %

Note: Follow the same steps for any report that you wanted printed.

Export:

This is a data extract of the fields on the birth certificate. It can be used by hospitals/birthing facilities to create reports other than the reports already provided. For the record layout that includes the fields and record positions, please contact the Vital Records help desk.

Click on Batch>Export

Exports window displays. You will need to put in parameters in the Date of Birth and Year of Birth fields. Click on the Execute button.

You will be able to change the output name and it will be downloaded with that name.

Exports				
Export Name	т	File Names		
Today's Birth - Hospital		Output	test1	Download
		🖌 Report	test2	Download
		🖌 Summary	test3	Download
		Error	test4	Download
		Parameter Info	rmation	
		Parameter Set [[Default]	
		Date of Birth	01/15/2019	
		Year of Birth:		
		(If a param	eter is left empty, it will not be used in the s	election of records.)
	•		Execute Schedule Perform updat	te
	1 - 1 of 1 items			

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Back to top

The Export Results page will display with counts of records processed, written and total. Click OK.

Export Result	s ×
Output File	test1
Records Processed	33
Records Written	33
Total Records	33
Errors	0
Result	
ОК	

After clicking on the Execute button the Download buttons will become enabled in order to download the files. You can save the Output to a location and name of your choice.

File Names						
Output	test1	Download				
🖌 Report	test2	Download				
🖌 Summary	test3	Download				
Error	test4	Download				

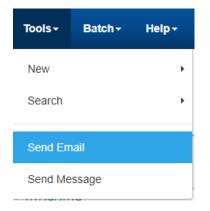
When you click on Download button it will be in the bottom of the page. Click on up arrow and choose Open. Notepad will open with the results of the report. You can do a Save As here to a location of your choice.

NETSMART MESSAGING/EMAIL IN VRS SYSTEM

Sending a message is sending a message within the system. Sending an email you can send it internally or externally.

To send an email follow the steps below:

Click on Tools> New> Send Email



Send Email window displays. Put in the email address in the 'To' line. You will also need to add a Subject and you can enter the message in the Message box. You can also attached a document if you need to attach one.

	Send Email	
то:	laurie.mccall@nebraska.gov	
CC:		
	Request receipt:	
Subject:	Test	
Attachments:	Popup Blocker info.docx	
	Remove Clear	
	Let me know if you got the attached document.	
Message:		
	Send Cancel	

To send a message:

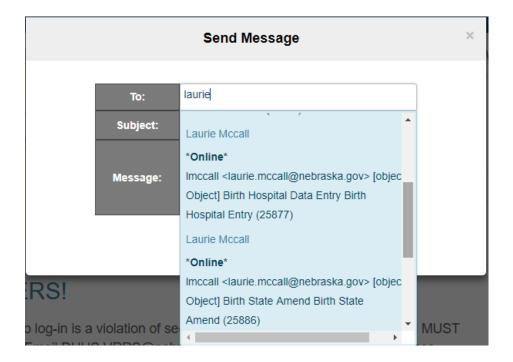
Go to Tools>Send Message

Tools +	Batch +	Blank For
New		•
Search		•
Send Em	ail	
Send Me	ssage	

Start typing the name of the person you want to send a message to and a list will display indicating if they are online and their email address. Select it and it will display in the 'To' line.

	Send Message	×
To: Subject:		
Message:		
	OK Cancel	

Once you start typing the name it will automatically bring up a dropdown list which you can select the person to send the message too here.



Note: For New Birth questions you can send an email to DHHSBirthDesk@nebraska.gov

Your message will be sent to the person(s) you put in the 'To' line. Your message will appear on the home page of the application or you can click on the message icon to see your new messages

orms+ i	Help+				
			V	/ork Queues	
		Del.		Hearing-HINFO	0
	State E-Vital Record System 12/07	2018	2	Hearing-NICU	0
	myVRS Test	ALLA	21	Hearing-OP-Not-Final	0
		1 hills		Hearing-OP-Planned	0
				Hospital H	3
				Hospital Rejects	0
use	ig someone else's user name to log-in is a violation of security your own user name to log-in. Email DHHS VRRS@nebraska				
From	Stibject Message	Received Event Local Fi			
Laurie Mccall	Smith's Please keep a lookout for Joe Smith's records. This record will need	12/17/2018 12:00:00 AM	View		
No mess:	ages to show.				
© 201	18 Netsmart Technologies Inc.				Back to top

Click on View to view the message and Mark as read once you have read your message. If you mark as Read it will no longer appear in the Messages box.

	View Message	×
From	Laurie Mccall	
Subject	Smith's record	
Received	12/17/2018 12:00:00 AM	
Event		
Local File Number		
Message	Please keep a lookout for Joe Smith's records. This record will need processed quickly as the parents are leaving the country and will want the ssn.	1,
	Mark as read	

HOW TO CHANGE PHONE NUMBER AND EMAIL ADDRESS FOR USERS

Click on Search> User Maintenance. User Information tab will be displayed. You can change the Office Phone number and Phone Extension on this tab

User Maintenan	ice: 25889			Image count: 0	Notes count: 0	Alerts:	No alerts present.	•	Save
User Information	EMAIL/MESSAGIN	G Other Information							
Signon Informat	tion								
User Login					User Name				
Imccall					Laurie Mccall				
Location Code									
CENTRAL									
Office Phone		Phone Ext.							
Search Paramet	ers								
Location									
			•						
								Nex	d

Click on EMAIL/MESSAGING tab to update the email address.

U	ser Maintenan	ce: 25889		Image count: 0	Notes count: 0	Alerts:	No alerts present.	•	Save
	User Information	EMAIL/MESSAGING	Other Information						
	Settings User EMAIL:								
	laurie.mccall@nel	braska.gov							
								Nex	

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COLOR & HIGH CONTRAST

If the colors you are seeing don't look like the screen shots provided in this manual and the information is difficult to see, check the Color & High contrast settings on your PC by personalizing your desktop. Right click on your desk top and select Personalize.

	View	>
	Sort by	>
	Refresh	
	Paste	
	Paste shortcut	
	Undo Rename	Ctrl+Z
	Open in Visual Studio	
	Next desktop background	
2	Intel® Graphics Settings	
	New	>
	Display settings	
	Personalize	

On the right side of the screen, select High Contract Settings.

Related Settings

High contrast settings

Sync your settings

The following screen will display. In the Choose a theme dropdown list, make sure None is selected. If something else is selected such as High Contrast White, it may cause the information on the screens to be difficult to read.

Color & high contrast

Color filters

Apply color filters to help see things on the screen more clearly. Press the Windows logo key + Ctrl + C to toggle the color filter.

 \sim

Apply color filter



Choose a filter

Grayscale

High contrast

Choose a theme

None	~
	Text

Hyperlinks
Disabled Text
Selected Text
Button Text
Background

Choose None then select Apply.

HOW TO CHANGE SCREEN SIZES

Many users may want larger text on their screen. The following instructions are for various browsers if you want to experiment with what size works best for you.

To change the screen size in **Chrome** go to your ellipses button (looks like 3 dots). Then click on the plus button next to Zoom in order to make your screen bigger. Screen shot below.

:

New tab New windo New incogr		w	(Ctrl+T Ctrl+N hift+N
History Downloads Bookmarks				► Ctrl+J ►
Zoom	- 10	00%	+	50
Print Cast				Ctrl+P
Find More tools				Ctrl+F ▶
Edit	Cut	С	ору	Paste
Settings Help				•
Exit				

To change the screen size in **Internet Explorer** go to your Settings button which looks like a gear. Then click on the Zoom button and choose to zoom in or out or choose the percent size you want. Screen shot below.

Print File Zoom (95%)
Zoom (95%)
20011 (0070)
Safety
Add site to Apps
View downloads Ctrl+J
Manage add-ons
F12 Developer Tools
Go to pinned sites
Compatibility View settings
Internet options
About Internet Explorer

To change the screen size in **Firefox** click on the hamburger button. Then click on the Zoom button and choose to zoom in or out or choose the percent size you want. Screen shot below.

		lıl'		Ξ
C	Sign in to Sync			
П	New Window			trl+N
	New Private Windo		Ctrl+Sł	
			Curtor	III LŦF
ر _ب ا	Restore Previous Se	ssion		
	Zoom –	100%	+	r _a
	Edit	¥	ዔ	Ê
lii\	Library			>
÷	Add-ons		Ctrl+Sh	nift+A
¢	Options			
	Customize			
	Open File		C	trl+0
	Save Page As		C	Ctrl+S
=	Print			
Q	Find in This Page		(Ctrl+F
	More			>
	Web Developer			>
?	Help			>
Ċ	Exit		Ctrl+Sh	ift+Q

To change the screen size in **Safari** hold the Command button down and click on + to increase the size or - to decrease the size. Or you can click on View on the toolbar and choose Zoom In or Zoom Out.

View	History	Bookmarks	People	Wind	0
		Bookmarks Bai Toolbar in Full		∂ ೫B ∂ ೫F	0
Stop Relo	ad This Pa	ge		೫. ೫R	41 1
	r Full Scre	en		^೫F ೫0	
Zoor Zoor	m In m Out			೫+ ೫−	
Cast					

MANAGE ADDRESSES IN CHROME

If you are typing in addresses while using Chrome it has a setting to save and fill addresses which include information such as phone numbers, email addresses and shipping addresses. You will need to turn off the Fill Addresses in Chrome. A snapshot below of Chrome keeping addresses when selecting a State.

Birth State		
ne	•	
Nebraska 1933 SW 19th ST		
NE 3281 hitchcock st		
NE 2021 g st apt 1		
Manage addresses		

Following the instructions below to turn off the Fill Addresses for Chrome:

Select the 3 dots, ellipses:

.

Select Settings.

Select Autofill and Addresses and more:

utofill		
Or Passv	rords	•
🗎 Paym	ent methods	•
Addre	sses and more	•

Addresses and more

Save and fill addresses Includes information like phone numbers, email addresses, and shipping addresses Addresses Add 1933 SW 19th ST, Lincoln 3281 hitchcock st, lincoln alyssa saquic, 2021 g st apt 1

Click on the Blue Dot to turn off:



It will turn light grey when it is turned off:

PROFILE

If you want to click for your menu choices without hovering you can edit your Profile which is located on the right side of the page on the toolbar. This will allow you to not hover over the submenus in the tool bar. To change your preference from hovering, go to Profile button and click on Edit your profile link. Then check the box next to 'Use mouse-click to open/close submenus?' in the Operations section of the profile page. You may want to experiment with this to see what your preference is. After making the change please remember to click on the Save button.



Operations

Default Event Year

2019

Menus

Use mouse-click to open/close submenus?

CONTACTS, HELP DESK, BIRTH DESK

Vital Records Help Desk: 402-471-8275 Vital Records Supervisors: 402-471-0924 or 402-471-0919 Legal Questions: 402-471-0916 Email – <u>DHHS.VitalRecords@nebraska.gov</u> Add or Remove users – email <u>DHHS.VRRS@nebraska.gov</u>