

Password Management and Login Process

This new process was developed to improve security of the VRVWeb and to provide users additional functionality to manage their own user profile without the assistance of Vital Statistics staff.

This chapter documents all of the steps and functions related to changing your password, creating and updating your user profile, and how to log into the Kansas vital record application. Each user must have their own current valid email address that is not shared by another user in their profile. Each user will be required to have a PIN that only they should know.

The pages to follow will give you written instructions along with screen shots to help guide you through the different functions of the new process.

- **Existing User Transition Section** – Page 3

(This section is only used once for user's that have accounts already at the time of implementing the new password and login process.)

- **Logging Into the VRVWeb Section** – Page 11

(This section guides users through the process of logging into the Kansas system after their profile has been set up and email address has been verified.)

- **New User Section** – Page 16

(This section guides you through setting up your user profile once Vital Statistics has set up your account.)

- **Changing Security Information Section** – Page 20

(This section allows you to change your user profile information at any time. It is important for you to keep your email address current. You will receive email notifications when any part of your user profile has been changed.)

- >Changing Password – Page 20

- >Changing Questions and Answers – Page 25

- >Changing Image and Key Phrase – Page 30

- >Changing PIN – Page 35

- >Changing Email – Page 40

- **Password Expiring Section** – Page 45

(This section guides you through the process when the system notifies you that your password is about to expire.)

- **Forgot Login Information Section** – Page 48

(This section describes how to reset the following login features when you have forgotten them.)

- >Forgot Username – Page 48

- >Forgot Question and Answers – Page 53

- >Forgot Image or Key Phrase – Page 59

- >Forgot Password – Page 65

- **Vital Statistics Admin Resets Security Information Section** – Page 70

- >PIN Reset – Page 70

- >Email Reset – Page 73

(This section should only be necessary when you have forgotten your PIN and/or your email address will not match what is in your user profile and you need assistance from Vital to reset.)

Existing User Transition Section

Logging on the VRVWeb for the first time with the new password and login process.

1. Enter your username.
2. Click the “**Continue**” button.

https://vsjis.kdhe.state.ks.us:7443/ - VRVWeb - Login Page - Windows Internet Explorer

KS VRVweb

WARNING:
By using this system the user consents to the interception of information and/or the examination and retrieval of stored information by assigned staff of the Department of Health and Environment (KDHE). Only employees of the KDHE or people granted special permission by KDHE are authorized to use this network. Users authorized and unauthorized have no expectation of privacy. Unauthorized and improper use of this system may result in disciplinary action or criminal and civil penalties.

1 Username: [Forgot Username?](#)


2

Trusted sites 100%

Note: The “**Reset**” button is only used to clear what you have entered in a field.

3. Enter your current password.
4. Then click on the “**Log In**” button.

https://vsiiis.kdhe.state.ks.us:7443/ - VRVWeb - Login Page - Windows Internet Explorer



WARNING:
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3 Password: [Forgot Password?](#)

4

Done Trusted sites 100%

User Profile – Now you must set your user profile.

5. You must verify your email. If the email address is not correct, click the “**Change e-mail address**” button. If this email is correct and is unique, then you can turn to page 6 for instructions related to the other fields.
6. After you have clicked the change e-mail address, enter your email address.
7. You will then need to re-enter the email address again to confirm.

Note: The email address should be a *non-sharing address. Your email address will be used for various functions related to your user profile, such as resetting your password or changing other security information.

5

6

7

Current E-mail: smomis@kdheks.gov(Not Verified)

New E-mail:

Confirm New E-mail:

New Pin (Last 4 digits of SSN recommended):

Confirm New Pin:

Change e-mail address

* Denotes Required Field

Note: If you did not have an email on file, you will not get the “**Change e-mail address**” button. You will automatically be asked to enter an e-mail.

Current E-mail: No e-mail on record

New E-mail:

Confirm New E-mail:

Proper format *name@something.com*

This e-mail will be used to

- notify you of changes to your security information
- recover your forgotten or expired passwords
- reset your security information

* Denotes Required Field

*Non-sharing e-mail address means the e-mail address is not used by another user in their user profile.

- 8. Create a PIN by entering a 4 digit number. We recommend that you enter the last 4 digits of your Social Security Number.
- 9. Enter the same 4 digit PIN to confirm.

New E-mail:

myaddress@email.com

Confirm New E-mail:

myaddress@email.com

8

New Pin (Last 4 digits of SSN recommended):

9

Confirm New Pin:

Security Question 1:

-- Please choose --

Security Answer 1:

Security Question 2:

-- Please choose --

Security Answer 2:

Security Question 3:

-- Please choose --

Security Answer 3:

Security Image: Click on any image below to choose

< 1 of 11 >

Note: The PIN is used to verify you on various functions and signing electronic vital records. It is important to keep the PIN confidential.

- 10. Use the pull down menu to select a question for Security Question 1.
- 11. Enter an answer for your first question.
- 12. Use the pull down menu to select a question for Security Question 2.
- 13. Enter an answer for your second question.
- 14. Use the pull down menu to select a question for Security Question 3.
- 15. Enter an answer for your third question.

Note: You must choose three different questions and have three different answers. The answers are not case sensitive.

10

Security Question 1:

-- Please choose --

11

Security Answer 1:

12

Security Question 2:

-- Please choose --

13

Security Answer 2:

14

Security Question 3:

-- Please choose --

15

Security Answer 3:

Confirm New Pin:

Security Image: Click on any Image below to choose

< 1 of 11 >

-- Please choose --

-- Please choose --

What was your childhood nickname?

In what city did you meet your spouse/significant other?

What is the name of your favorite childhood friend?

What street did you live on in third grade?

What is the middle name of your oldest child?

What is your oldest sibling's middle name?

What school did you attend for sixth grade?

What was your childhood phone number including area code?

What is your oldest cousin's first and last name?

What was the name of your first stuffed animal?

In what city or town did your mother and father meet?

Where were you when you had your first kiss?

What is the first name of the boy or girl that you first kissed?

What was the last name of your third grade teacher?

In what city does your nearest sibling live?

What is your maternal grandmother's maiden name?

In what city or town was your first job?

What is the name of the place your wedding reception was held?

What is the name of a college you applied to but didn't attend?

Where were you when you first heard about 9/11?

What was the name of your elementary/primary school?

What is the name of the company of your first job?

What was your dream job as a child?

Who was your childhood hero?

Selected Image:

No Image

- 16. Select a security image for your account. Your selected image will appear on the right.
- 17. Then enter a key phrase to help you remember your image.
- 18. Finally, click the “Continue” button at the bottom.

You can cycle through images by clicking on these arrows.

There are over 200 images to choose from.

16

Security Answer 3:

Security Image: Click on any Image below to choose

< 1 of 11 >

--

< 1 of 11 >

Key:

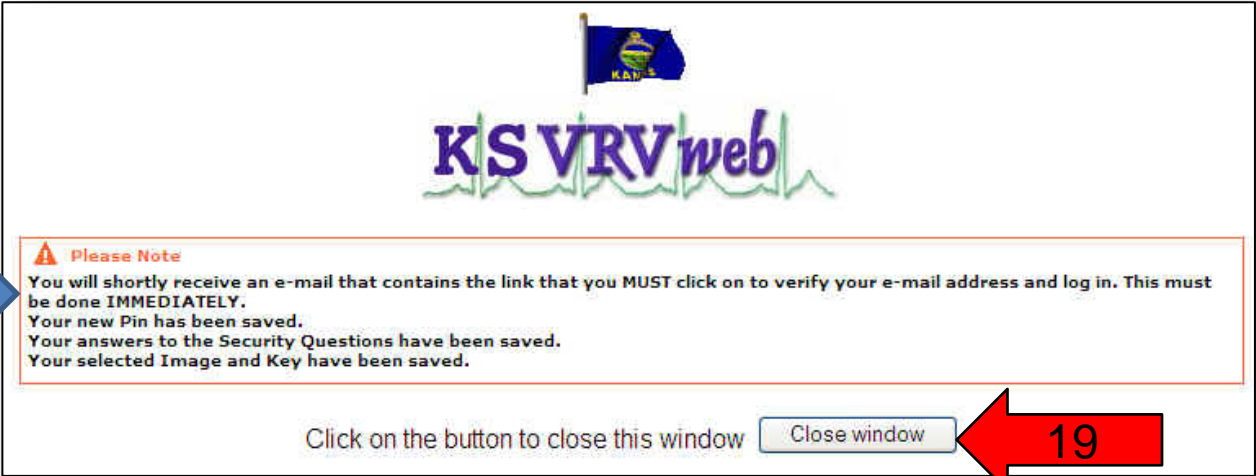
Selected Image:

No Image

Your selected image will appear here.

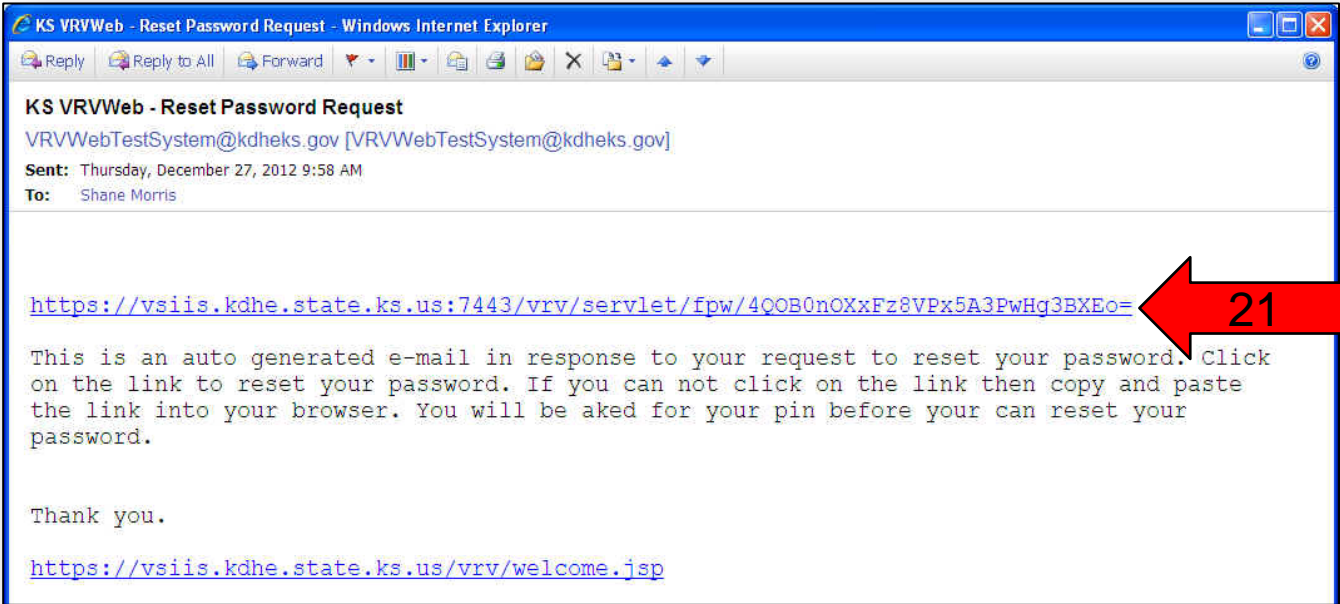
19. Now click the “Close window” button.
Now you must go IMMEDIATELY to your email to receive the link to verify your email address and log into the application.

Note: Your profile information has been saved.



20. Log into your email account that is tied to your user account for the VRVWeb.
21. Open the email that you received from the VRVWeb and click on the top link.

You should see an email from VRVWeb@kdheks.gov.



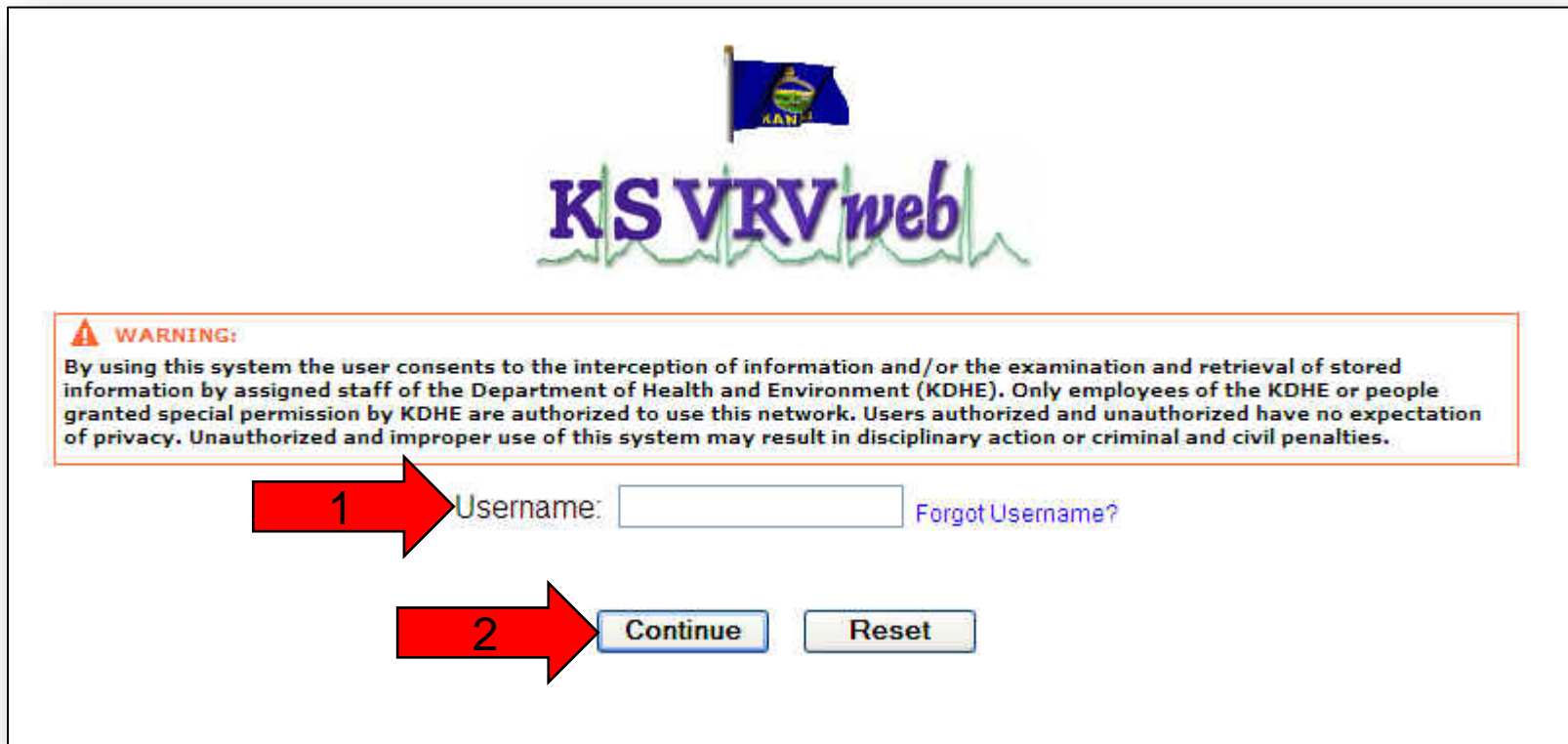
22. You should get a notification that your e-mail has been verified. Click on the “Continue” button to go back to the login page and follow the login procedures that follow to ensure you are able to login successfully.



Logging Onto The VRVWeb Section

Now you are ready to log into the system. Pages 11-14 is the process from this point forward that you will use to login to the Kansas system.

1. Enter your username.
2. Click the “**Continue**” button.



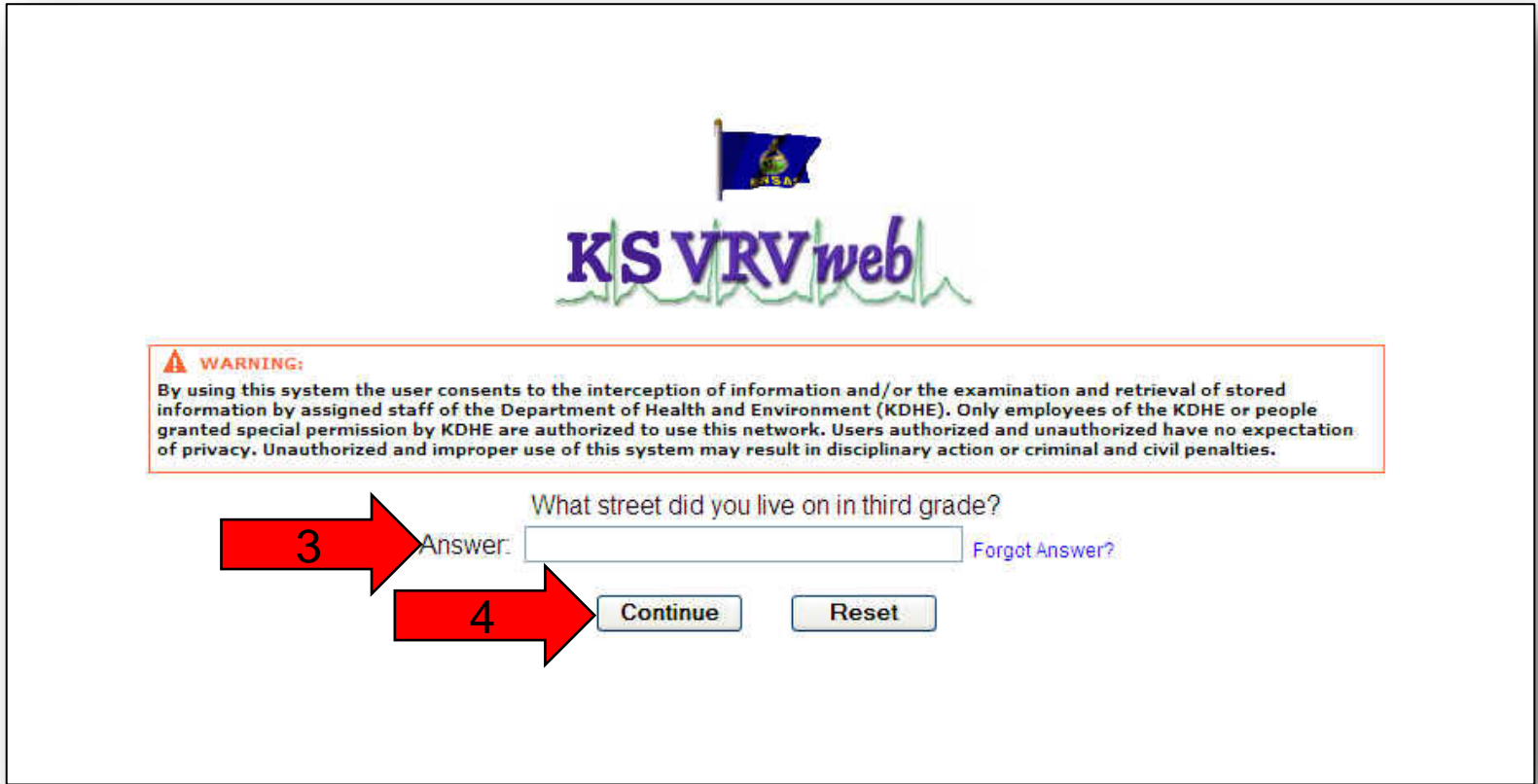
The screenshot shows the KS VRVweb login interface. At the top is the Kansas state flag and the text "KS VRVweb" with a green ECG line. Below this is a red-bordered warning box. The main login area contains a "Username:" label, a text input field, a "Forgot Username?" link, and two buttons: "Continue" and "Reset".

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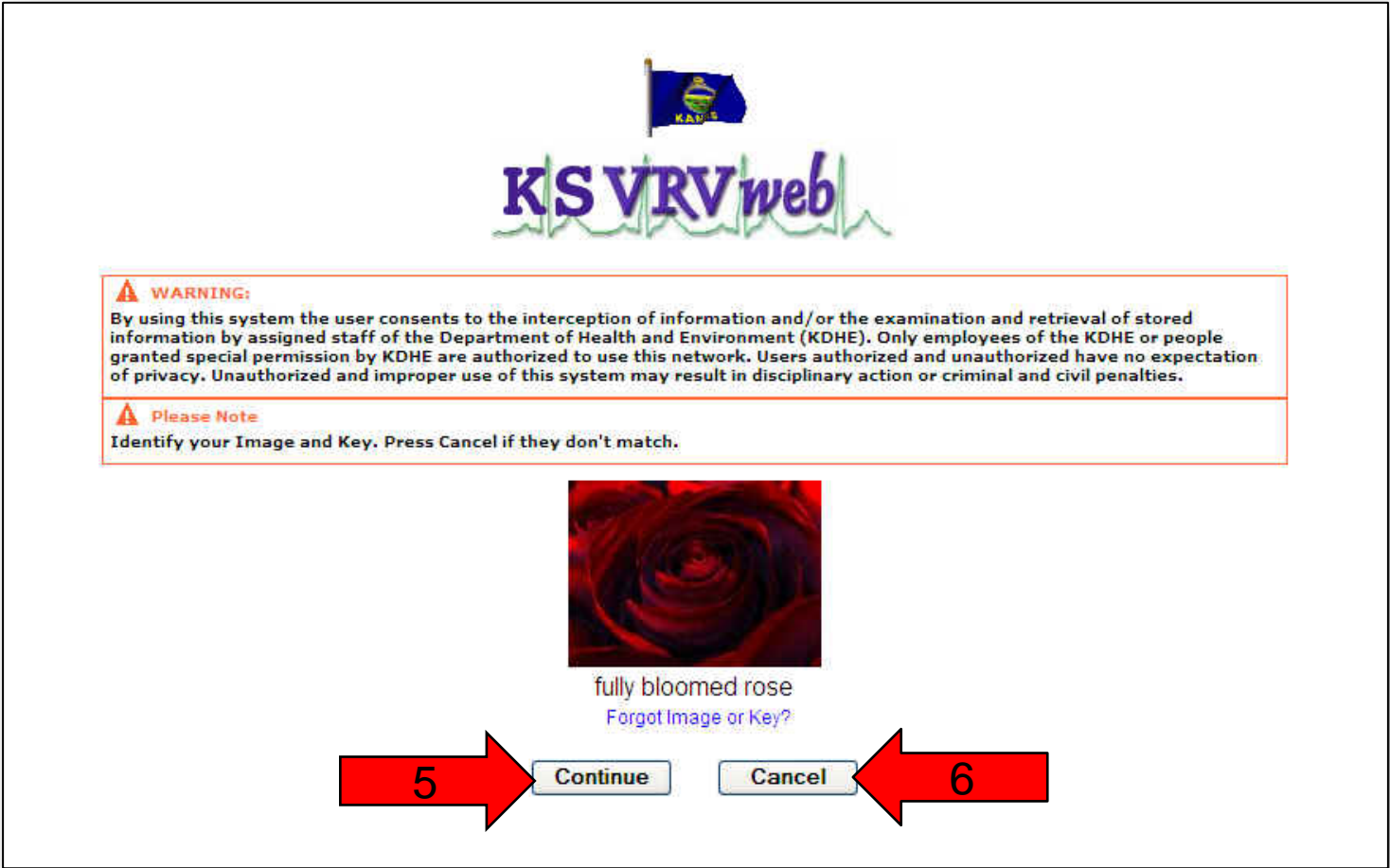
1 → Username: [Forgot Username?](#)

2 →

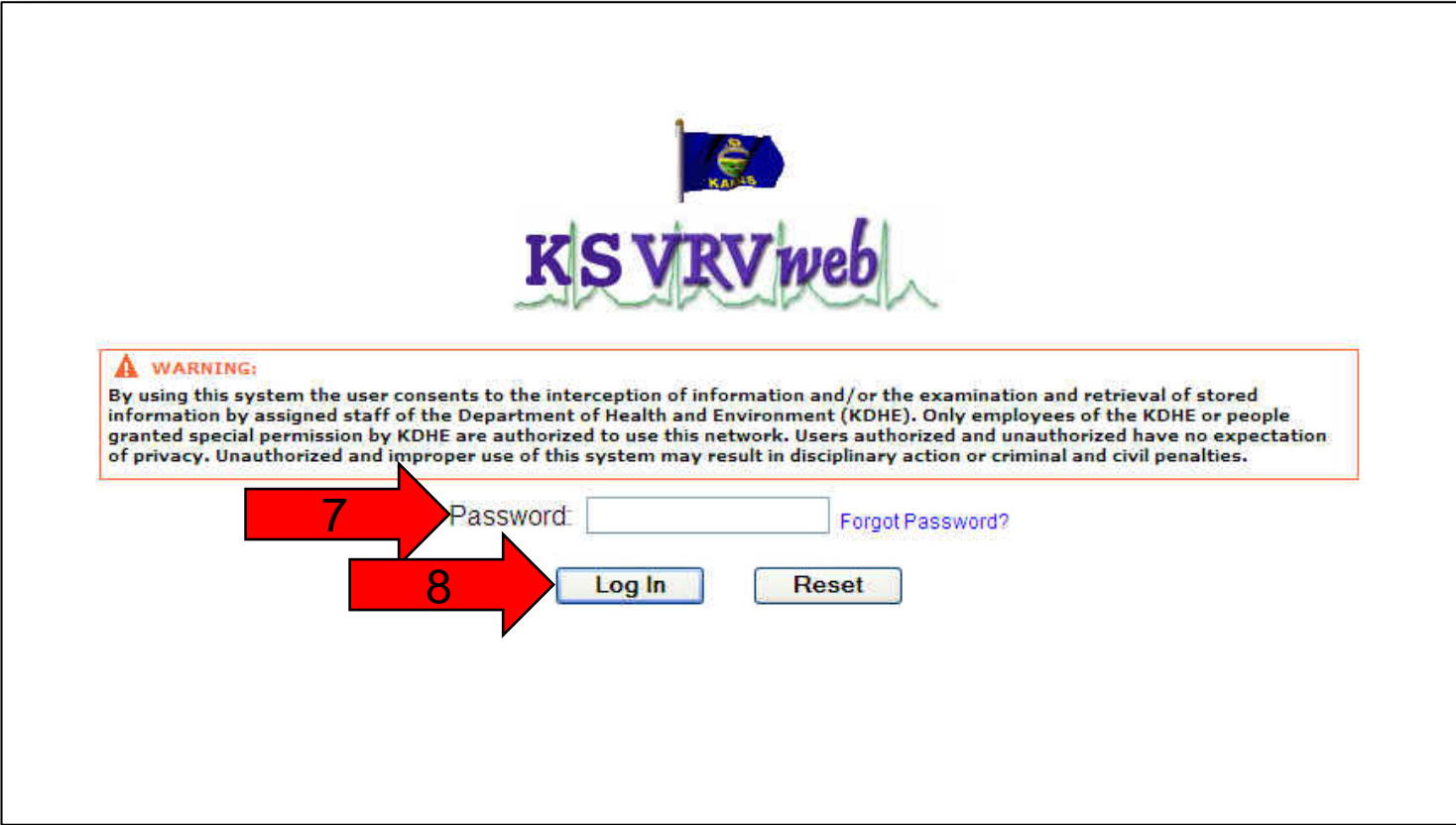
- 3. You will now be asked one of your three security questions. Enter the answer to your security question.
- 4. Click the “Continue” button.



- 5. If you see your security image and key phrase, click the “Continue” button.
- 6. If this is not your security image and key phrase, click the “Cancel” button.



- 7. Enter your password.
- 8. Click the “Log In” button.



9. Select your location. If you only have one location, you will be at the main menu for the VRVWeb.

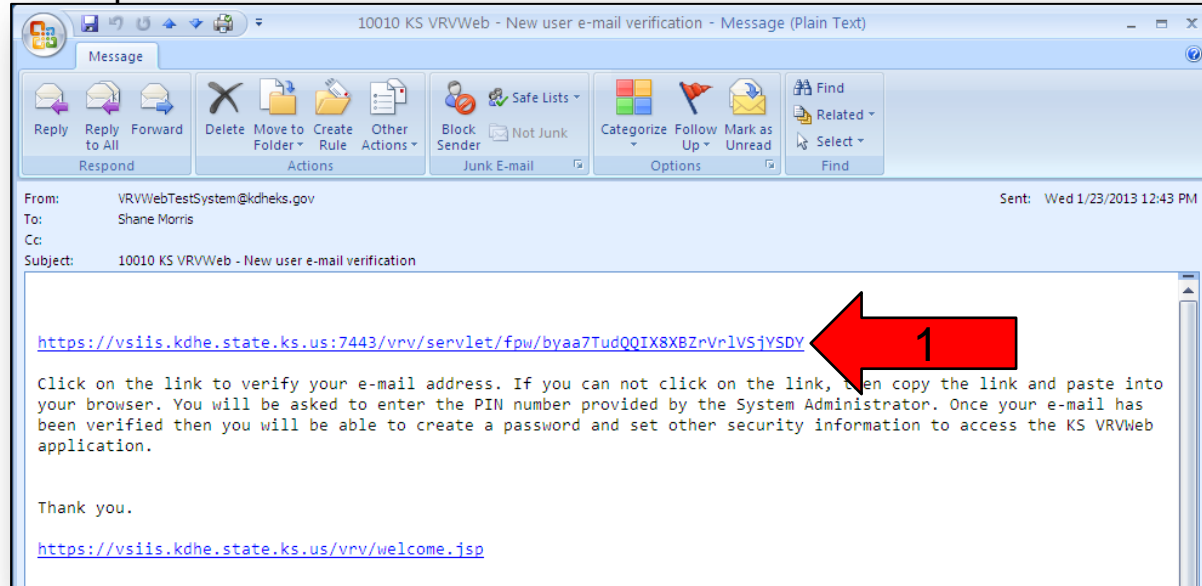


Note: This is an example of a typical main menu for a hospital. Your main menu may look different.



New User Section

1. When your account is set up, you will receive an email and a PIN from a Vital Statistics employee. Open the email and click on the top link.



2. Enter the temporary PIN.
3. Click the "**Continue**" button.

The screenshot shows the "KS VRVweb" logo at the top, which includes a small flag icon. Below the logo is a red-bordered box with a warning icon and the text: "Please Note Your e-mail has been verified Enter your Pin below. If you have forgotten the pin then please contact the System Administrator". Below this box is a "Pin:" label followed by a text input field. A red arrow with the number "2" points to the input field. Below the input field are two buttons: "Continue" and "Reset". A red arrow with the number "3" points to the "Continue" button.

- 4. Create a new password.
- 5. Retype your new password.
- 6. Enter the temporary PIN given to you.
- 7. Type a new PIN. We recommend using the last four digits of your Social Security number.
- 8. Retype your new PIN.
- 9. Use the pull down menu to select a question for Security Question 1.
- 10. Enter an answer for your first question.
- 11. Use the pull down menu to select a question for Security Question 2.
- 12. Enter an answer for your second question.
- 13. Use the pull down menu to select a question for Security Question 3.
- 14. Enter an answer for your third question.

Note: Your password must have the following requirements:

- At least one upper case letter.
- At least one lower case letter.
- At least one number.
- At least one special character. (i.e. \$, !, %, &)
- Must be at least 8 characters long.

Note: The PIN is used to verify you on various functions and signing electronic vital records. It is important to keep the PIN confidential.

* Denotes Required Field

New Password:	<input type="text"/>	4
Confirm New Password:	<input type="text"/>	5
Current Pin:	<input type="text"/>	6
New Pin (Last 4 digits of SSN recommended):	<input type="text"/>	7
Confirm New Pin:	<input type="text"/>	8
Security Question 1:	-- Please choose --	9
Security Answer 1:	<input type="text"/>	10
Security Question 2:	-- Please choose --	11
Security Answer 2:	<input type="text"/>	12
Security Question 3:	-- Please choose --	13
Security Answer 3:	<input type="text"/>	14

- 15. Click on an image.
- 16. Enter a key phrase.
- 17. Click the “Continue” button.

You can cycle through images by clicking on these arrows.





















There are over 200 images to choose from.

15

Security Answer 3:

Security Image: Click on any Image below to choose

< 1 of 11 >

< 1 of 11 >

Key:

Continue

Reset

Selected Image:

No Image

Your selected image will appear here.

16

17

18. You will get a notification that your security information has been saved. Click the “**Continue**” button to return to the login page. Turn to page 11 to follow the login procedure.



Changing Security Information Section

Changing Password

1. Click on **"System"**.
2. Click on **"Change Security Information"**.



Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL

KS VRV web

Main
Birth | Stillbirth | **System** | Inventory

Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process



Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL

KS VRV web

Main -- System
Change Security Information

Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process

3. Click on “CHANGE” next to Password.

Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL



Version: RLS-4-36-TEST
01/15/2013 02:44 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

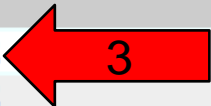
Main -- System -- **Change Security Information**

Security Informations List

Modify an existing Security Information

Security Information	Change
Password	CHANGE
Security Question Answer	CHANGE
Image and Key Phrase	CHANGE
Pin	CHANGE
E-mail	CHANGE

Cancel



- 4. Enter your current password.
- 5. Enter a new password.
- 6. Retype your new password.
- 7. Click the “Continue” button.

Note: Your password must have the following requirements:

- At least one upper case letter.
- At least one lower case letter.
- At least one number.
- At least one special character. (i.e. \$, !, %, &)
- Must be at least 8 characters long.

Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL



Version: RLS-4-36-TEST
01/15/2013 02:44 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main -- System -- Change Security Information

Modify the Password

Current Password:

New Password:

Retype New Password:

7

Continue

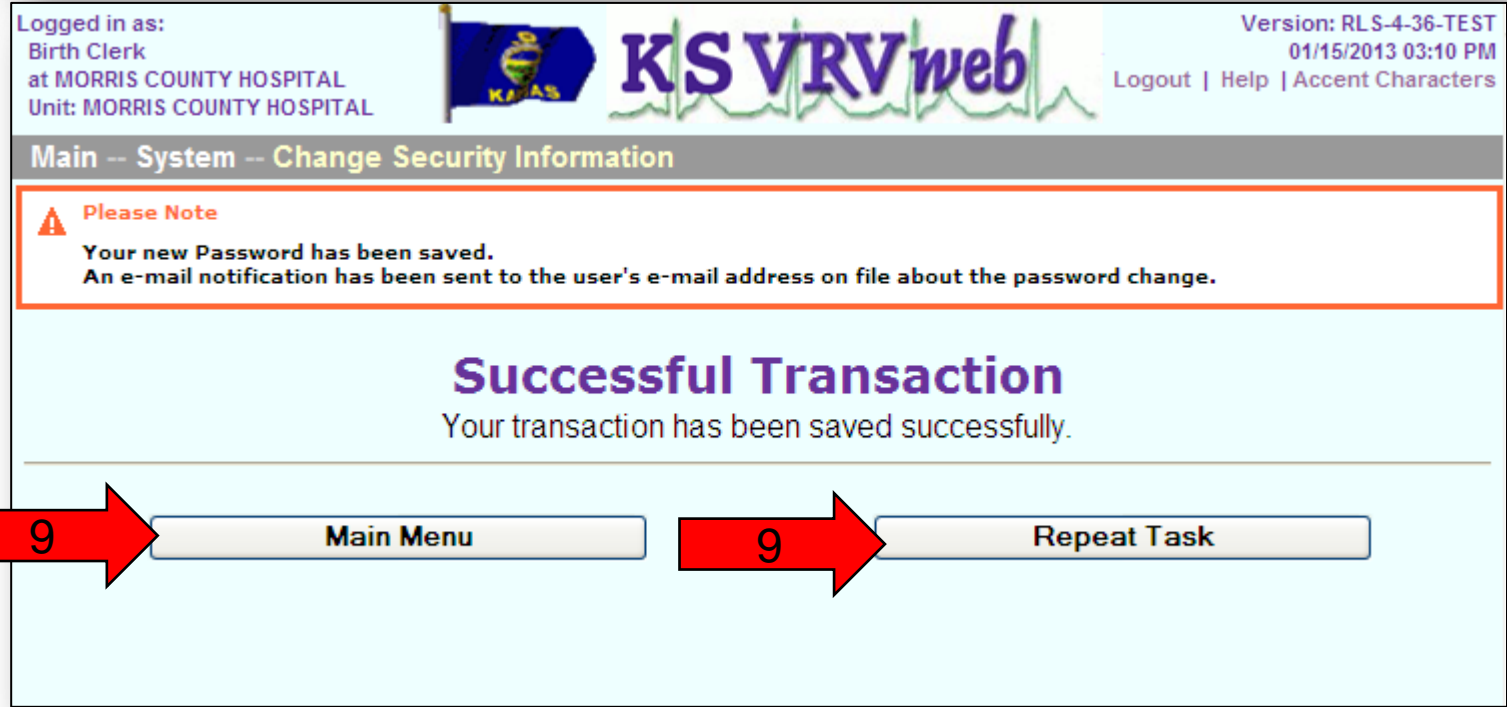
Cancel

4

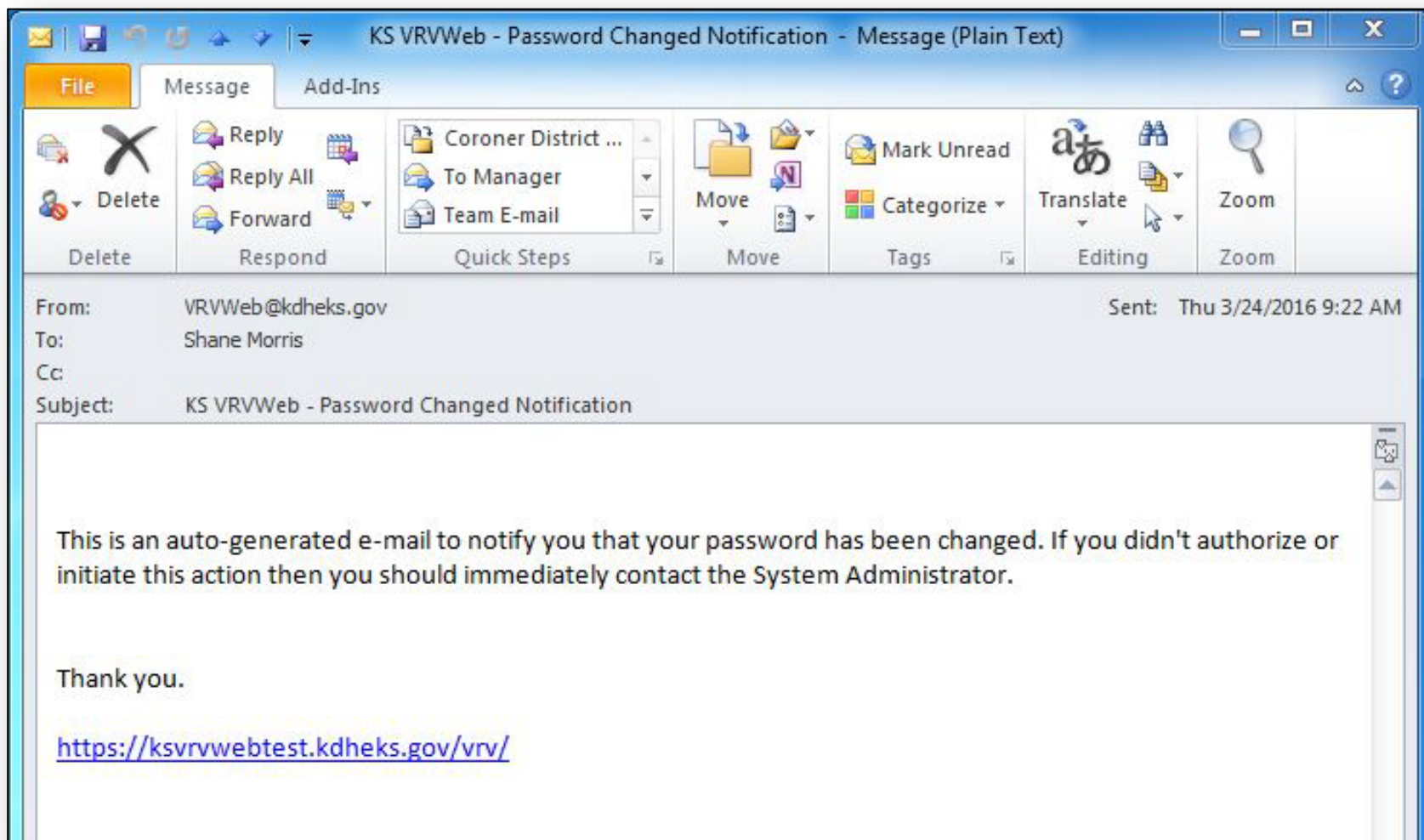
5

6

- 8. Click the “Continue” button again to confirm your password change.
- 9. You will get a note indicating that your password has been saved and that an email has been sent to you. Click the “Main Menu” button to return to the main menu or click the “Repeat Task” button if you want to change more security information.



10. Log into your email account that is tied to your user account for the VRVWeb. You should have received an email that states that your password was changed. This is just an email to notify you of your password change, it does not require you to do any action. You can delete this email.



Changing Security Questions and Answers

1. Click on **"System"**.
2. Click on **"Change Security Information"**.



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at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL

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Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process



Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL

KS VRV web

Main -- System
Change Security Information

Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process

3. Click on “CHANGE” next to Security Question Answer.

Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL



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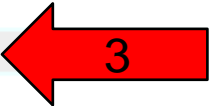
Main -- System -- Change Security Information

Security Informations List

Modify an existing Security Information


Security Information	Change
Password	CHANGE
Security Question Answer	CHANGE
Image and Key Phrase	CHANGE
Pin	CHANGE
E-mail	CHANGE

Cancel



- 4. Enter your current PIN.
- 5. Use the pull down menu to select a question for Security Question 1.
- 6. Enter an answer for your first question.
- 7. Use the pull down menu to select a question for Security Question 2.
- 8. Enter an answer for your second question.
- 9. Use the pull down menu to select a question for Security Question 3.
- 10. Enter an answer for your third question.
- 11. Click the “Continue” button.

Logged in as:
Shane Morris
at BAKER FUNERAL HOME [change]
Unit: BAKER FUNERAL HOME



Version: RLS-4-36-TEST
01/16/2013 09:18 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main -- System -- Change Security Information

Modify the Security Questions

Your current Pin :

5

Security Question 1 : -- Please choose --

Answer 1 :

7

Security Question 2 : -- Please choose --

Answer 2 :

9

Security Question 3 : -- Please choose --

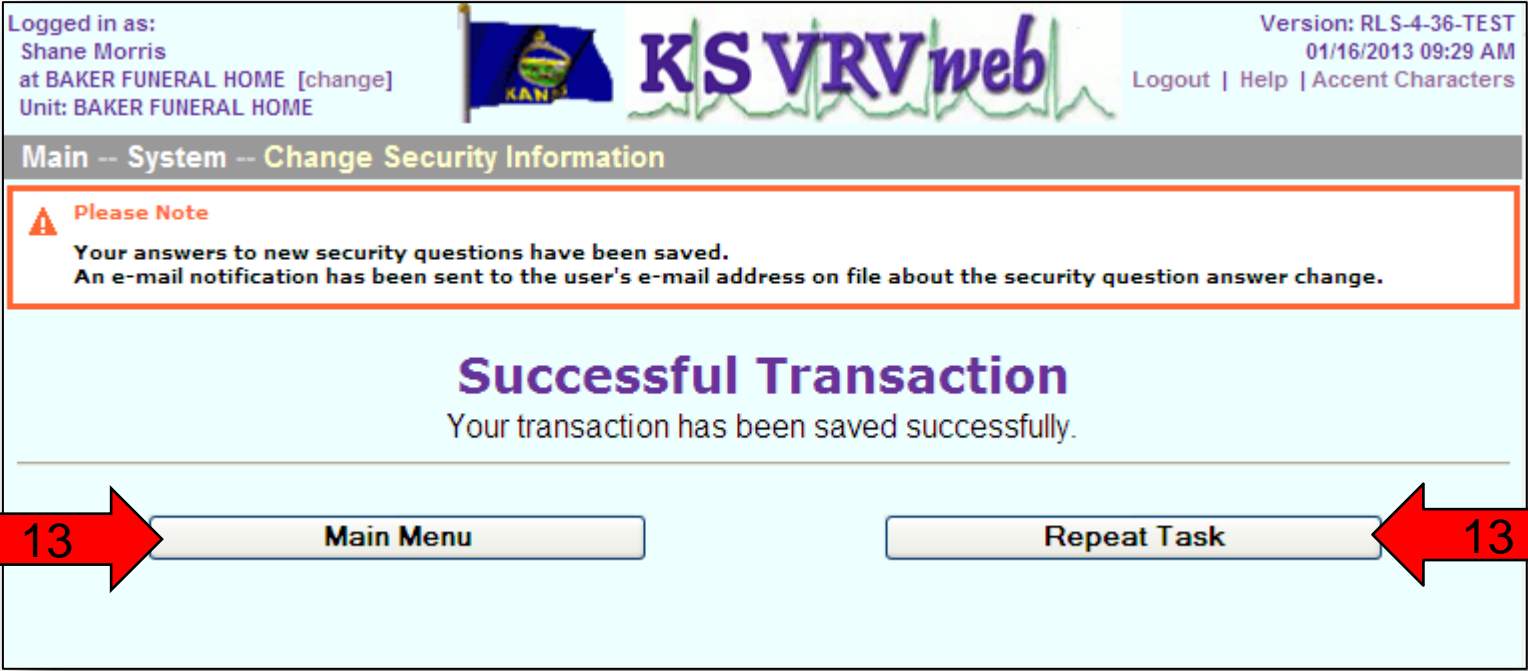
Answer 3 :

11

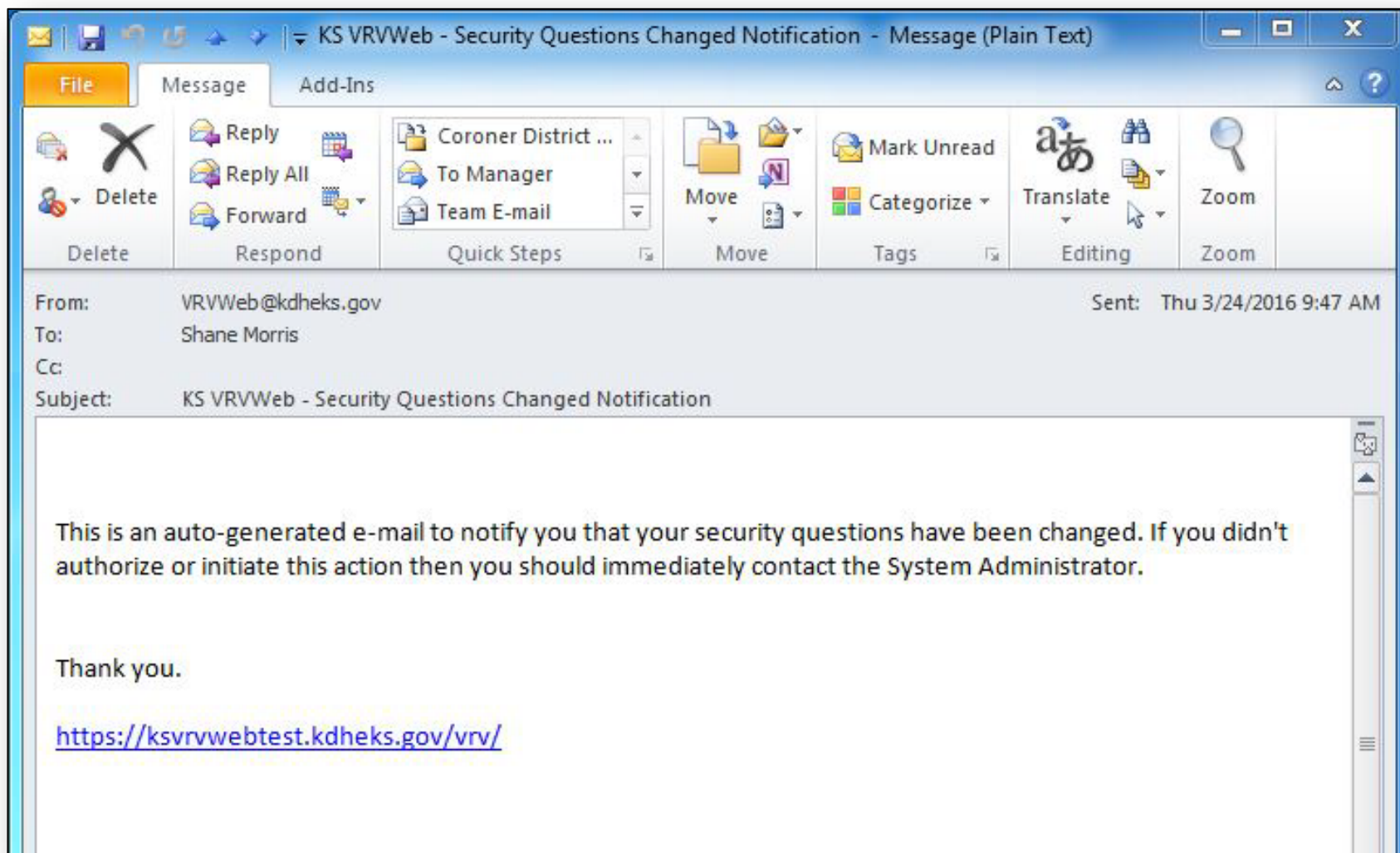
Continue

Cancel

- 12. Click the “Continue” button again to confirm your security question answer change.
- 13. You will get a note indicating that your questions and answers have been saved and that an email has been sent to you. Click the “Main Menu” button to return to the main menu or click the “Repeat Task” button if you want to change more security information.




14. Log into your email account that is tied to your user account for the VRVWeb. You should have received an email that states that your security question was changed. This is just an email to notify you of your security questions change, no action needed. You can delete this email.



Changing Image and Key Phrase

1. Click on **"System"**.
2. Click on **"Change Security Information"**.



Logged in as:
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Unit: MORRIS COUNTY HOSPITAL

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Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process



Logged in as:
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at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL

KS VRV web

Main -- System
Change Security Information

Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process

3. Click on “CHANGE” next to Image and Key Phrase.

Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL



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01/15/2013 02:44 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

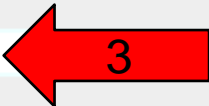
Main -- System -- Change Security Information

Security Informations List

Modify an existing Security Information

Security Information	Change
Password	CHANGE
Security Question Answer	CHANGE
Image and Key Phrase	CHANGE
Pin	CHANGE
E-mail	CHANGE

Cancel




- 4. Enter your current PIN.
- 5. Click on an image. If you wish to keep the same image, you must click on that image.
- 6. Change your Key phrase if necessary.
- 7. Click the “Continue” button.

Your current selected image will appear here. If you want to retain this image or change the image, you must re-select.

You can cycle through images by clicking on these arrows.

There are over 200 images to choose from.

Logged in as:
Shane Morris
at BAKER FUNERAL HOME [change]
Unit: BAKER FUNERAL HOME



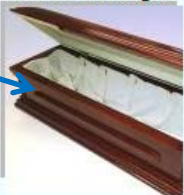
Version: RLS-4-36-TEST
01/16/2013 03:45 PM
Logout | Help | Accent Characters


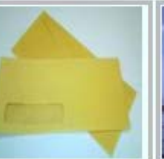



Main -- System -- Change Security Information






Modify a Image & Key






Your current Pin :

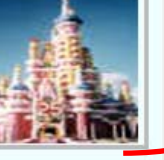
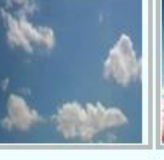

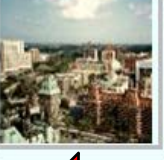

Selected Image: < 1 of 11 >











< 1 of 11 >

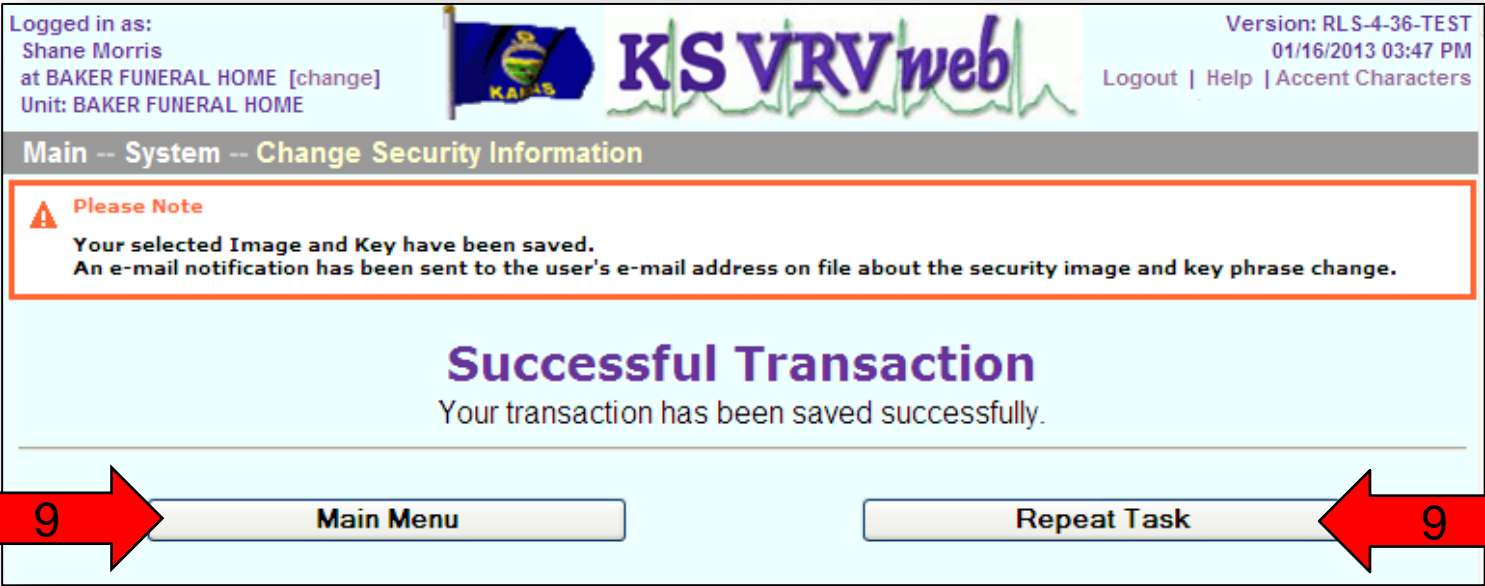
Key:

7

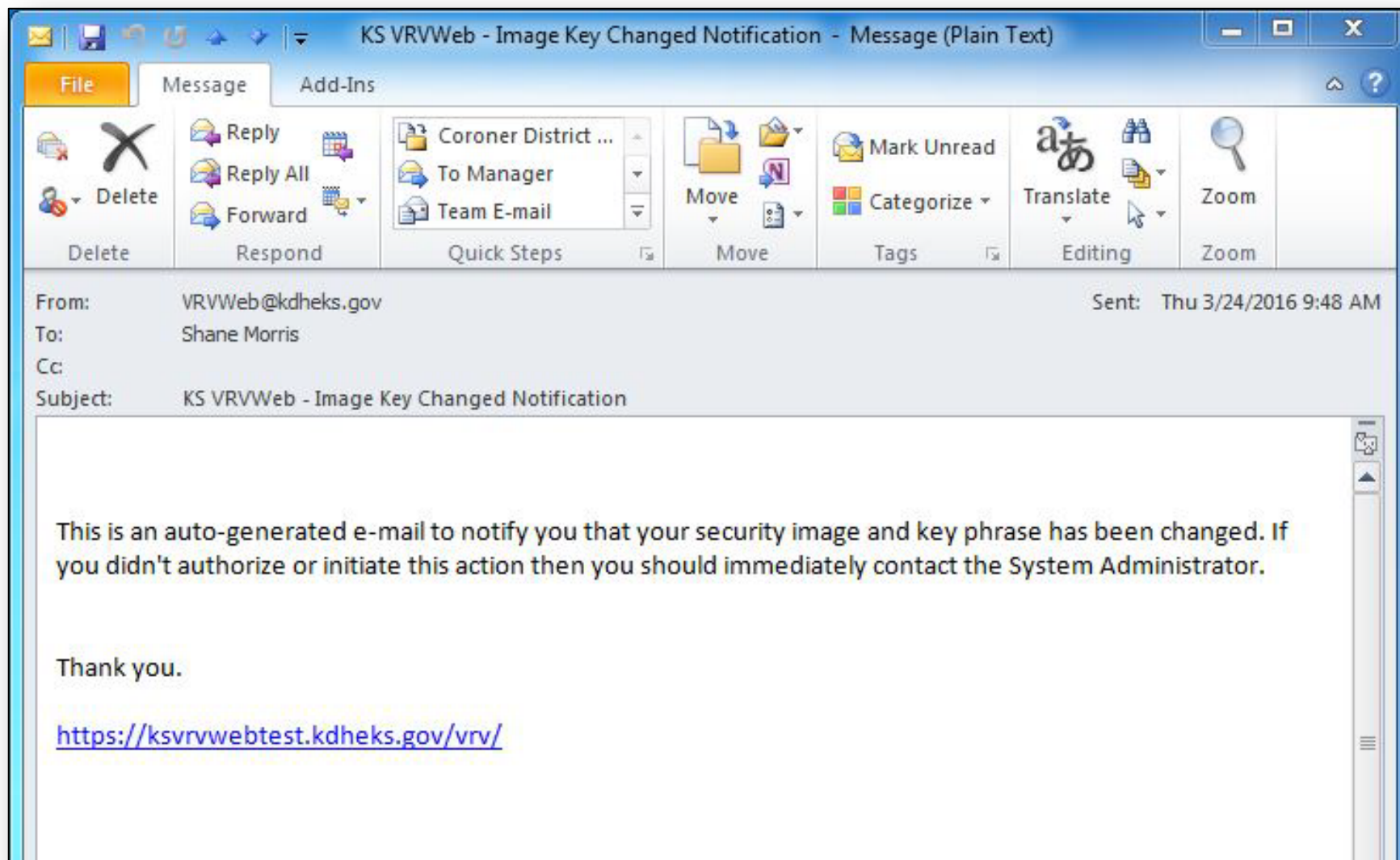
Continue

Cancel

- 8. Click the “Continue” button again to confirm your image and key phrase change.
- 9. You will then get a note indicating that your image and key have been saved and that an email has been sent to you. Click the “Main Menu” button to return to the main menu or click the “Repeat Task” button if you want to change more security information.



10. Log into your email account that is tied to your user account for the VRVWeb. You should have received an email that states that your image and key phrase were changed. This is just an email to notify you of your image and key phrase change. No action is needed. You can delete this email.



Changing PIN

1. Click on **"System"**.
2. Click on **"Change Security Information"**.



Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL

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Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process



Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL

KS VRV web

Main -- System
Change Security Information

Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process

3. Click on “CHANGE” next to PIN.

Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL



Version: RLS-4-36-TEST
01/15/2013 02:44 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

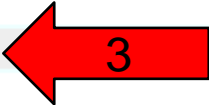
Main -- System -- **Change Security Information**

Security Informations List

Modify an existing Security Information


Security Information	Change
Password	CHANGE
Security Question Answer	CHANGE
Image and Key Phrase	CHANGE
Pin	CHANGE
E-mail	CHANGE

Cancel



- 4. Enter your current PIN.
- 5. Enter a new PIN. We recommend using the last 4 digits of your social security number.
- 6. Enter your new PIN for confirmation.
- 7. Click the “Continue” button.

Logged in as:
Shane Morris
at BAKER FUNERAL HOME [change]
Unit: BAKER FUNERAL HOME



Version: RLS-4-36-TEST
01/16/2013 04:48 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main -- System -- Change Security Information

Modify the Pin

Your Current Pin :

Your new Pin (Last 4 digits of SSN recommended):

Confirm your new Pin :

7

Continue

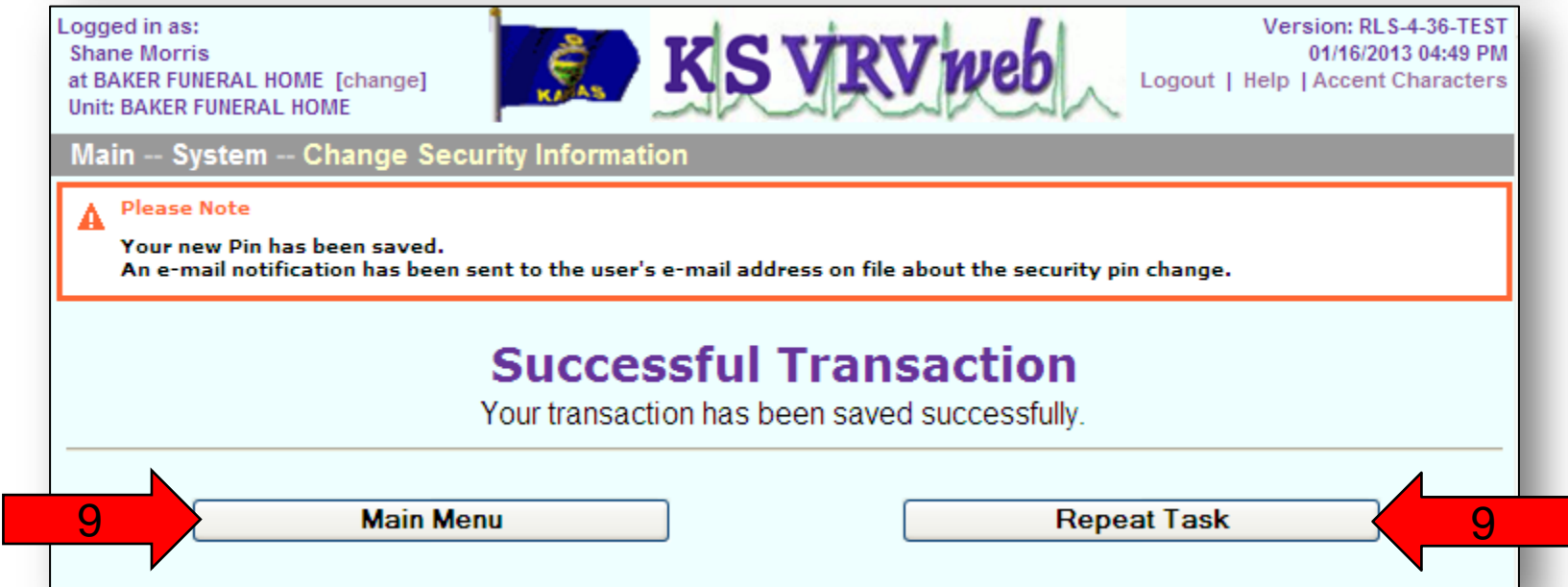
Cancel

4

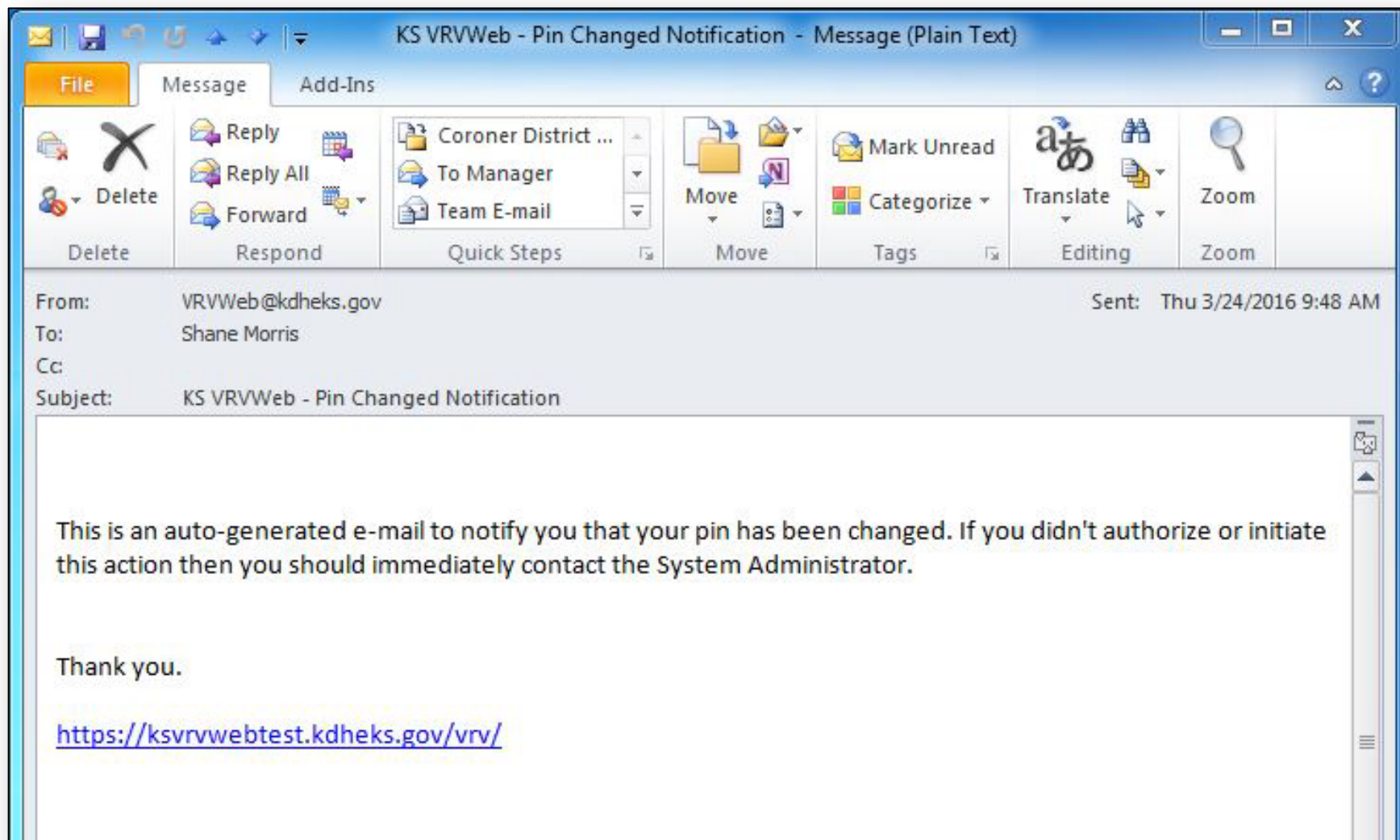
5

6

- 8. Click the **“Continue”** button again to confirm your PIN change.
- 9. You will get a note indicating that your PIN has been saved and that an email has been sent to you. Click the **“Main Menu”** button to return to the main menu or click the **“Repeat Task”** button if you want to change more security information.



10. Log into your email account that is tied to your user account for the VRVWeb. You should have received an email that states that your PIN was changed. This is just an email to notify you of your PIN change. No action is needed. You can delete this email.



Changing Email

1. Click on **"System"**.
2. Click on **"Change Security Information"**.



Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL

KS VRV web

Main
Birth | Stillbirth | **System** | Inventory

Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process



Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL

KS VRV web

Main -- System
Change Security Information

Open Cases

Task Description	Date Created			
Case Pending: MARK DEAD	11/18/2011	Details	Edit	Process
Release: ONE TEA	01/15/2013	Details	Edit	Process
Case Pending: CHRISTOPHER BROWN	11/21/2011	Details	Edit	Process

3. Click on “CHANGE” next to E-mail.

Logged in as:
Birth Clerk
at MORRIS COUNTY HOSPITAL
Unit: MORRIS COUNTY HOSPITAL



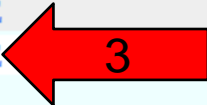
Version: RLS-4-36-TEST
01/15/2013 02:44 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main -- System -- **Change Security Information**

Security Informations List


Modify an existing Security Information

Security Information	Change
Password	CHANGE
Security Question Answer	CHANGE
Image and Key Phrase	CHANGE
Pin	CHANGE
E-mail	CHANGE



- 4. Enter your current PIN.
- 5. Enter a new e-mail address.
- 6. Retype your new e-mail address.
- 7. Click the “Continue” button.

Logged in as:
Shane Morris
at BAKER FUNERAL HOME [change]
Unit: BAKER FUNERAL HOME



Version: RLS-4-36-TEST
01/17/2013 08:34 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main -- System -- Change Security Information

Modify the E-mail

smorris@kdheks.gov

Your current Pin :

New E-mail:

Retype New E-mail:

Continue

Cancel

Note: Your current email is listed here.

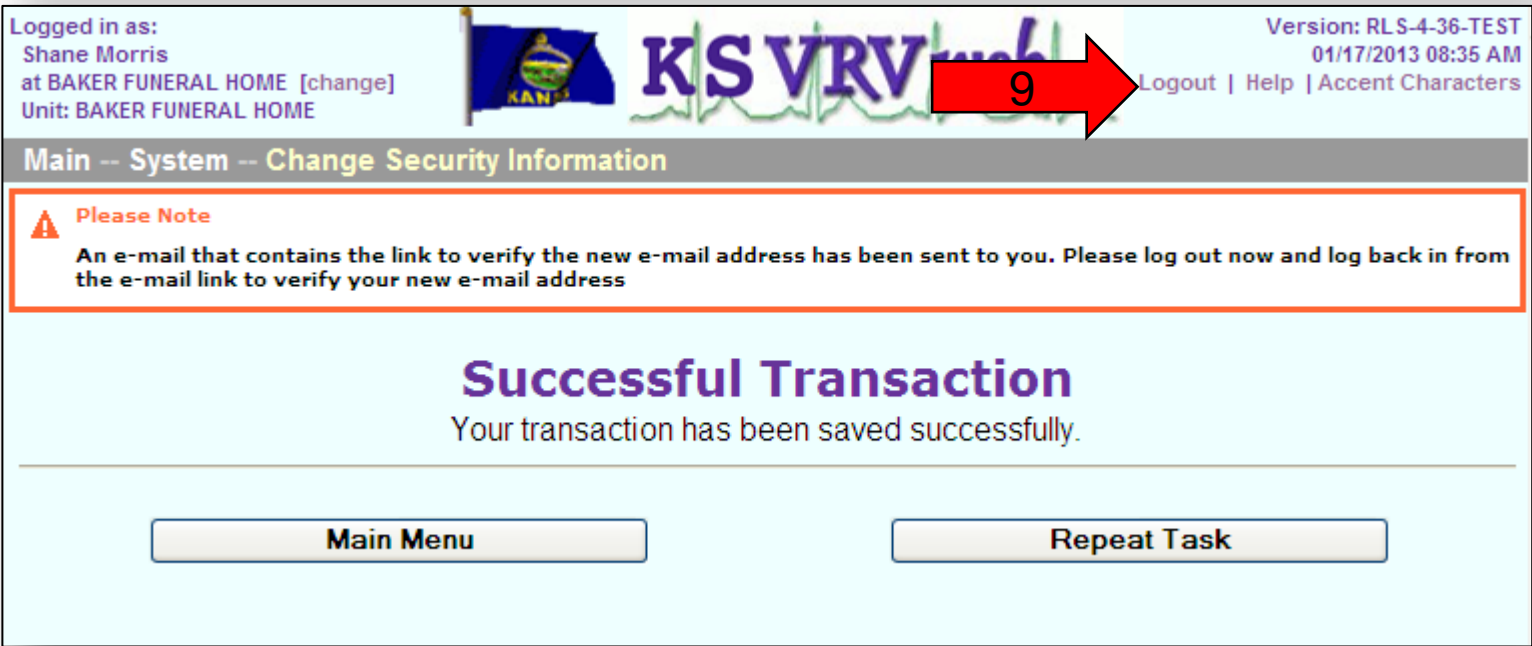
4

5

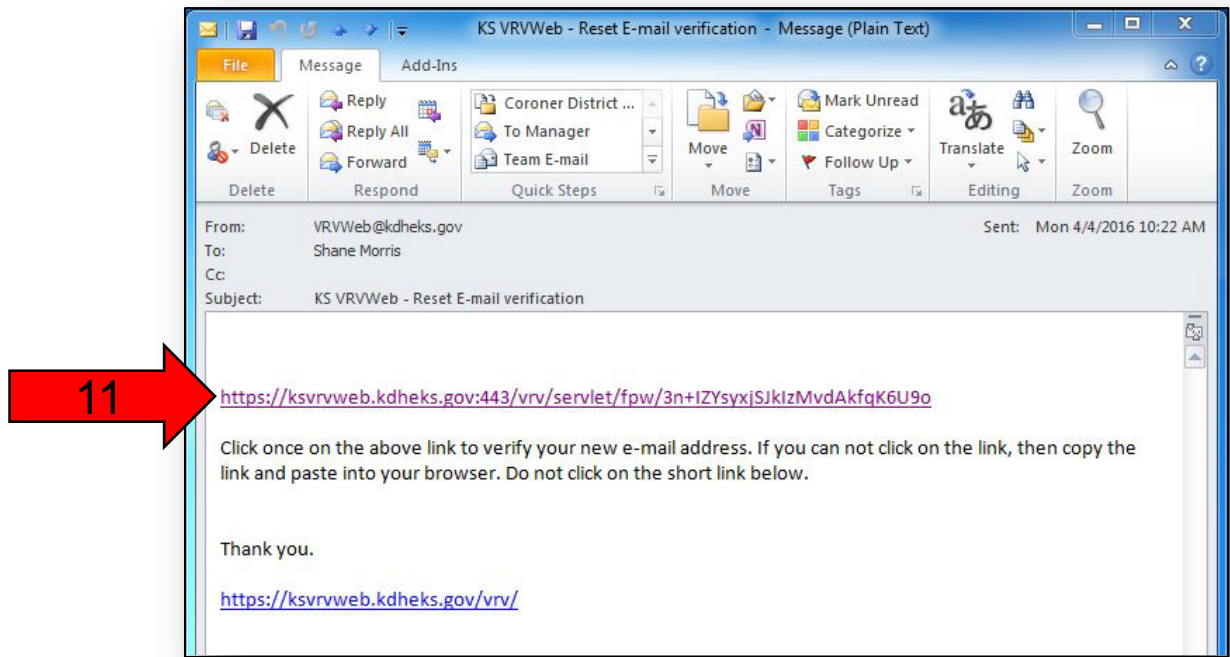
6

7

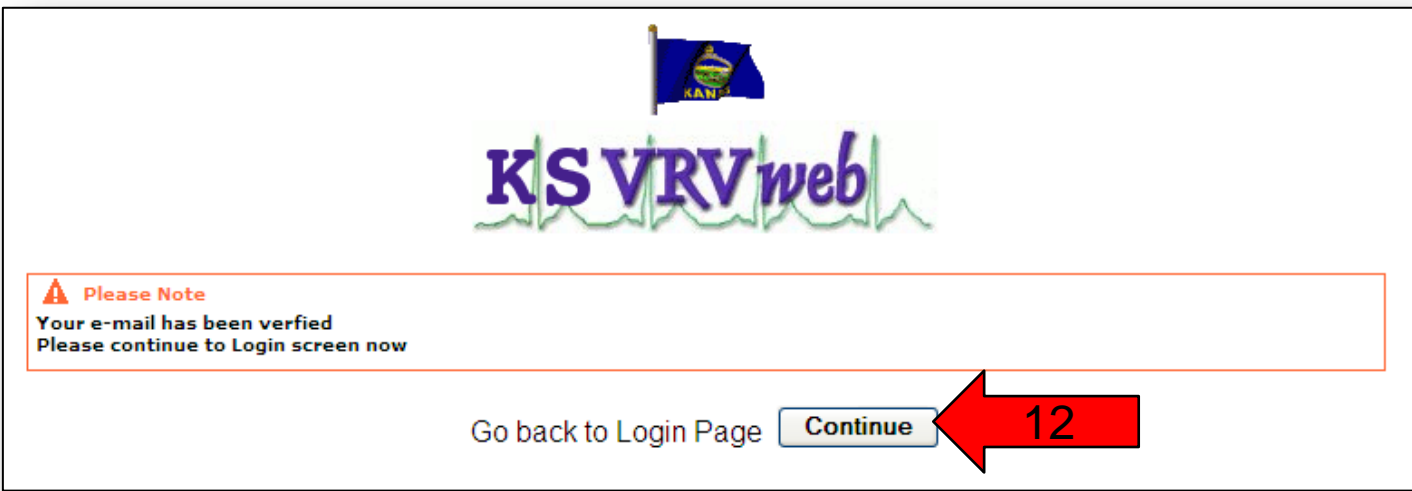
- 8. Click the “Continue” button.
- 9. You should have a note that states that you need to log out and go to your email to receive the link to verify your new email address. Click the “Logout” button and close the window.



- 10. Log into your new email address.
- 11. Open the email you received from the VRVWeb and click on the top link to verify your new email address.



- 12. Click the “Continue” button to go back to the login page and proceed to login.



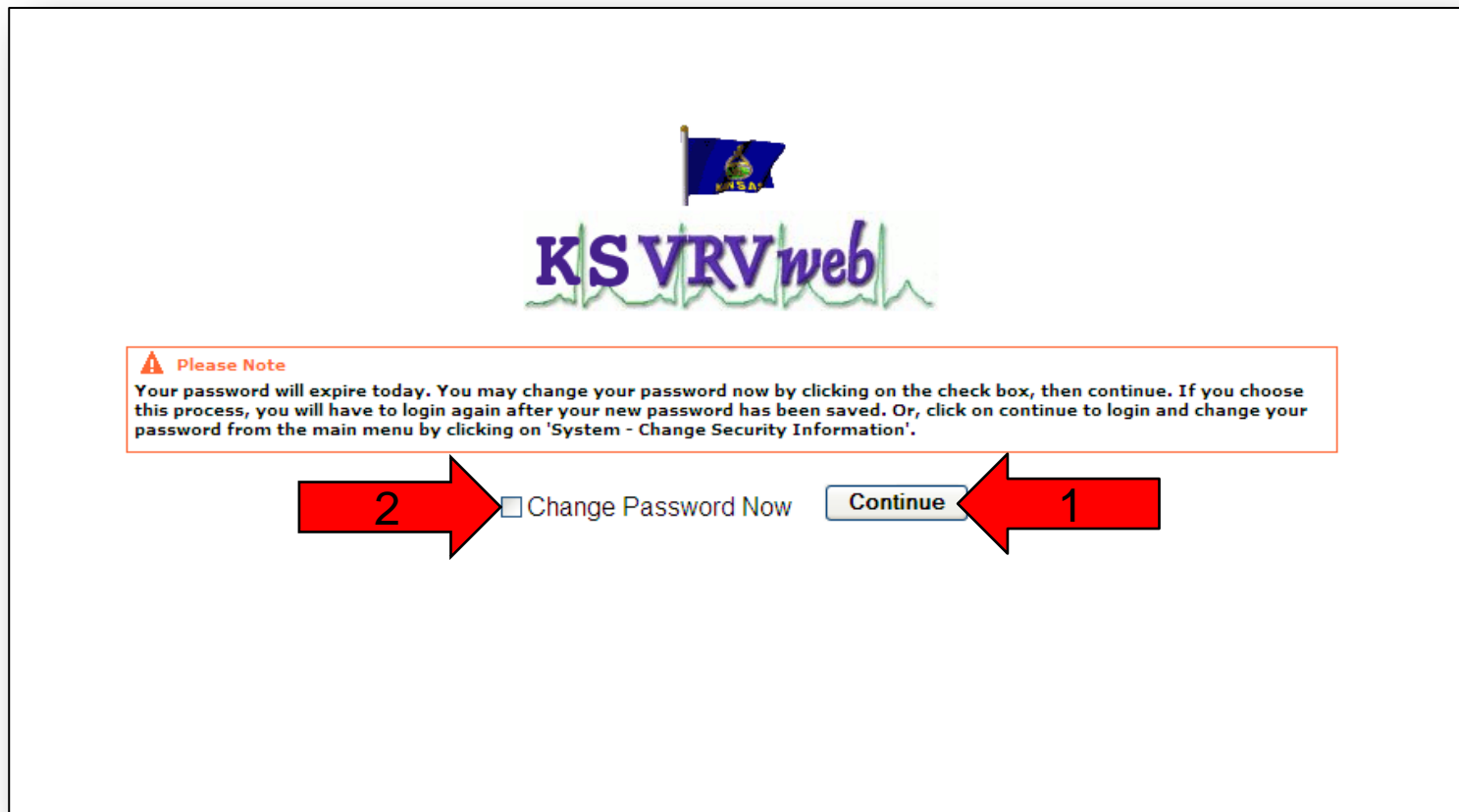
Password Expiration Notification Section

If your password is about to expire, you will get this notification after you enter your password. You will see this when you login and your password is about to expire within 14 days.

1. If you wish to change your password now, we suggest you click the “**Continue**” button and then follow the instructions on pages 20-24.

OR

2. If you want to change your password now, click the check box next to “**Change Password Now**”.
3. Then click the “**Continue**” button.



Note: Your password must have the following requirements:

- At least one upper case letter.
- At least one lower case letter.
- At least one number.
- At least one special character. (i.e. \$, !, %, &)
- Must be at least 8 characters long.

4. Enter your current password.
5. Enter a new password.
6. Retype your new password for verification.
7. Click the “**Continue**” button.

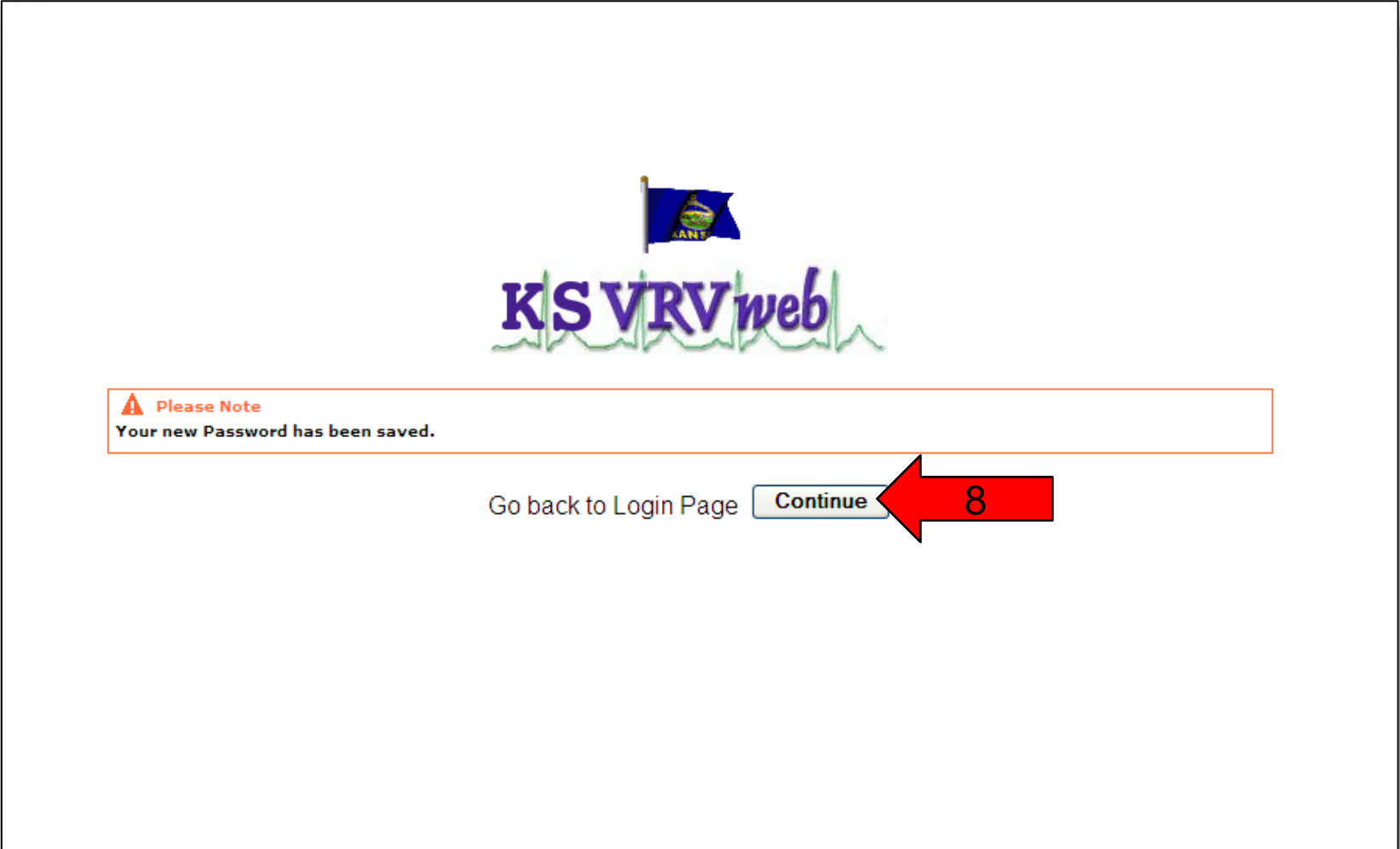
The screenshot shows the 'KS VRV web' security update interface. At the top left is a logo featuring a flag and a globe. To its right is the text 'KS VRV web' with a green waveform graphic. Below the logo is a red-bordered box with a warning icon and the text: 'Please Note Please Update your Security Information.'.

Below this is a horizontal line, followed by the text '* Denotes Required Field' in red. The form contains three input fields with corresponding labels on the left:

- 'Original Password:' followed by an input field. A red arrow labeled '4' points to this field, with a red box containing the text 'Enter your current password' to its right.
- 'New Password:' followed by an input field. A red arrow labeled '5' points to this field.
- 'Confirm New Password:' followed by an input field. A red arrow labeled '6' points to this field.

At the bottom, there are two green buttons: 'Continue' and 'Reset'. A red arrow labeled '7' points to the 'Continue' button.

8. Click the “**Continue**” button. You will now have to log back in using your new password. Turn back to page 12 to follow the login instructions if needed.



Forgot Login Information Section

Forgot User Name


1. If you forgot your user name, click the “**Forgot Username?**” link.




WARNING:
By using this system the user consents to the interception of information and/or the examination and retrieval of stored information by assigned staff of the Department of Health and Environment (KDHE). Only employees of the KDHE or people granted special permission by KDHE are authorized to use this network. Users authorized and unauthorized have no expectation of privacy. Unauthorized and improper use of this system may result in disciplinary action or criminal and civil penalties.

Username: [Forgot Username?](#)

2. Enter your first name.
3. Enter your last name.
4. Enter the email address in your user profile.
5. Click the “**Continue**” button.



 **Please Note**
Enter the information below. If it is correct then you will shortly get an e-mail with details about how to retrieve your information.

First Name:

Last Name:

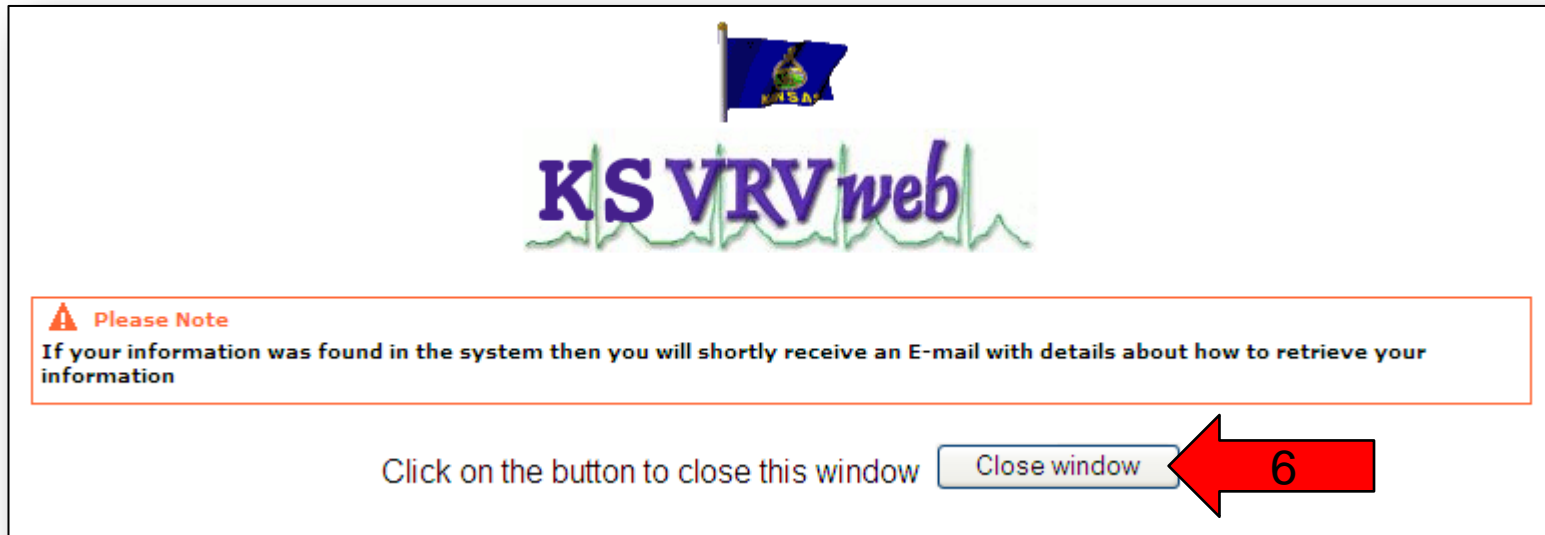
E-mail:

5

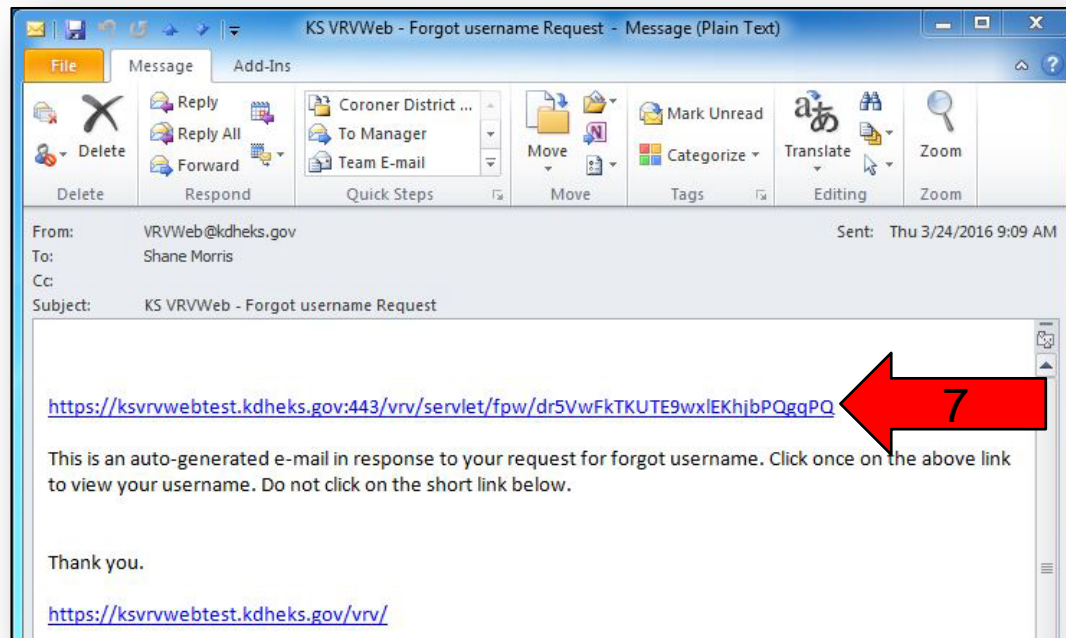
Continue

Reset

6. You will receive a notification that if your information was found in the system, you will shortly receive an email. Click the **“Close Window”** button.



7. You will now need to log into your email. Open the email that you received from the VRVWeb and click on the top link.



8. Enter your PIN.
9. Click the “**Continue**” button.



The login interface features the KS VRV web logo at the top, which includes a small Kansas state flag icon above the text "KS VRV web" in a stylized purple font with a green heartbeat line underneath.

 **Please Note**
Enter your Pin below. If you have forgotten the pin then please contact the System Administrator

Pin :

9

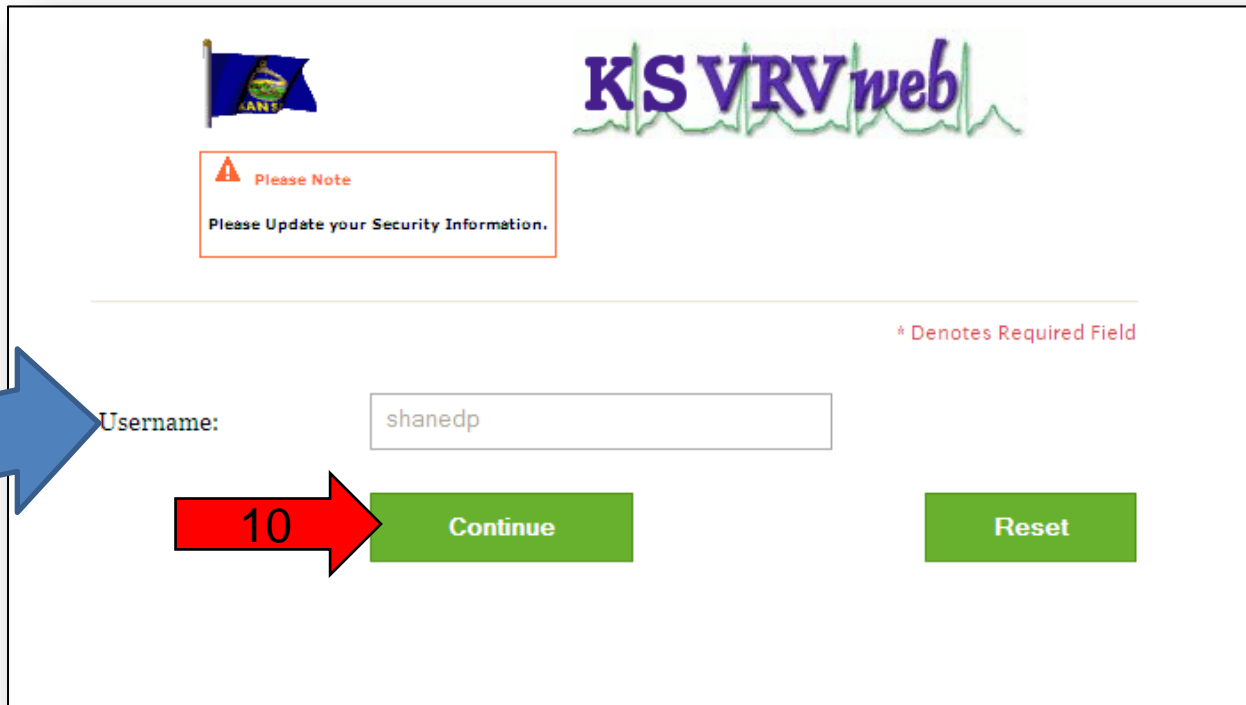
Continue

Reset

8

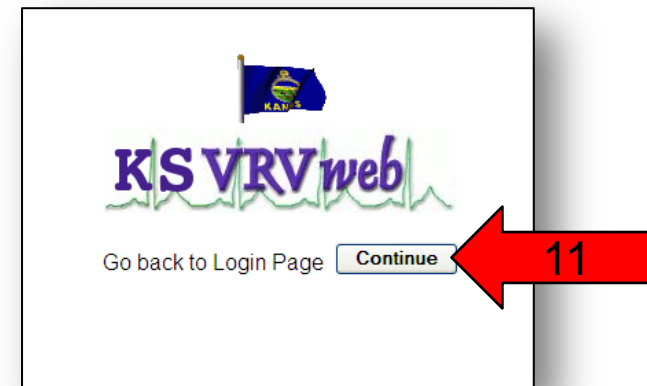
10. Your username should now be displayed. Click the “**Continue**” button.

11. Click “**Continue**” again to return to the login page to log in.



The screenshot shows the KS VRV web interface. At the top left is a logo with a flag and the text 'KS VRV'. To its right is the text 'KS VRV web' with a green heartbeat line. Below the logo is a red-bordered box with a warning icon and the text 'Please Note' and 'Please Update your Security Information.'. Below this is a horizontal line. To the right of the line is the text '* Denotes Required Field'. Below the line is a form with a label 'Username:' and a text input field containing 'shanedp'. Below the input field are two green buttons: 'Continue' and 'Reset'. A large blue curved arrow points from the 'Continue' button to a note box below. A red arrow with the number '10' points to the 'Continue' button.

Note: If your email address is being used in another user's profile, it's possible this page may display the wrong user name. If you still share an email with another user, please contact the state to have your email changed.



The screenshot shows the KS VRV web interface. At the top left is a logo with a flag and the text 'KS VRV'. To its right is the text 'KS VRV web' with a green heartbeat line. Below the logo is the text 'Go back to Login Page' and a button labeled 'Continue'. A red arrow with the number '11' points to the 'Continue' button.

Forgot Security Questions and Answers

1. If you forgot the answer to your security question, click the “**Forgot Answer?**” link.

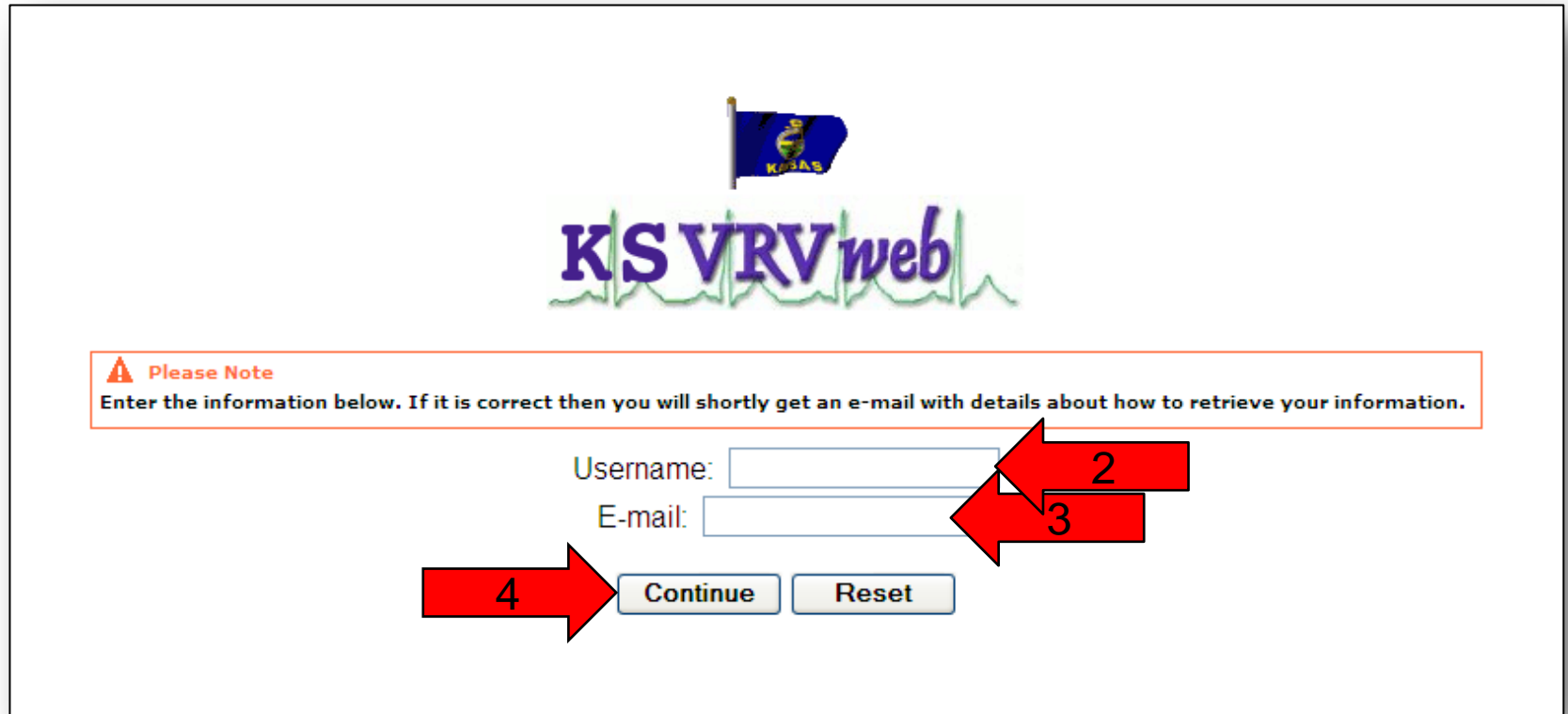


WARNING:
By using this system the user consents to the interception of information and/or the examination and retrieval of stored information by assigned staff of the Department of Health and Environment (KDHE). Only employees of the KDHE or people granted special permission by KDHE are authorized to use this network. Users authorized and unauthorized have no expectation of privacy. Unauthorized and improper use of this system may result in disciplinary action or criminal and civil penalties.


Where were you when you first heard about 9/11?


Answer: [Forgot Answer?](#)

2. Enter your username.
3. Enter the email address in your user profile.
4. Click the “**Continue**” button.



The image shows a web form for 'KS VRV web'. At the top is a logo featuring a blue flag with a yellow emblem and the text 'KSAS'. Below the logo, the text 'KS VRV web' is displayed in a stylized purple font with a green heartbeat line underneath. A red-bordered box contains a warning icon and the text: 'Please Note Enter the information below. If it is correct then you will shortly get an e-mail with details about how to retrieve your information.' Below this box are two input fields: 'Username:' and 'E-mail:'. To the right of the 'Username:' field is a red arrow labeled '2' pointing to the input box. To the right of the 'E-mail:' field is a red arrow labeled '3' pointing to the input box. Below the input fields are two buttons: 'Continue' and 'Reset'. A red arrow labeled '4' points to the 'Continue' button.

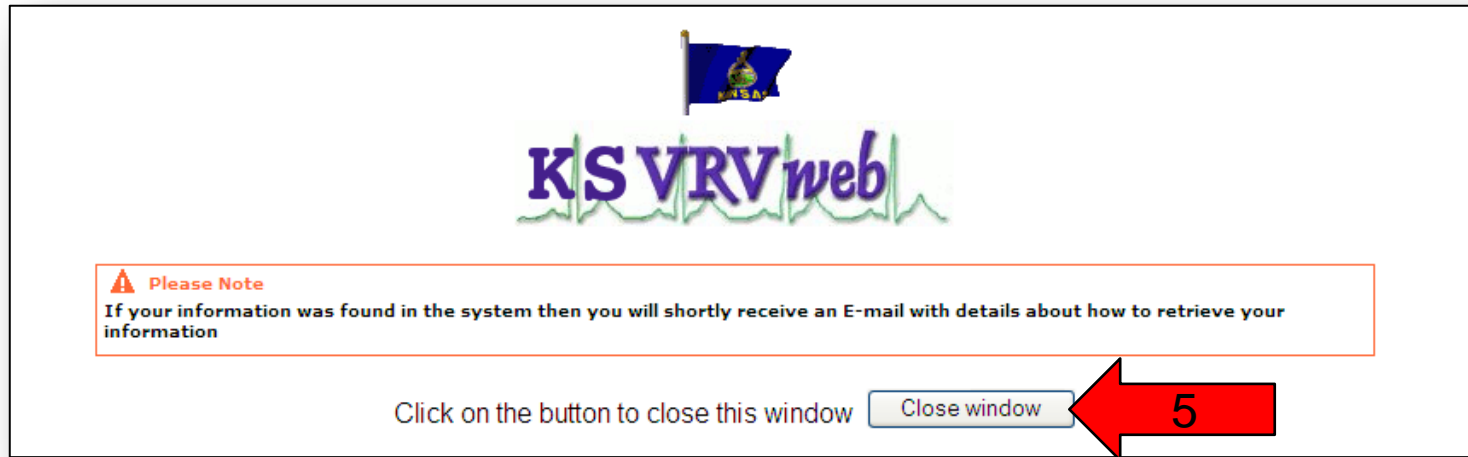

KS VRV web

 **Please Note**
Enter the information below. If it is correct then you will shortly get an e-mail with details about how to retrieve your information.

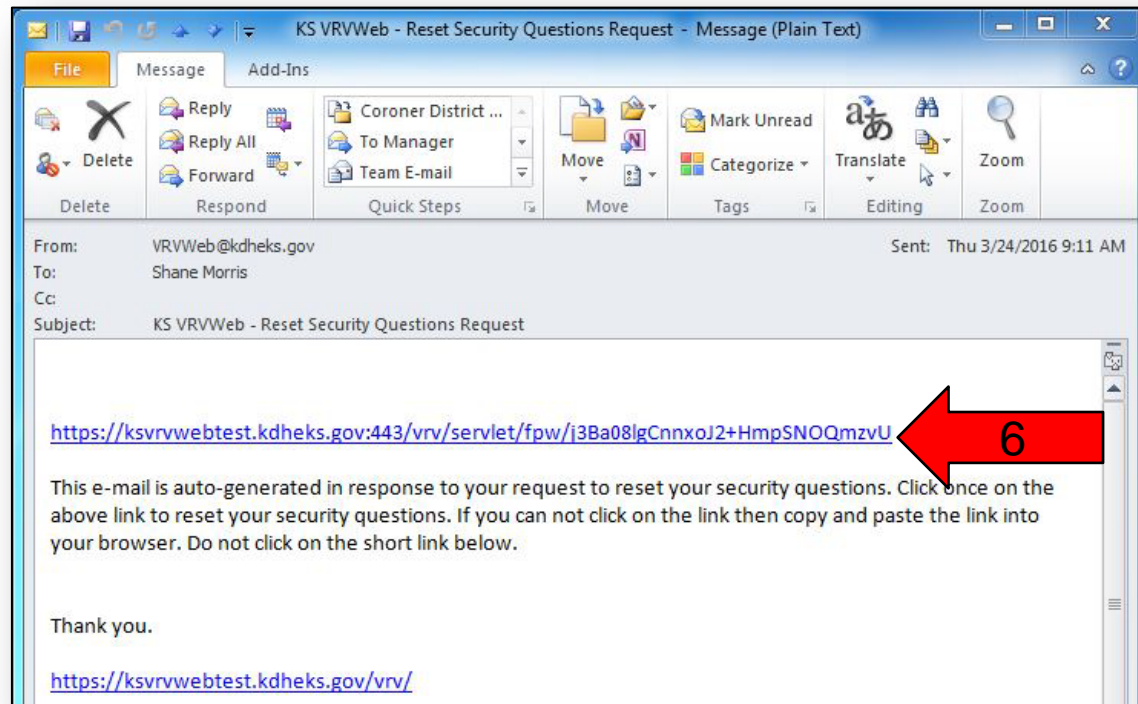
Username:

E-mail:

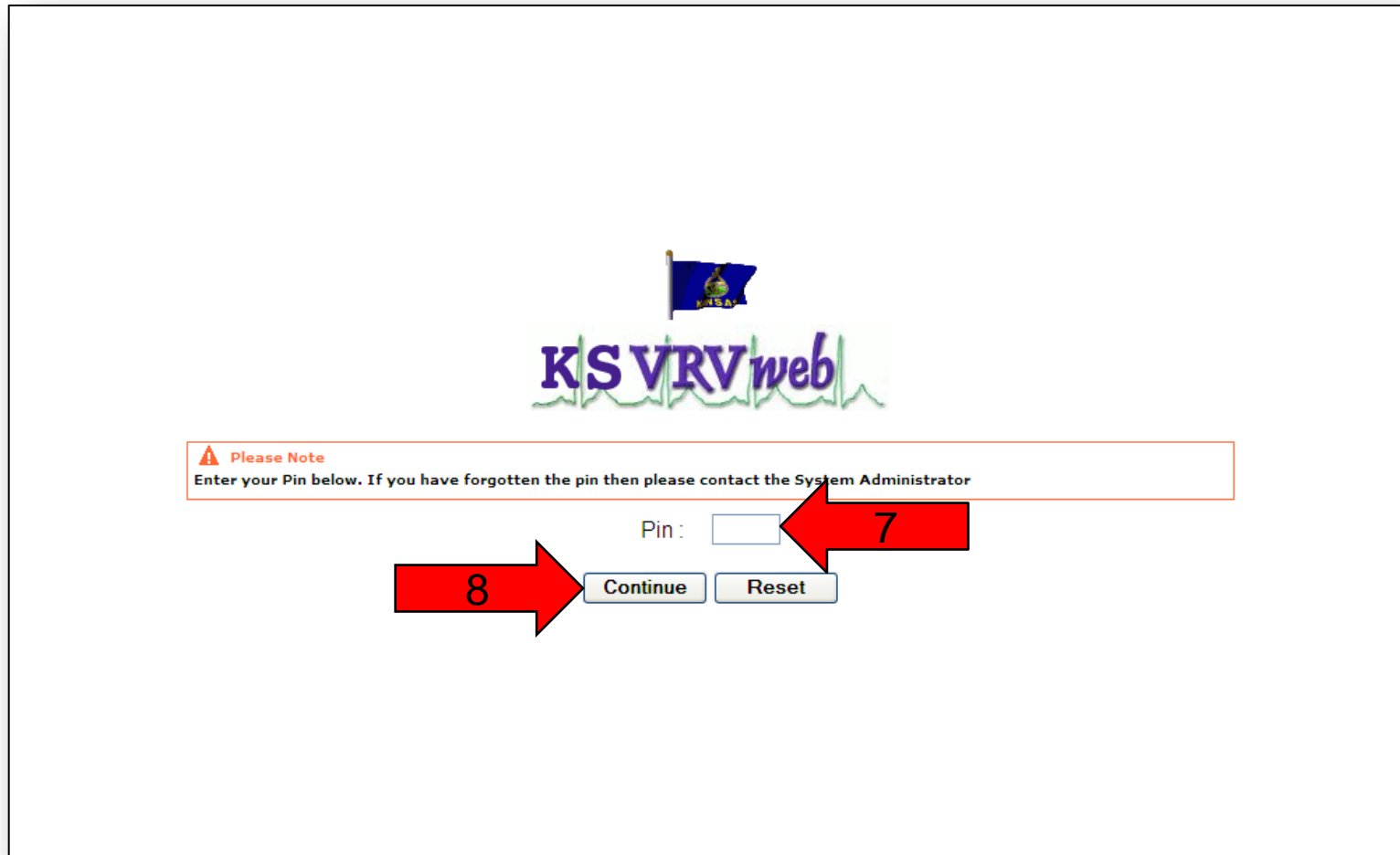
5. You should get a notification that if your information was correct, you will receive an email. Click the “**Close Window**” button.



6. Open your email that is tied to your user account. Open the email that you received from the VRVWeb and click on the top link.





7. Enter your PIN.
8. Click the “**Continue**” button.



The image shows a web interface for 'KS VRV web'. At the top center is a logo featuring a blue flag with a yellow emblem and the text 'KS VRV web' in purple, with a green waveform underneath. Below the logo is a red-bordered box containing a warning icon and the text: 'Please Note Enter your Pin below. If you have forgotten the pin then please contact the System Administrator'. Underneath this box is a label 'Pin :' followed by a text input field. A red arrow with the number '7' points to the input field. Below the input field are two buttons: 'Continue' and 'Reset'. A red arrow with the number '8' points to the 'Continue' button.

- 9. Use the pull down menu to select a question for Security Question 1.
- 10. Enter an answer for your first question.
- 11. Use the pull down menu to select a question for Security Question 2.
- 12. Enter an answer for your second question.
- 13. Use the pull down menu to select a question for Security Question 3.
- 14. Enter an answer for your third question.
- 15. Click the "Continue" button.



Please Note
Please Update your Security Information.

* Denotes Required Field

Security Question 1: -- Please choose --

Security Answer 1:

Security Question 2: -- Please choose --

Security Answer 2:

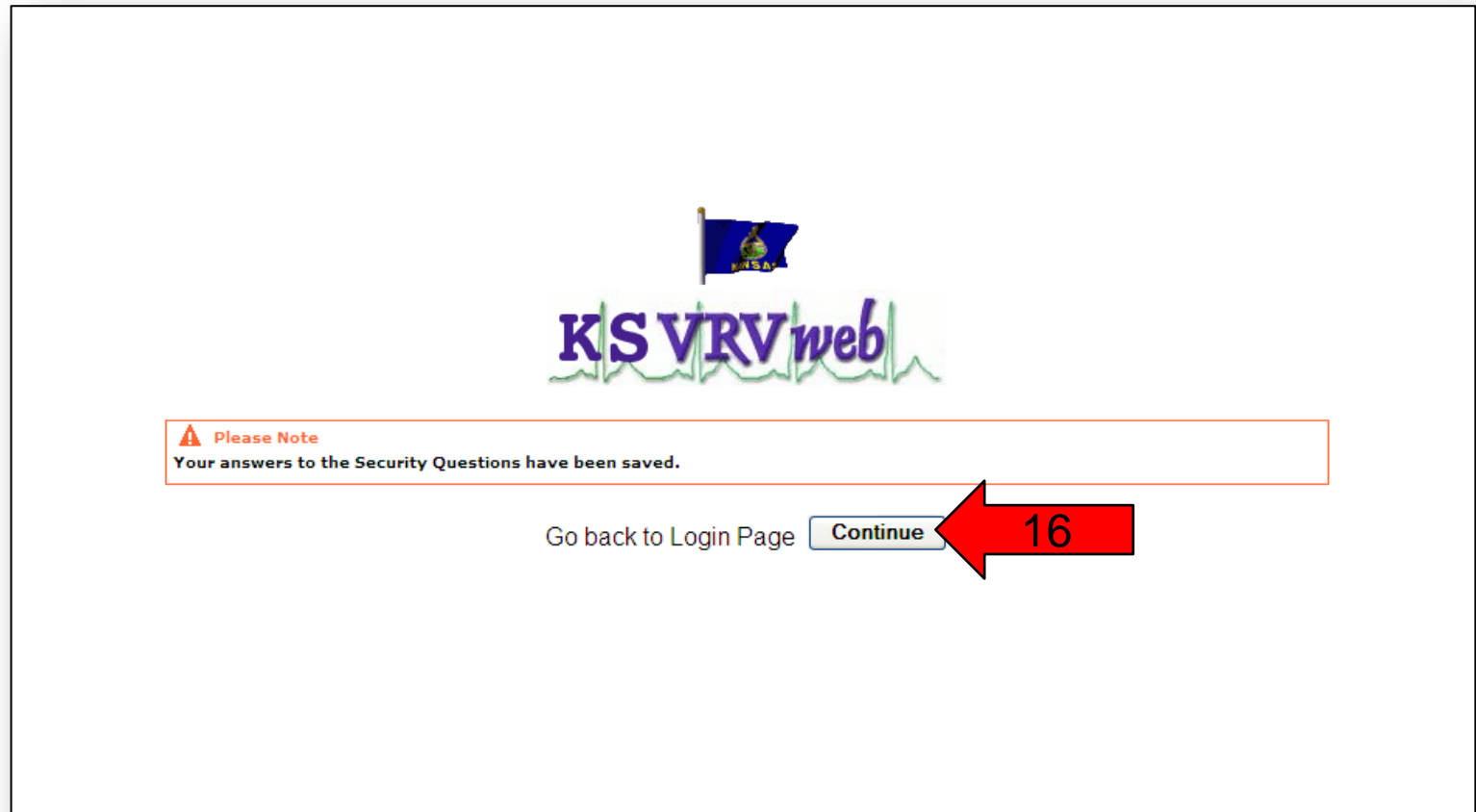
Security Question 3: -- Please choose --

Security Answer 3:

Continue

Reset

16. Click the “**Continue**” button to return to the login page and log in.



Forgot Image and Key Phrase

1. If you forgot your image or key, click the “**Forgot Image or Key?**” link.



WARNING:
By using this system the user consents to the interception of information and/or the examination and retrieval of stored information by assigned staff of the Department of Health and Environment (KDHE). Only employees of the KDHE or people granted special permission by KDHE are authorized to use this network. Users authorized and unauthorized have no expectation of privacy. Unauthorized and improper use of this system may result in disciplinary action or criminal and civil penalties.

Please Note
Identify your Image and Key. Press Cancel if they don't match.



brick wall
[Forgot Image or Key?](#)

2. Enter your username.
3. Enter the email address in your user profile.
4. Click the “**Continue**” button.



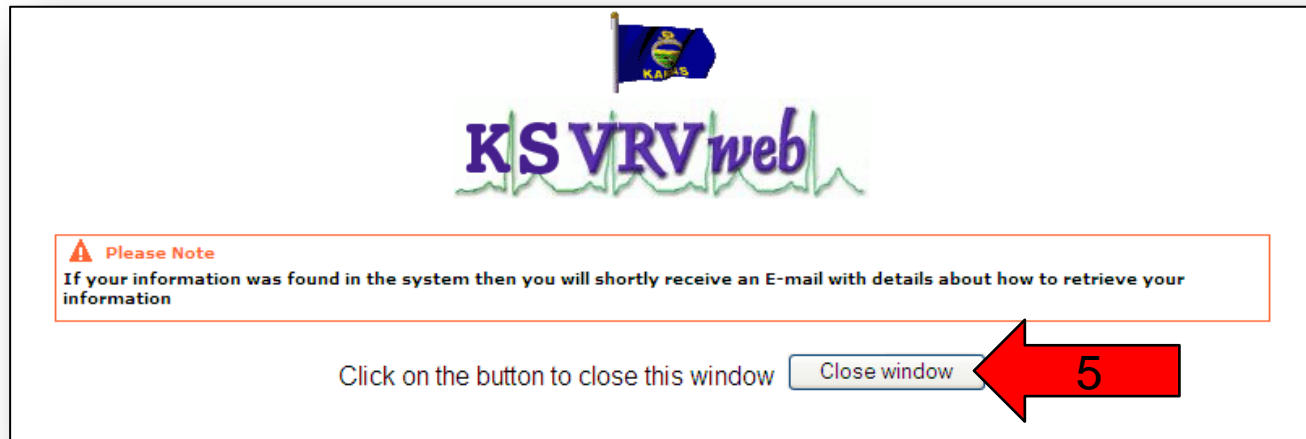
Please Note
Enter the information below. If it is correct then you will shortly get an e-mail with details about how to retrieve your information.

Username:

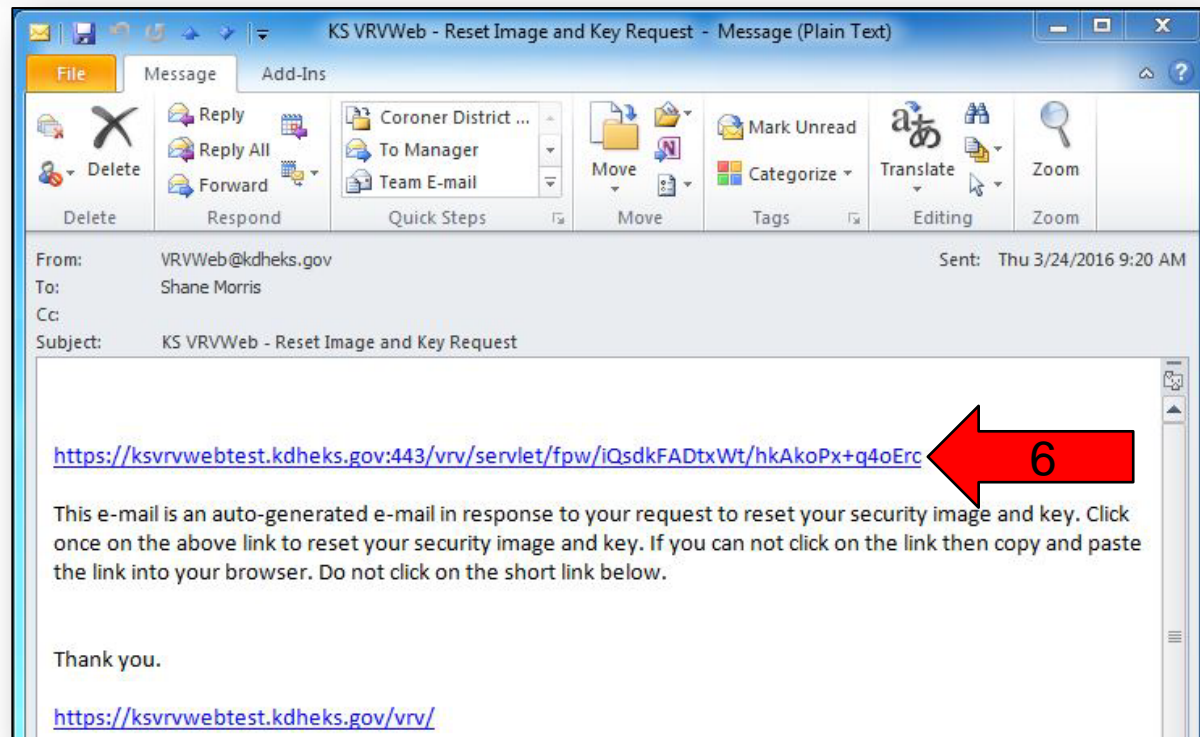
E-mail:

Red arrows indicating steps: Arrow 2 points to the Username field, Arrow 3 points to the E-mail field, and Arrow 4 points to the Continue button.

5. You will receive a notification that if your information was found in the system, you will shortly receive an email. Click the **“Close Window”** button.



6. Open your email that is tied to your user account. Open the email that you received from the VRVWeb and click on the top link.



7. Enter your PIN.
8. Click the “**Continue**” button.





The image shows a web interface for 'KS VRV web'. At the top center is a logo featuring a blue flag with a yellow emblem and the text 'KS VRV web' in a stylized purple font. Below the logo is a red-bordered box containing a warning icon and the text: 'Please Note Enter your Pin below. If you have forgotten the pin then please contact the System Administrator'. Underneath this box is a 'Pin:' label followed by a text input field. A red arrow with the number '7' points to the input field. Below the input field are two buttons: 'Continue' and 'Reset'. A red arrow with the number '8' points to the 'Continue' button.

9. Your current image will be shown. You must re-click it or click on a different image you would like to use.
10. Enter a new key phrase if necessary.
11. Click the “**Continue**” button.

You can cycle through images by clicking on these arrows.





















There are over 200 images to choose from.







* Denotes Required Field

Security Image: Click on any Image below to choose
< 1 of 11 >

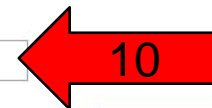
< 1 of 11 >

Key:

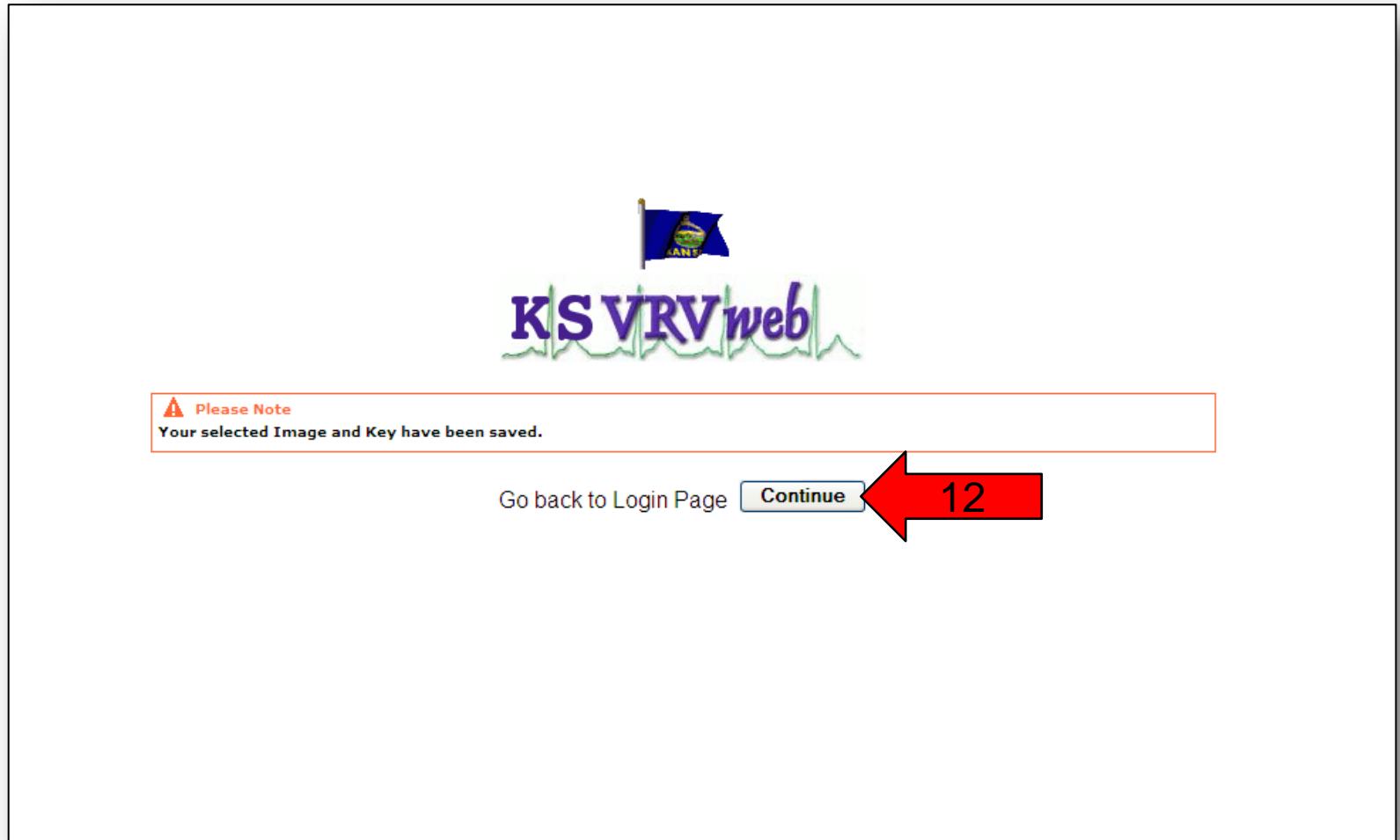




Your current selected image will appear here. If you want to retain this image or change the image, you must re-select.



12. Your image and key phrase have been saved. Click the **Continue** button to return to the login page and log in.



Forgot Password

1. If you forgot your password, click the “**Forgot Password?**” link.

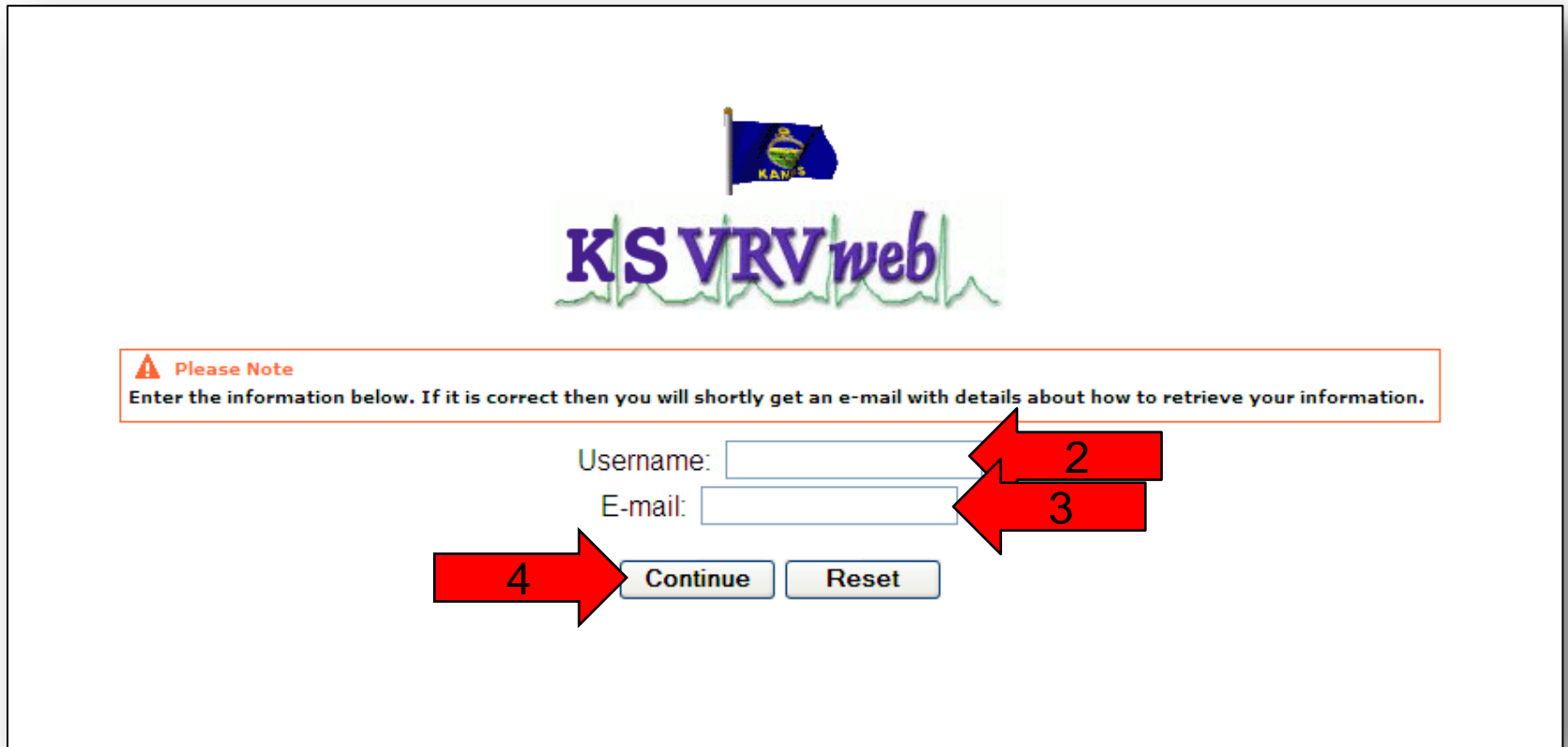


The image shows a web login page for 'KS VRRV web'. At the top center is a logo featuring a blue flag with a yellow shield and the letters 'K.A.H.S.' below it. Below the flag, the text 'KS VRRV web' is displayed in a stylized purple font with a green heartbeat line underneath. A red-bordered warning box is positioned below the logo, containing a warning icon and text about user consent and privacy. Below the warning box, there is a 'Password:' label followed by a text input field. To the right of the input field is a blue hyperlink labeled 'Forgot Password?'. A large red arrow with the number '1' inside points directly to the 'Forgot Password?' link. Below the input field and the link are two buttons: 'Log In' and 'Reset'.

WARNING:
By using this system the user consents to the interception of information and/or the examination and retrieval of stored information by assigned staff of the Department of Health and Environment (KDHE). Only employees of the KDHE or people granted special permission by KDHE are authorized to use this network. Users authorized and unauthorized have no expectation of privacy. Unauthorized and improper use of this system may result in disciplinary action or criminal and civil penalties.

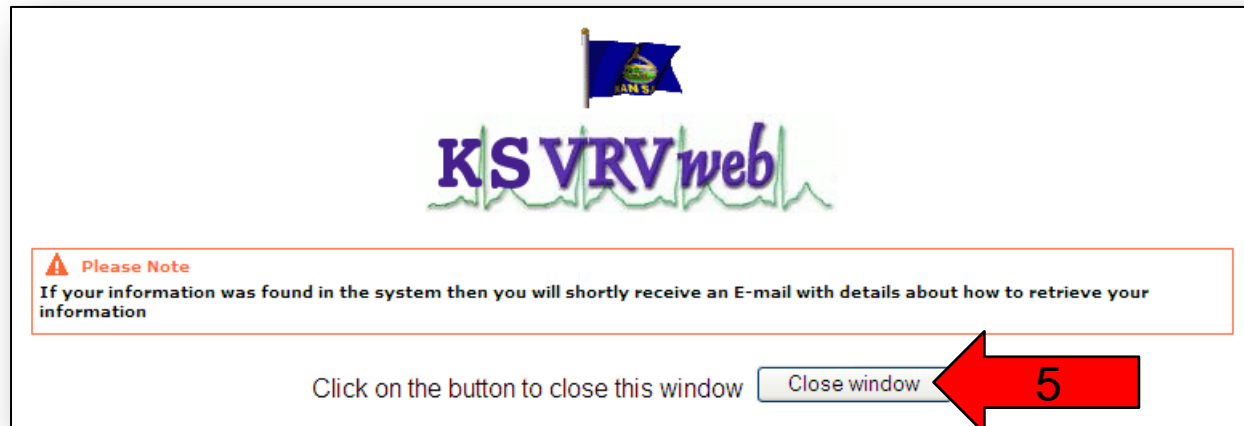
Password: [Forgot Password?](#)

2. Enter your username.
3. Enter the email address in your user profile.
4. Click the “**Continue**” button.

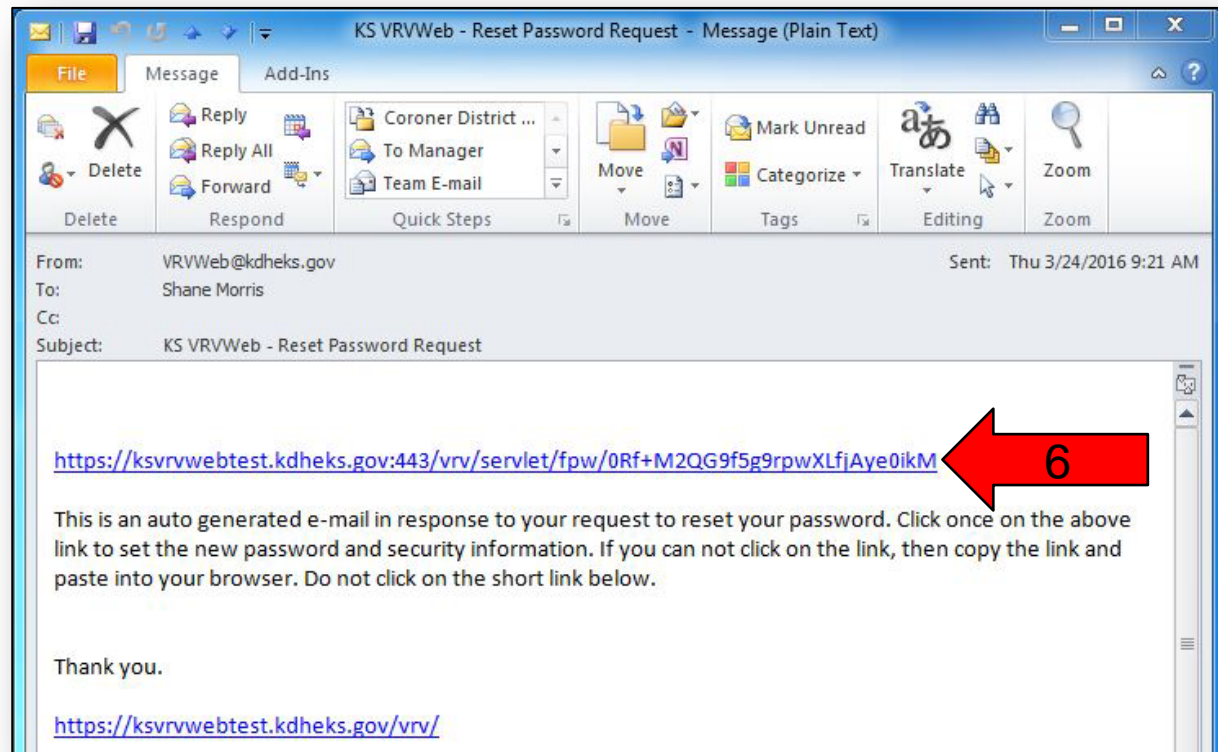


The image shows a web form for KS VRVweb. At the top center is a logo featuring a blue flag with a yellow emblem and the word "KANES" below it, with the text "KS VRVweb" in a stylized purple font underneath. Below the logo is a red-bordered box containing a warning icon and the text "Please Note" in red, followed by the instruction: "Enter the information below. If it is correct then you will shortly get an e-mail with details about how to retrieve your information." Below this box are two input fields: "Username:" and "E-mail:". To the right of the "Username:" field is a red arrow with the number "2" pointing to the input field. To the right of the "E-mail:" field is a red arrow with the number "3" pointing to the input field. Below the input fields are two buttons: "Continue" and "Reset". A red arrow with the number "4" points to the "Continue" button.

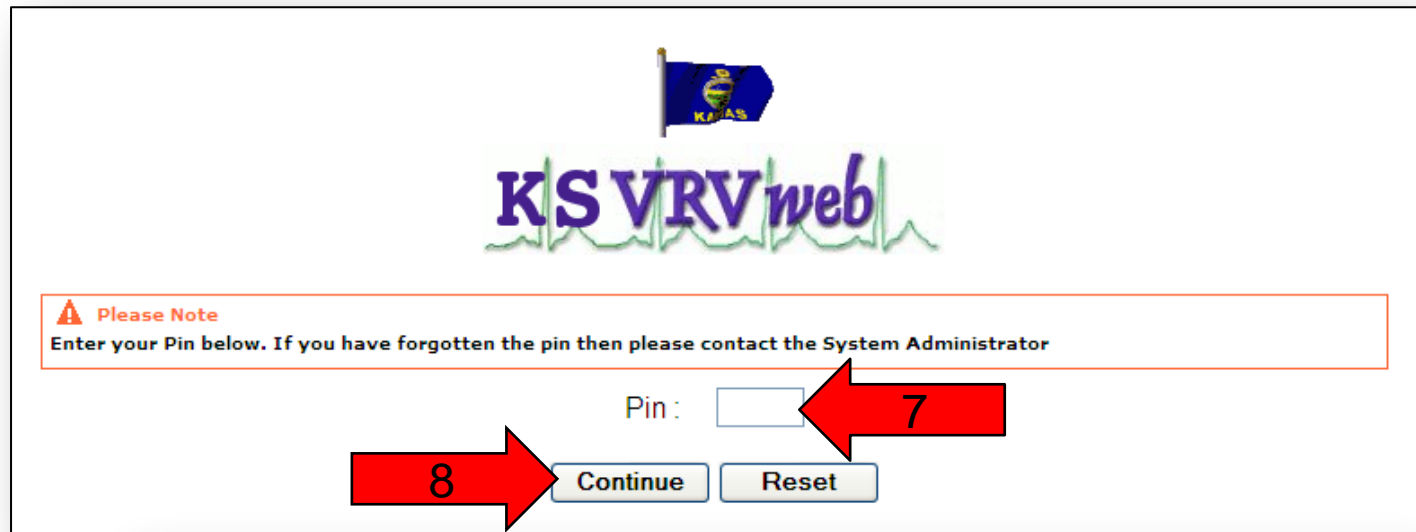
5. You will receive a notification that if your information was found in the system, you will shortly receive an email. Click the **“Close Window”** button.



6. Open your email account that is tied to your user account. Open the email you received from the VRVWeb and click on the top link.

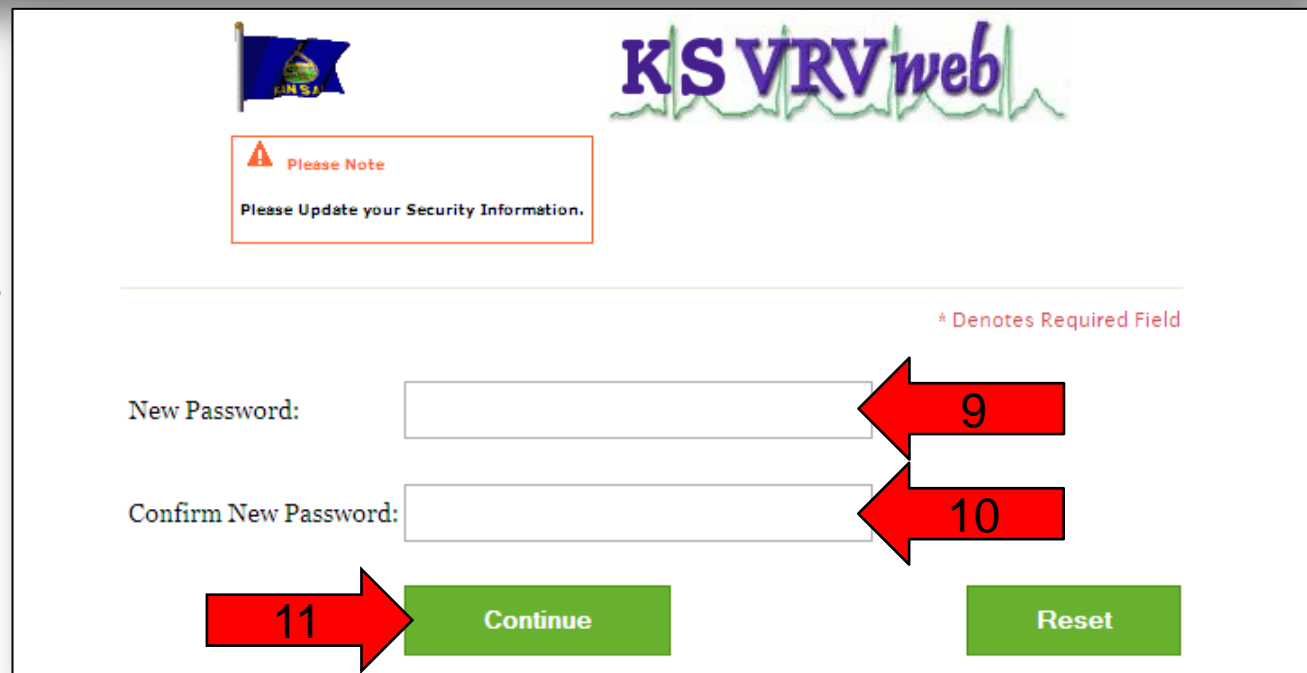


7. Enter your PIN.
8. Click the **"Continue"** button.



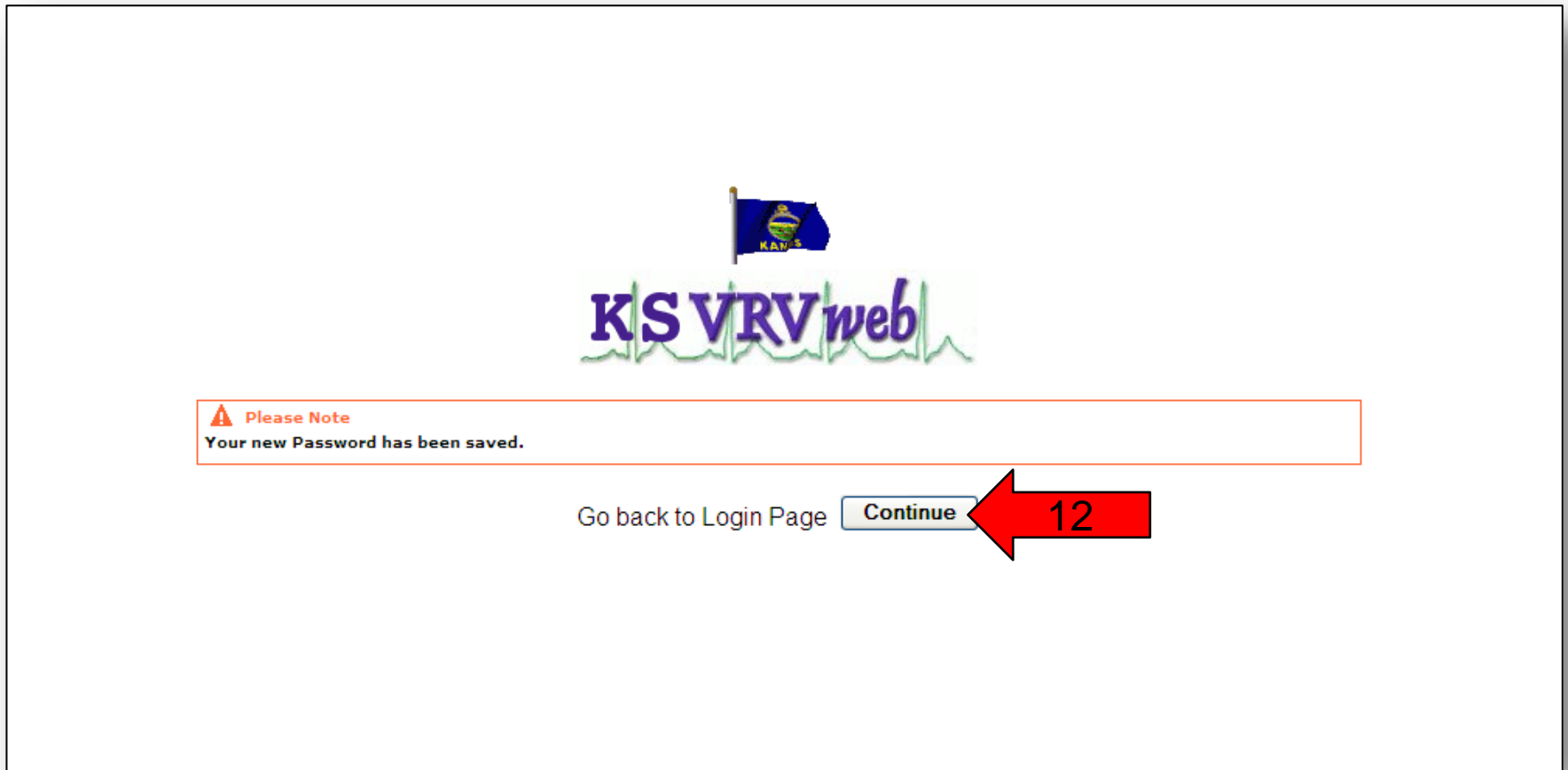
The screenshot shows the KS VRVweb login interface. At the top center is the KS logo (a blue shield with a yellow sun and the letters 'KS') above the text 'KS VRVweb' in a purple, stylized font. Below this is a red-bordered box containing a warning icon (a triangle with an exclamation mark) and the text 'Please Note' in red, followed by 'Enter your Pin below. If you have forgotten the pin then please contact the System Administrator' in black. Underneath the note is a label 'Pin:' followed by a white text input field. A red arrow with the number '7' points to this input field. Below the input field are two buttons: 'Continue' and 'Reset'. A red arrow with the number '8' points to the 'Continue' button.

9. Enter a new password.
10. Retype your new password.
11. Click the **"Continue"** button.



The screenshot shows the KS VRVweb password reset interface. At the top center is the KS logo (a blue shield with a yellow sun and the letters 'KS') above the text 'KS VRVweb' in a purple, stylized font. Below this is a red-bordered box containing a warning icon (a triangle with an exclamation mark) and the text 'Please Note' in red, followed by 'Please Update your Security Information.' in black. Below the note is a horizontal line, followed by the text '* Denotes Required Field' in red. Underneath are two labels: 'New Password:' and 'Confirm New Password:'. Each label is followed by a white text input field. A red arrow with the number '9' points to the 'New Password' input field, and a red arrow with the number '10' points to the 'Confirm New Password' input field. At the bottom are two green buttons: 'Continue' and 'Reset'. A red arrow with the number '11' points to the 'Continue' button.

12. Your new password should have been saved. Click the “**Continue**” button to return to the login page and log in.

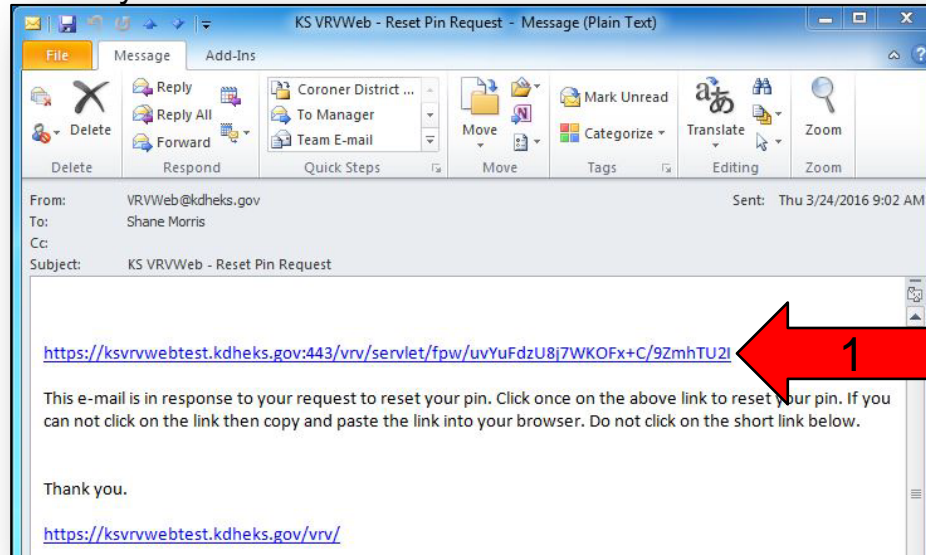


Vital Statistics Admin Resets Security Information Section

PIN Reset

If you have forgotten your PIN, you will need to contact Vital Statistics by telephone to have your PIN reset. After one of the system administrators has reset your PIN, you will receive an email notification.

1. Click the top link in the email you received.



2. Enter the temporary PIN that was given to you by the system administrator.
3. Click the "**Continue**" button.

A screenshot of the "KS VRVweb" PIN reset form. At the top is the "KS VRVweb" logo with a blue flag icon. Below the logo is a red-bordered box with a warning icon and the text: "Please Note: Enter your Pin below. If you have forgotten the pin then please contact the System Administrator". Below this box is a label "Pin :" followed by a text input field. A red arrow with the number "2" points to the input field. At the bottom of the form are two buttons: "Continue" and "Reset". A red arrow with the number "3" points to the "Continue" button.

4. Enter your current PIN; which is the PIN given to you by the system administrator.
5. Enter a new 4 digit PIN. We suggest using the last 4 digits of your Social Security Number.
6. Retype your new PIN for confirmation.
7. Click the “**Continue**” button.

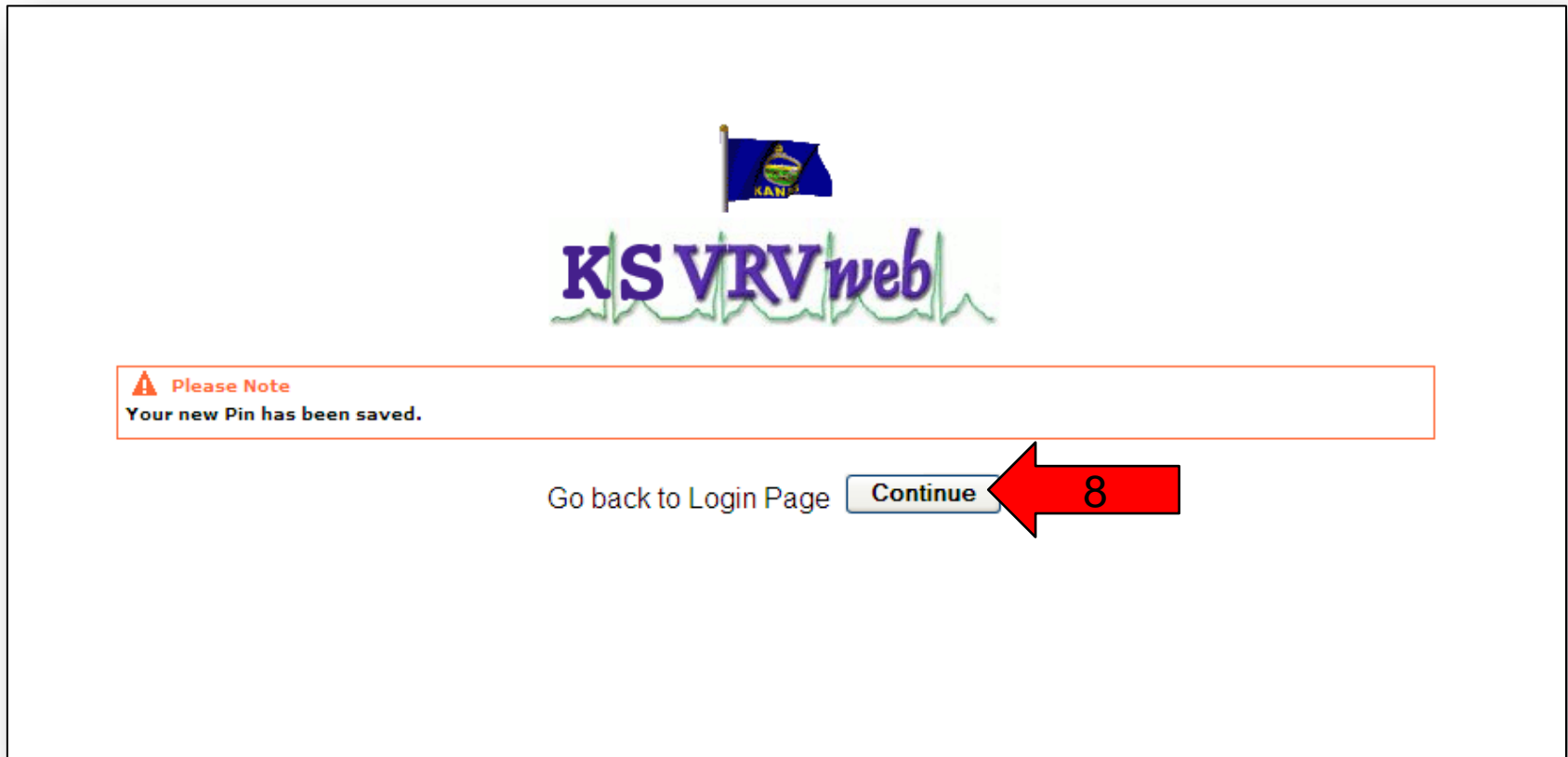
The screenshot shows the 'KS VRV web' login page. At the top left is a small flag icon. To its right is the text 'KS VRV web' with a green heartbeat line graphic. Below the flag is a red-bordered box containing a warning icon and the text: 'Please Note' and 'Please Update your Security Information.'.

Below this is a horizontal line, followed by the text '* Denotes Required Field' in red. The form contains three input fields with labels to their left:

- 'Current Pin:' followed by a text input field. A red arrow with the number '4' points to this field.
- 'New Pin (Last 4 digits of SSN recommended):' followed by a text input field. A red arrow with the number '5' points to this field.
- 'Confirm New Pin:' followed by a text input field. A red arrow with the number '6' points to this field.

At the bottom, there are two green buttons: 'Continue' and 'Reset'. A red arrow with the number '7' points to the 'Continue' button.

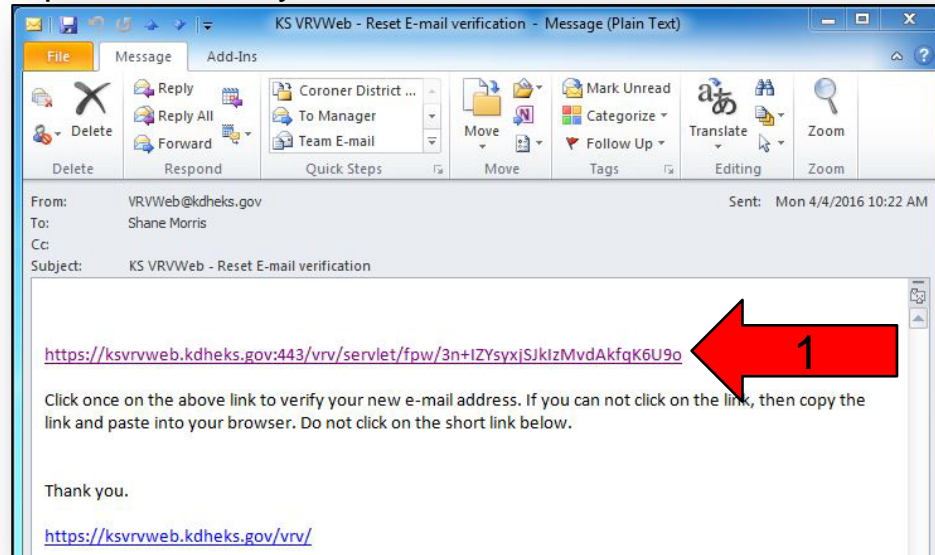
8. Click the “**Continue**” button to go back to the login page and log into the Kansas VRVWeb. Turn to page 11 for more instructions on how to log in if needed.



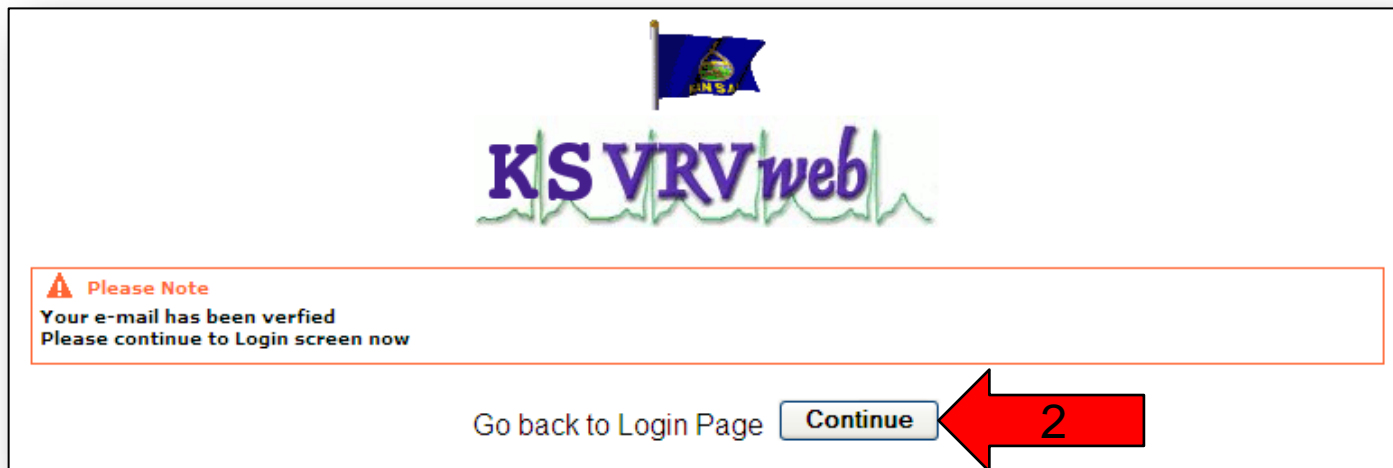
Email Reset

If you need assistance updating your email address, you will need to contact Vital Statistics by telephone and ask a system administrator to change your email address tied to your user account. You will then receive an email.

1. Log into your email and open the email you received from the VRVWeb and click the top link.



2. Your email has been verified. Click the "**Continue**" button to return to the login page and log into the Kansas VRVWeb. Turn back to page 11 to follow the login instructions if needed.



Menu Overview

After you log in, you will be presented with this screen. Here is an overview of some of the items on this screen.

- 1) Logged in as – This will show you what location you are entering records for. This should be your name and the doctor's name as the location. If you are the physician assistant and you are assigned to multiple physicians, then you will also see the “[change]” button. Click “[change]” if you want to do work for a different physician.
- 2) This will show the last date and time you were logged into the Kansas VRV Web. This message will go away as soon as you click on any of the menu options.

The screenshot shows the KS VRV web interface. At the top, there is a header bar. On the left, a box labeled 'Logged in as:' contains the text 'Shane Morris at DR SHANE MORRIS [change] Unit: DR SHANE MORRIS'. A red arrow labeled '1' points to this box. In the center, there is a logo for 'KS VRV web' with a green ECG line. Above the logo, a grey box says 'Your last login was at 01/06/2015 11:49:47'. A red arrow labeled '2' points to this box. On the right, the text 'Version: RLS-4-42-TEST1 01/06/2015 11:51 AM' and links 'Logout | Help | Accent Characters' are visible. Below the header, there is a 'Main' section with 'Death | System' links. Under 'Main', there is a table titled 'Open Cases' with columns 'Task Description' and 'Date Created'. The table has one row: 'Cause of Death: ANDERSON LUCAS 12/01/2014 null MORRIS' with a date of '12/19/2014' and links 'Details', 'Edit', and 'Process'. To the right of the table is a 'News' section titled 'News Message' with the text 'There is no news for Shane Morris'.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS

Your last login was at
01/06/2015 11:49:47

Version: RLS-4-42-TEST1
01/06/2015 11:51 AM
Logout | Help | Accent Characters

Main
Death | System

Open Cases


Task Description	Date Created
Cause of Death: ANDERSON LUCAS 12/01/2014 null MORRIS	12/19/2014

Details Edit Process


News
News Message
There is no news for Shane Morris

- 3) Date/Time – This should be the current date and time.
- 4) Open Task – This will show tasks that have yet to be completed or that need your attention. It will show you a description of the task and the date the task was created.
- 5) News Message – We put out a news message on the VRVWeb letting users know when the system will not be available, software changes, new physicians, etc. This is one of the ways that we communicate with you.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Your last login was at
01/06/2015 11:49:47



Version: RI S-4-42-TEST1
01/06/2015 11:51 AM

Logout | Help | Accent Characters

Main

Death | System

Open Cases

Task Description	Date Created	
Cause of Death: ANDERSON LUCAS 12/01/2014 null MORRIS	12/19/2014	Details Edit Process

News

News Message

There is no news for Shane Morris

January 09, 2015



Menu Overview

2

These next three pages will deal with buttons that you can click.

- 6) **“Logout”** option – This button will log you out of the VRVWeb and take you to a screen that shows you were logged out successfully.
- 7) **“Go Back to VRVWeb”** button - If you wish to log back into the VRVWeb or if someone else wants to log in using their user name and password, either of you can click on this button and you will be returned to the Log In screen.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-35
08/08/2012 09:10 AM
Logout | Help | Accent Characters

Main

Death | System



Open Cases

Task Description	Date Created	
Ready to Certify: SMITH LARRY 08/01/2012 null AAMORRIS	08/08/2012	Details Edit Process
Cause of Death: SMITH RACHEL 08/01/2012 null AAMORRIS	08/02/2012	Details Edit Process

News

New Message

TRAINING SITE You are using the VRVweb training site.



WARNING:

You must have express authority to access this system - otherwise accessing the system is a criminal offence. Changing the system or its contents without express authority is a criminal offence as well.



Username:

Password:

Log In

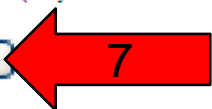
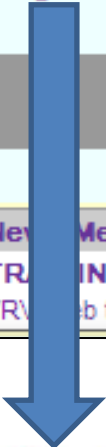
Reset

Forgot your password or password expired?
[click here](#)





You are logged out successfully. (or your session has expired)

Go Back To VRVWeb



- 8) **“Details”** – This button will bring up another window with a little more information. It will show the full name, a notes section, and the funeral home name.
- 9) **“Edit”** – This button allows the task description to be changed. *This button should be used by Vital Statistics only.*
- 10) **“Process”** – This button will take you into the record so that you can complete the missing information or required transaction. For more information on how to complete a record, please refer to the appropriate section.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-35
08/08/2012 09:10 AM
Logout | Help | Accent Characters

Main

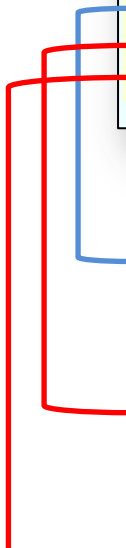
Death | System

Open Cases

Task Description	Date Created	
Ready to Certify: SMITH LARRY 08/01/2012 null AAMORRIS	08/08/2012	Details Edit Process
Cause of Death: SMITH RACHEL 08/01/2012 null AAMORRIS	08/02/2012	Details Edit Process

News

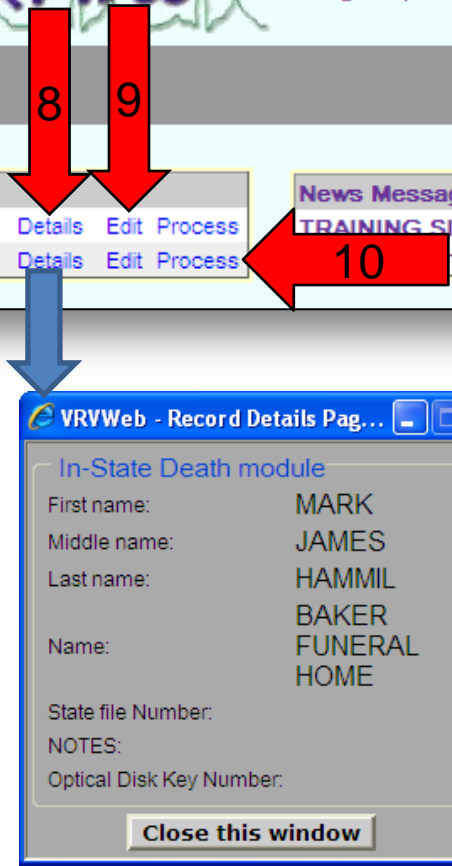
News Message
TRAINING SITE You are using the
ing site.



Task Description – You may see one of two different task descriptions. Ready to Certify or Cause of Death.

Ready to Certify means the cause of death information has been entered and it's ready to be certified (signed electronically).

Cause of Death means the cause of death information has yet to be entered.



VRVWeb - Record Details Pag...

In-State Death module

First name: MARK

Middle name: JAMES

Last name: HAMMIL

Name: BAKER FUNERAL HOME

State file Number:

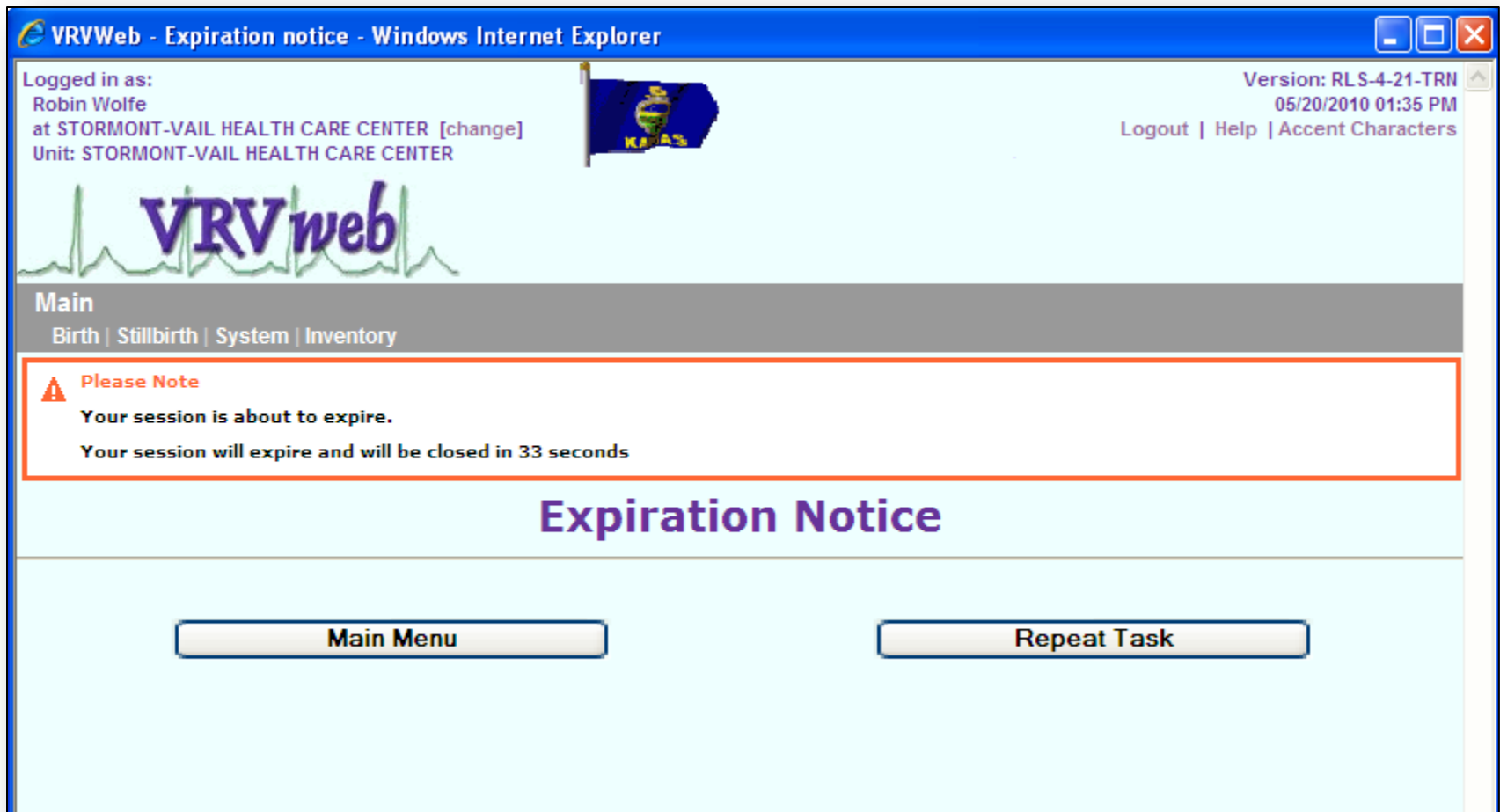
NOTES:

Optical Disk Key Number:

Close this window

If you have been logged in and there has been no activity for 30 minutes, you will receive this message. You will then have 40 seconds to click on a task button, such as the “Main Menu” or the “Repeat Task” button. If you do not click any task buttons within 40 seconds, you will be logged out of the VRVWeb.

The system tracks how long the system has set idle (not entering within the system). We always recommend that if you must leave your PC or stop entering for whatever reason while you are entering a record, that you save the record. Otherwise, you may lose the information you have entered.




Open Cases

Completing the Cause of Death and Certifying (signing) by Physician

Under the “**Open Cases**” tab, records will appear after the funeral home or hospital has started the death certificate and selected you as the certifying physician or when another physician or coroner district has transferred a case to you. Once they have saved the record, you will receive an email notification and the record will appear under ‘Open Cases’ with task description as Cause of Death or Case Pending.

- 1) Click on “**Process**” for the death you want to access to complete the cause and certify the record.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-27-TEST
11/02/2011 09:06 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main
Death | System

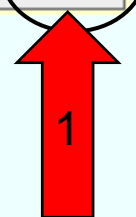
Open Cases

Task Description	Date Created	
Cause of Death: RELINQUISH TESTING 10/01/2011 null MORRIS	10/06/2011	Details Edit Process
Cause of Death: IOWA CATHY 10/01/2011 null MORRIS	10/05/2011	Details Edit Process

News

News Message

Test site You are using VRVWeb1 test site



2) Once you have accessed the record you can click through each screen if you choose, or you can go directly to Screen 5 – Cause of Death by clicking the tab “5 CAUSE OF DEATH”.

On screens 1-4 and screen 8, you are able to see the information but not allowed to change anything. These screens are completed by the funeral home or hospital.

In-State Death – First name:DANIEL Last name:TESTING Date of death:07/01/2011

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH

6 CONDITIONS OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE

1-3. Decedent's Name and Sex

First name

DANIEL

Middle name

VRV

Last name

TESTING

Suffix

Select

Sex

Male

☐ Check if current last name equals last name prior to first marriage

Last name prior to first marriage

4-5. Date of Death and SSN

Date of death

07/01/2011

Found

☐

On or about

☐

Social security number

999-99-9999

SSN verification status

Select

6-7. Date of Birth and Age

Date of birth

01/01/1960

Age measure

Years

Age on last birthday (years)

51

Age on last birthday (months)

Age on last birthday (days)

Age on last birthday (hours)

Age on last birthday (minutes)

Previous

Next

Finish

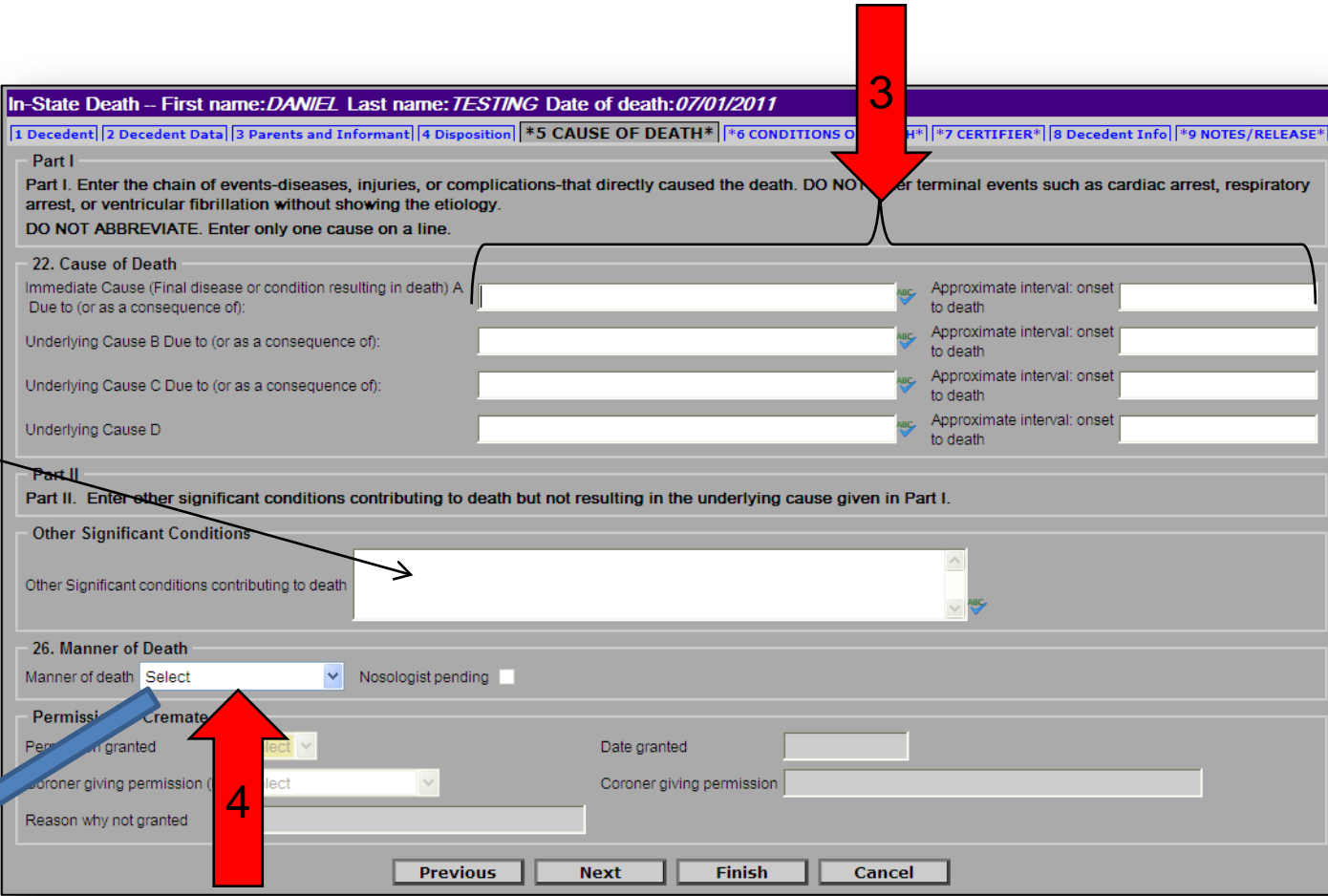
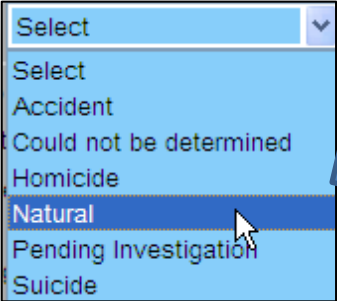
Cancel

- 3) Enter the “Cause of Death” on lines A-D. This screen was designed to look like the hard copy death certificate.
- 4) Select the “Manner of Death” from the drop down menu. You must select “Natural” for the manner of death.

Note: Do not use these symbols. <, >, or &

You will need to type out “Less Than”, “Greater Than”, or “And” instead of using the associated symbols.

When entering multiple other conditions contributing to death, do not hit “Enter” on your keyboard. Put a semi colon then a space between each cause. EXAMPLE: Dementia; CVD; CAD



5) After this screen has been completed, click on the “Next” button or “6 CONDITION OF DEATH” to move to the next screen.

Note: There are built in edits and spell checks. It is best to spell out the condition and not use abbreviations (i.e. CRF could stand for Cardio Respiratory Failure or Chronic Renal Failure). Cardiac Arrest, Cardio Respiratory Arrest, Old Age, Failure to Thrive, etc. should not be the only entry on the cause. You need to enter the underlying reason (what caused) or “Unknown Cause”. Also, make sure to put primary site for any cancer condition. If unknown, make sure to enter “Unknown primary” beside the immediate cause or in a “Due to” position. If the system has determined that there is a spelling mistake or an unknown abbreviation, you will get a message at the top of the screen after you click on the “Next” button.

Check term or spelling

Immediate Cause (Final disease or condition resulting in death) A

CRF

Other Significant conditions contributing to death

DM

Abbreviations

Do not use abbreviations to report cause of death. We think that the full term for (e.g., AAA) is (e.g., abdominal aortic aneurysm)? Indicate which term is correct if multiple meanings are possible, or specify what you meant by the abbreviation if we have not suggested the correct full term.

Immediate Cause (Final disease or condition resulting in death) A

CRF = CARDIORESPIRATORY FAILURE | CHRONIC RENAL FAILURE

Other Significant conditions contributing to death

DM = DIABETES MELLITUS

In-State Death -- First name: TEST Last name: MESSAGE Date of death: 02/18/2016

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH

6 CONDITION OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE

Part I

Part I. Enter the chain of events-diseases, injuries, or complications-that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line.

22. Cause of Death

Immediate Cause (Final disease or condition resulting in death) A Due to (or as a consequence of):

CRF

Approximate interval: onset to death

MONTHS

Underlying Cause B Due to (or as a consequence of):

Approximate interval: onset to death

Underlying Cause C Due to (or as a consequence of):

Approximate interval: onset to death

Underlying Cause D

Approximate interval: onset to death

Part II

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

Other Significant Conditions

DM TYPE 2

Other Significant conditions contributing to death

26. Manner of Death

Manner of death

Natural

Nosologist pending

Permission to Cremate

Permission granted

Select

Date granted

Coroner giving permission (list)

Select

Coroner giving permission

Reason why not granted

Funeral Home: Cancel Cremation request

Previous

Next

Finish

Cancel

April 4, 2016

Physician Completing Cause of Death
and Certifying

4

6) Fill out the Death Details. Use the pull down menu to select the appropriate answer. If female, you will need to answer if the decedent was pregnant at the time of death.

These are the pull down menus for the Death Details.

Select

Select

Yes

No

Unknown

Select

Select

Yes

No

Not applicable

Unknown

Select

Select

Yes

No

Unknown

Select

Select

Yes

No

Probably

Unknown

Select

Not pregnant within the past Year

Pregnant at the time of death

Not pregnant, but pregnant within 42 days of death

Not pregnant, but pregnant 43 days to 1 year before death

Not applicable

Unknown

In-State Death – First name: DANIEL Last name: TESTING Date of death: 07/01/2011

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH

6 CONDITIONS OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE

23-25. Death Details

Was an autopsy performed?

Yes

Were autopsy findings available to complete the cause of death?

Select

Was coroner contacted?

Yes

Did tobacco use contribute to death?

Select

If female, select one from list

Select

27. Injury

Check if Injury Occurred

☐

Date of injury (MMDDYYYY)

Approx. date of injury

☐

Time of injury, hours

Time of injury, minutes

....Time indicator

Select

Approx. injury time

☐

Injury at work?

Select

Describe how injury occurred

28a-28c. Date and Time Death Pronounced

Date pronounced dead (MMDDYYYY)

07/01/2011

Time pronounced, hours

8

Time pronounced, minutes

0

....Time pronounced, indicator

AM

Approx. time pronounced

☐

Actual or presumed time of death, hours

8

Actual or presumed time of death, minutes

0

....Time indicator

AM

Approx. time of death

☐

28d-28e. Person Pronouncing Death

First name

Middle name

Last name

Suffix

Select

License number

6

April 4, 2016

Physician Completing Cause of Death and Certifying

5

- 7) Enter the date for the “**Date and Time Death Pronounced**” section.
- Enter the exact month, day, and year the death was pronounced. You must enter a 2 digit month, a 2 digit day, and a 4 digit year, (EXAMPLE: 05212010) then hit the tab key. The system will format the field by putting in the slashes for you.
 - Pay particular attention to the entry of month, day, or year when the death occurs around midnight or on December 31st. Consider a death at midnight to have occurred at the beginning of the next day.

In-State Death – First name: DANIEL Last name: TESTING Date of death: 07/01/2011

1 Decedent | 2 Decedent Data | 3 Parents and Informant | 4 Disposition | 5 CAUSE OF DEATH* | **6 CONDITIONS OF DEATH*** | 7 CERTIFIER* | 8 Decedent Info | 9 NOTES/RELEASE*

23-25. Death Details

Was an autopsy performed?

Were autopsy findings available to complete the cause of death?

Was coroner contacted?

Did tobacco use contribute to death?

If female, select one from list

27. Injury

Check if Injury Occurred ☐

Date of injury (MMDDYYYY)

Approx. date of injury ☐

Time of injury, hours

Time of injury, minutes

....Time indicator

Approx. injury time ☐

Injury at work?

Describe how injury occurred

28a-28c. Date and Time Death Pronounced

Date pronounced dead (MMDDYYYY)

Time pronounced, hours

Time pronounced, minutes

....Time pronounced, indicator

Approx. time pronounced ☐

Actual or presumed time of death, hours

Actual or presumed time of death, minutes

....Time indicator

Approx. time of death ☐

28d-28e. Person Pronouncing Death

First name

Middle name

Last name

Suffix

License number

- 8) Enter the time pronounced and actual or presumed time of death for the **“Date and Time Death Pronounced”** section.
- Enter the exact time (2 digit hour and 2 digit minute) the death was pronounced according to local time, (EXAMPLE: 01 for the hours then hit the tab key and 20 for the minutes then hit the tab key again).
 - Enter 12 noon as 12 for the hours and 00 for the minutes and then select “Noon” as the time indicator. One minute after 12 noon is entered as 12 for the hours and 01 for the minutes with “PM” as the time indicator.
 - Enter 12 midnight as 12 for the hours and 00 for the minutes and select “Midnight” as the time indicator. One minute after 12 midnight is entered as 12 for the hours and 01 for the minutes with “AM” as the time indicator.
 - If this is the approximate time, check the box for “Approx. time pronounced” or “Approx. time of death”.
 - If the time is unknown, type all 9’s for the hours and minutes and unknown for the time indicator.

In-State Death – First name: DANIEL Last name: TESTING Date of death: 07/01/2011

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH

6 CONDITIONS OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE

23-25. Death Details

Was an autopsy performed?

Yes

Were autopsy findings available to complete the cause of death?

Select

Was coroner contacted?

Yes

Did tobacco use contribute to death?

Select

If female, select one from list

Select

27. Injury

Check if Injury Occurred

Date of injury (MMDDYYYY)

Approx. date of injury

Time of injury, hours

Time of injury, minutes

....Time indicator

Select

Approx. injury time

Injury at work?

Select

Describe how injury occurred

28a-28c. Date and Time Death Pronounced

Date pronounced dead (MMDDYYYY)

07/01/2011

Time pronounced, hours

8

Time pronounced, minutes

0

....Time pronounced, indicator

AM

Approx. time pronounced

Actual or presumed time of death, hours

8

Actual or presumed time of death, minutes

0

....Time indicator

AM

Approx. time of death

28d-28e. Person Pronouncing Death

First name

Middle name

Last name

Suffix

Select

License number

April 4, 2016

Physician Completing Cause of Death
and Certifying

7

- 9) You may enter the **“Person Pronouncing Death”**. This field is completely optional.
- 10) Once you have entered all the necessary information on this page, click on the **“Next”** button at the bottom of the page or **“7 CERTIFIER”** at the top of the page.

In-State Death -- First name: DANIEL Last name: TESTING Date of death: 07/01/2011

1 Decedent | **2 Decedent Data** | **3 Parents and Informant** | **4 Disposition** | ***5 CAUSE OF DEATH*** | ***6 CONDITIONS OF DEATH*** | ***7 CERTIFIER*** | **8 Decedent Info** | ***9 NOTES/RELEASE***

23-25. Death Details

Was an autopsy performed?

Were autopsy findings available to complete the cause of death?

Was coroner contacted?

Did tobacco use contribute to death?

If female, select one from list

27. Injury

Check if Injury Occurred ☐

Date of injury (MMDDYYYY)

Approx. date of injury ☐

Time of injury, hours

Time of injury, minutes

...Time indicator

Approx. injury time ☐

Injury at work?

Describe how injury occurred

Place of injury-residence, farm, factory, etc. Specify

Address number

Pre-directional

Street name

Street designator, e.g., St, Ave, etc.

Post-directional

Residential unit

Apt or Rm or Suite, No. only

Country

State/province

City or town

Zip code

28a-28c. Date and Time Death Pronounced

Date pronounced dead (MMDDYYYY)

Time pronounced, hours

Time pronounced, minutes

...Time pronounced, indicator

Approx. time pronounced ☐

Actual or presumed time of death, hours

Actual or presumed time of death, minutes

...Time indicator

Approx. time of death ☐

28d-28e. Person Pronouncing Death

First name

Middle name

Last name

Suffix

License number

9

10

In-State Death -- First name: DANIEL Last name: TESTING Date of death: 07/01/2011

[1 Decedent](#) | [2 Decedent Data](#) | [3 Parents and Informant](#) | [4 Disposition](#) | [*5 CAUSE OF DEATH*](#) | [*6 CONDITIONS OF DEATH*](#) | [*7 CERTIFIER*](#) | [8 Decedent Info](#) | [*9 NOTES/RELEASE*](#)

29. Person Completing Cause of Death

Certifier designation list: **Certifying physician** (selected)

Physician list: Select

Coroner list: Select

First name: SHANE

Middle name: ALLEN

Last name: AAMORRIS

Suffix: Select

Title: **Certifying physician** (selected)

Other title: Select

Address number: [blank]

Pre-directional: [blank]

Street name: JACKSON

Street designator: ST

Post directional: Select

Residential unit: STE

Apt or Rm or Suite, No. only: 110

Rural route and/or box No.: [blank]

P.O. box, No. only: [blank]

Country: UNITED STATES

State/province: KANSAS

City or town: TOPEKA

Zip code: 66612

Medical license number: 98765

Physician online (Y/N)-phone: Y - 785-555-1234

Coroner online (Y/N)-phone: Select

Date signed by certifier (MM/DD/YYYY): [blank]

Coroner Case Info

Coroner case number: [blank]

Need to Transfer Case?

Check to transfer case: ☐

Transfer to physician list: Select

Transfer to this district (number list): Select

Transfer to this district (county list): Select

Need to Relinquish Case?

Check to relinquish case: ☐

Reason: [blank]

30. Date Filed By State Registrar

Date filed by state registrar (MMDDYYYY): [blank]

Previous Next Finish Cancel

11) Use the pull down menu to select **"Certifying Physician"** or **"Pronouncing & Certifying Physician"**.

12) Click on the **"9 NOTES/RELEASE"** at the top of the screen.

Once you have completed the medical portion on screen 5 and the condition of death on screen 6, you are ready to certify the medical information.

- 13) You may enter information into the “Notes” section. The notes section is there so that you can provide any information that you think might help clarify any unusual or strange information listed on the death certificate. This section will not print on the death certificate.
- 14) Check the box next to “Ready to certify medical information”.
- 15) Click on the “Finish” button at the bottom.

In-State Death – First name: DANIEL Last name: TESTING Date of death: 07/01/2011

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH

6 CONDITIONS OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE

Notes

NOTES

Amendment Info

☐ Check if record has been amended

Date of Amendment (MMDDYYYY)

Filing Information

Release record to State ☐

Medical info status Cause of Death

How filed

SSN Verification Info

Number of verification tries 0

Date of last verification attempt

Duplicate Record Status

Duplicate record status Unique identity

Ready to Certify

☒ Ready to certify medical information

Accept/Reject

☐ Check to reject personal information

☐ Check to reject medical information

Case History

07/29/2011 User ID: 5102 Case started – 07/29/2011
User ID: 5102 Assigns case to SHANE ALLEN
AAMORRIS

Previous

Finish

Cancel

You now have the option to print the Unofficial Copy of the Death Certificate, certify the cause of death, or to return to the death record to make a change.

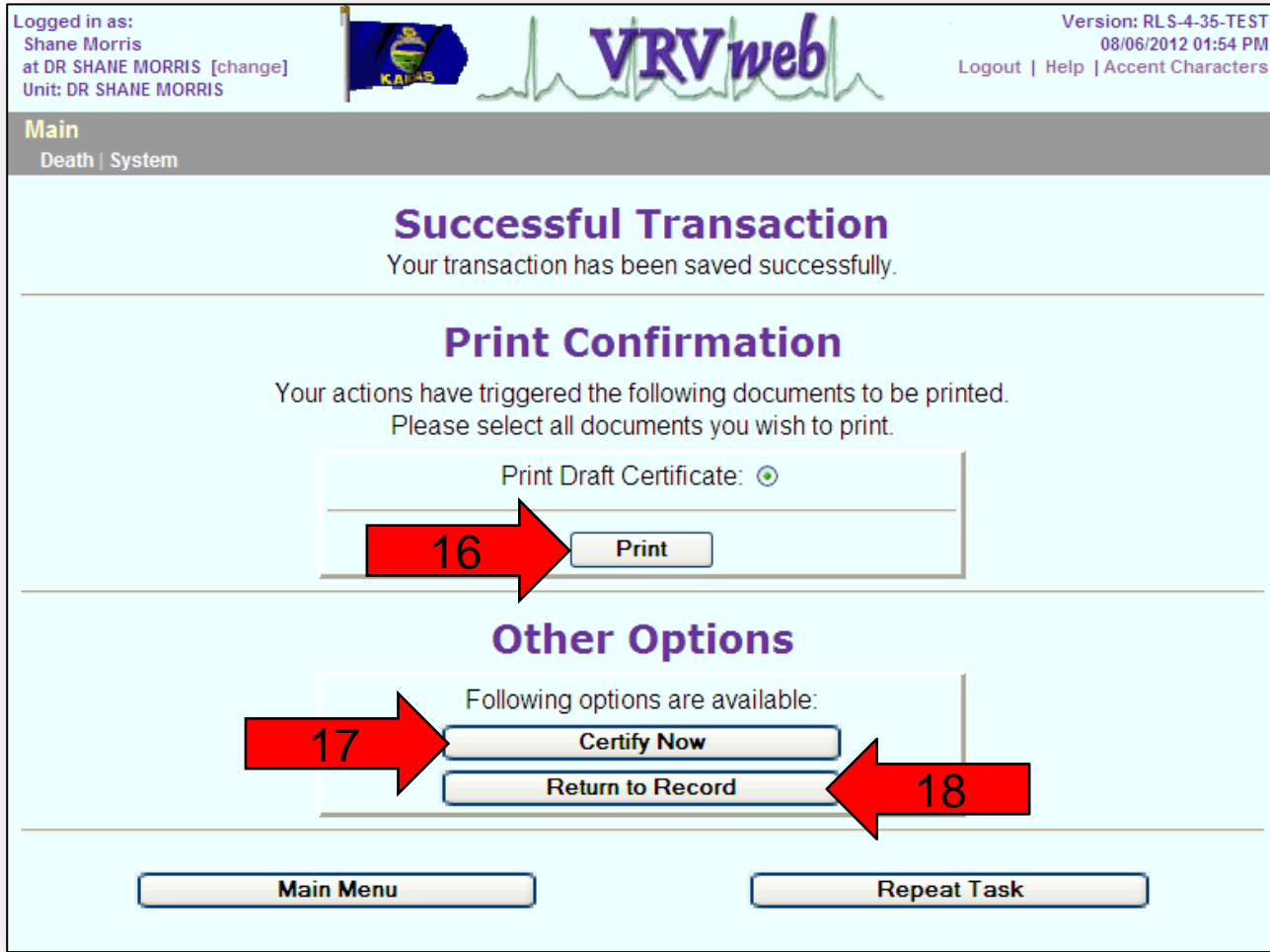
16) If you want to print an unofficial copy of the death certificate, click the **“Print”** button and turn to page 16.

OR

17) If you want to certify the cause of death, click on the **“Certify Now”** button and turn to the next page.


OR

18) If you want to return to the record to make a change, click on the **“Return to Record”** button and then turn back to page 2 of these instructions.



19) Click the “Activate Signing” button to start the process to electronically sign the death record.

Logged in as:
Sam Morse
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



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01/30/2013 04:13 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main

Death | System

Electronic Signing - Confirm

As the:

-

-

CERTIFYING PHYSICIAN of the death record; to the best of my knowledge, death occurred due to the cause(s) and manner stated.

-

PRONOUNCING "&" CERTIFYING PHYSICIAN of the death record; to the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated.

-

CORONER of the death record; on the basis of my examination and/or investigation, in my opinion, death occurred at the time, date, and place and due to the causes(s) and manner stated.

--

CERTIFIER of the stillbirth (fetal death) record; I certify that this delivery occurred on the date stated and the fetus was born dead.

-

Clicking here constitutes my official signature certifying the cause of death information for the decedent's death or fetal death record.

19

Activate Signing

Continue

- 20) Enter your PIN.
- 21) Click the "Continue" Button.

Logged in as:
Sam Morse
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-36-TEST
01/30/2013 04:13 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main
Death | System

Electronic Signing - Confirm

As the:

-

CERTIFYING PHYSICIAN of the death record; to the best of my knowledge, death occurred due to the cause(s) and manner stated.

-

PRONOUNCING "&" CERTIFYING PHYSICIAN of the death record; to the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated.

-

CORONER of the death record; on the basis of my examination and/or investigation, in my opinion, death occurred at the time, date, and place and due to the causes(s) and manner stated.

--

CERTIFIER of the stillbirth (fetal death) record; I certify that this delivery occurred on the date stated and the fetus was born dead.

-

Clicking here constitutes my official signature certifying the cause of death information for the decedent's death or fetal death record.

Activate Signing

Enter your PIN; this was provided to you at the time of creating your account.
If you forgotten the PIN, please contact your System Administrator:

21

Continue

22) This screen verifies that successfully certified the cause of death. Click the “Continue” button.

Logged in as:
Sam Morse
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



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[Logout](#) | [Help](#) | [Accent Characters](#)

Main

Death | System

Certify Death Case - Confirm

Case successfully certified.

Record Summary

Registration status: **Not Submitted**
Personal info status: **Release**
Medical info status: **Certified**

22

Continue


Cancel

23) Click the “Print” button to print an Unofficial Copy and turn to the next page.

OR

24) Click the “Main Menu” button or the “Repeat Task” button to return to the main menu.

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-24-TRN
07/29/2010 11:18 AM
Logout | Help | Accent Characters

Main
Death | System

Successful Transaction

Your transaction has been saved successfully.

Print Confirmation

Your actions have triggered the following documents to be printed.
Please select all documents you wish to print.


Print Draft Certificate: ☒

23 →

24 →

24 →

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS




Version: RLS-4-24-TRN
07/23/2010 11:14 AM
Logout | Help | Accent Characters

Main
Death | System

Open Cases

Task Description	Date Created	Details	Edit	Process
Cause of Death: HAMMIL MARK 07/01/2010	07/08/2010	Details	Edit	Process
Cause of Death: ANDERSON MELISSA 07/01/2010	07/23/2010	Details	Edit	Process
Cause of Death: SMITH LYLE 07/01/2010	07/23/2010	Details	Edit	Process

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-24-TRN
07/23/2010 11:14 AM
Logout | Help | Accent Characters

Main

Date Created	Details	Edit	Process
2010 07/08/2010	Details	Edit	Process
07/01/2010 07/23/2010	Details	Edit	Process
0 07/23/2010	Details	Edit	Process

News Message

News

TRAINING SITE: You are using the VRV Web training site.

Click on “Main Menu” or “Repeat Task” if you want to return to the VRVWeb Menu screen. Since you were completing a cause of death from the main menu, the repeat task button will take you back to the main menu.

25) Click the **“Generate Document”** button.

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS

Version: RLS-4-24-TRN
07/29/2010 11:16 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main
Death | System

Report - Confirm

Print Draft Certificate

25 → **Generate Document**

Continue

At this point, you can save a copy of the unofficial copy and/or print the unofficial copy.

26) To save the unofficial copy, click on “**File**” and select “**Save a Copy...**”

AND/OR

27) To print the unofficial copy, click on “**File**” and select “**Print...**”

28) Once you have printed and/or saved the unofficial copy, click on the “**Continue**” button.

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Logout | Help | Accent Characters

Report - Confirm

Print Draft Certificate

Generate Document

Continue

26

27

28

File Edit View Document Tools Window Help

Open... Ctrl+O

Create Adobe PDF Using Acrobat.com...

Collaborate

Save a Copy... Shift+Ctrl+S

Save as Text...

Attach to Email...

Close Ctrl+W

Properties... Ctrl+D

Digital Editions

Print Setup... Shift+Ctrl+P

Print... Ctrl+P

1 C:\...\102001861516[1].pdf

2 C:\...\102001568795[1].pdf

3 C:\...\f60c6dc28c2943c7a...1ae616ce229[1].pdf

4 C:\...\9cd1b7600b144ef6a...08c01a02dd4[1].pdf

5 C:\...\102001738587[1].pdf

Exit Ctrl+Q

Department of Health and Environment
Cause of Death

State File number

2. Sex MALE

3. If Female, Name Prior To First Marriage

4. Date Of Death (Month, Day, Year) 07/01/2010

7b. Under 1 Year Months Days

7c. Under 1 Day Hours Minutes

8. Place of Birth (City and State or Foreign Country) TOPEKA, KANSAS

10a. Place of Death (Check only one)

☐ Nursing Home

☐ Hospice Facility

☐ Assisted Living Facility

☐ Decedent's Residence

☐ Other (Specify)

10d. City or Town of Death

10e. Zip Code 67550

12. Surviving Spouse (If wife, give name before first marriage)

13b. State KANSAS

13d. City or Town LARNED

13e. Zip Code 67550

13f. Inside City Limits? ☒ Yes ☐ No ☐ Unknown

14. Father's Name (First, Middle, Last) NEAL HAMMIL

15. Mother's Name Prior to First Marriage (First, Middle, Last) MELISSA SMITH

16a. Informant's Name (First, Middle, Last) SHANE MORRIS

16b. Mailing Address (Street and Number, City, State, Zip Code) 123 S TESTING WAY, TOPEKA, KANSAS 66606

16c. Relationship to Decedent BROTHER

17. Method of Disposition

☐ Burial

☐ Cremation

☐ Removal from State

☐ Donation

☐ Entombment

☐ Other (Specify)

18a. Place of Disposition (Name of cemetery, crematory, or other place)

18b. Location-City or Town, and State

19. Funeral Service Licensee & License No. (Signature) > /e/

20. Name of Embalmer & License No.

21. Name and Address of Firm BAKER FUNERAL HOME, PEABODY, KANSAS 66866

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

IMMEDIATE CAUSE (Final disease or condition resulting in death)

a. LUNG CANCER

Due To (Or As A Consequence Of):

b. Due To (Or As A Consequence Of):

c. Due To (Or As A Consequence Of):

Approximate Interval: Onset To Death YEARS



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

29) If you have not already certified the record, click the “**Certify Now**” button and turn back to page 12 of these instructions.

OR

30) Click the “**Return to Record**” button if you want to make a change to the death certificate. Then turn to page 2 of these instructions.

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-24-TRN
07/29/2010 11:16 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main

Death | System

Successful Transaction

Your transaction has been saved successfully.

Other Options

Following options are available:

29

Certify Now

Return to Record

30

Main Menu

Repeat Task


Ready to Certify

Certifying (signing) by Physician after cause of death has been entered

This is the procedure to certify the death record after the medical portion of the death certificate has been entered by the physician assistant from the medical record. The death record will appear under open cases with the task description **“Ready to Certify”**.

- 1) Click on **“Process”** to access the record.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Your last login was at
01/06/2015 11:49:47

Version: RLS-4-42-TEST1
01/06/2015 11:51 AM
[Logout](#) | [Help](#) | [Accent Characters](#)


Main
Death | System

Open Cases

Task Description	Date Created	
Ready to Certify	ANDERSON LUCAS 12/01/2014 null MORRIS	12/19/2014 Details Edit Process

News

News Message
There is no news for Shane Morris


1

2) Once you have accessed the record you need to go directly to Screen 5 – Cause of Death by clicking the tab “5 Cause of Death” to verify that the correct cause of death information has been entered.

In-State Death -- First name: RACHEL Last name: SMITH Date of death: 08/01/2012

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH

6 CONDITION OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE

1-3. Decedent's Name and Sex

First nameRACHEL

Middle nameJEAN

Last nameSMITH

SuffixSelect

SexFemale

☐ Check if current last name equals last name prior to first marriage

Last name prior to first marriageJORDAN

4-5. Date of Death and SSN

Date of death (MM/DD/YYYY)08/01/2012

Found☐

On or about☐

Social security number999-99-9999

SSN verification statusSelect

6-7. Date of Birth and Age

Date of birth (MM/DD/YYYY)01/01/1930

Age measureYears

Age on last birthday (years)82

Age on last birthday (months)

Age on last birthday (days)

Age on last birthday (hours)

Age on last birthday (minutes)

Previous

Next

Finish

Cancel

3) After you have verified the correct cause has been entered or made any necessary changes, click on the “Next” button or click on the “6 Condition of Death” tab at the top to go to the next screen.

In-State Death -- First name:LARRY Last name:BROWN Date of death:08/01/2012

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH

6 CONDITION OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE

Part I

Part I. Enter the chain of events-diseases, injuries, or complications-that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology.
DO NOT ABBREVIATE. Enter only one cause on a line.

22. Cause of Death

Immediate Cause (Final disease or condition resulting in death) A Due to (or as a consequence of):

LUNG CANCER

Approximate interval: onset to death

YEARS

Underlying Cause B Due to (or as a consequence of):

Approximate interval: onset to death

Underlying Cause C Due to (or as a consequence of):

Approximate interval: onset to death

Underlying Cause D:

Approximate interval: onset to death

Part II

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

Other Significant Conditions

Other Significant conditions contributing to death

DM TYPE 2

26. Manner of Death

Manner of death

Natural

Nosologist pending

Permission to Cremate

Permission granted

Select

Date granted

Coroner giving permission (list)

Select

Coroner giving permission

Reason why not granted

Funeral Home: Cancel Cremation request

Previous

Next

Finish

Cancel

April 4, 2016

Physician Ready to Certify

3

Note: There are built in edits and spell checks. It is best to spell out the condition and not use abbreviations (i.e. CRF could stand for Cardio Respiratory Failure or Chronic Renal Failure). Cardiac Arrest, Cardio Respiratory Arrest, Old Age, Failure to Thrive, etc. should not be the only entry on the cause. You need to enter the underlying reason (what caused) or “Unknown Cause”. Also, make sure to put primary site for any cancer condition. If unknown, make sure to enter “Unknown primary” beside the immediate cause or in a “Due to” position. If the system has determined that there is a spelling mistake or an unknown abbreviation, you will get a message at the top of the screen after you click on the “**Next**” button. You may correct the spelling or click on Next to leave spelling as it is entered.

Check term or spelling

Immediate Cause (Final disease or condition resulting in death) A
CRF

Other Significant conditions contributing to death
DM

Abbreviations
Do not use abbreviations to report cause of death. We think that the full term for (e.g., AAA) is (e.g., abdominal aortic aneurysm)? Indicate which term is correct if multiple meanings are possible, or specify what you meant by the abbreviation if we have not suggested the correct full term.

Immediate Cause (Final disease or condition resulting in death) A
CRF = CARDIORESPIRATORY FAILURE | CHRONIC RENAL FAILURE

Other Significant conditions contributing to death
DM = DIABETES MELLITUS

In-State Death -- First name: TEST Last name: MESSAGE Date of death: 02/18/2016

1 Decedent | 2 Decedent Data | 3 Parents and Informant | 4 Disposition | *5 CAUSE OF DEATH* | *6 CONDITION OF DEATH* | *7 CERTIFIER* | 8 Decedent Info | *9 NOTES/RELEASE*

Part I
Part I. Enter the chain of events-diseases, injuries, or complications that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line.

22. Cause of Death

Immediate Cause (Final disease or condition resulting in death) A Due to (or as a consequence of): CRF x Approximate interval: onset to death MONTHS

Underlying Cause B Due to (or as a consequence of): Approximate interval: onset to death

Underlying Cause C Due to (or as a consequence of): Approximate interval: onset to death

Underlying Cause D Approximate interval: onset to death

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

Other Significant Conditions

Other Significant conditions contributing to death DM TYPE 2

26. Manner of Death

Manner of death Natural Nosologist pending ☐

Permission to Cremate

Permission granted Date granted

Coroner giving permission (list) Coroner giving permission

Reason why not granted

Funeral Home: Cancel Cremation request ☐

4) After you have verified the correct information was entered for condition of death or made any necessary changes, click on the "Next" button or click on "7 Certifier" at the top to go to the next page.

In-State Death – First name: DANIEL Last name: TESTING Date of death: 07/01/2011

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH*

6 CONDITIONS OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE*

23-25. Death Details

Was an autopsy performed?

Yes

Were autopsy findings available to complete the cause of death?

Select

Was coroner contacted?

Yes

Did tobacco use contribute to death?

Select

If female, select one from list

Select

27. Injury

Check if Injury Occurred☐

Date of injury (MMDDYYYY)

Approx. date of injury☐

Time of injury, hours

Time of injury, minutes

....Time Indicator

Select

Approx. injury time☐

Injury at work?

Select

Describe how injury occurred

Place of injury-residence, farm, factory, etc. Specify

Address number

Pre-directional

Select

Street name

Street designator, e.g., St, Ave, etc.

Post-directional

Select

Residential unit

Select

Apt or Rm or Suite, No. only

Country

Select

State/province

Select

City or town

Zip code

28a-28c. Date and Time Death Pronounced

Date pronounced dead (MMDDYYYY)

07/01/2011

Time pronounced, hours

8

Time pronounced, minutes

0

....Time pronounced, indicator

AM

Approx. time pronounced☐

Actual or presumed time of death, hours

8

Actual or presumed time of death, minutes

0

....Time indicator

AM

Approx. time of death☐

28d-28e. Person Pronouncing Death

First name

Middle name

Last name

Suffix

Select

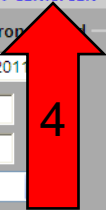
License number

Previous

Next

Finish

Cancel




- 5) If the Certifier designation list is on “**Select**”, use the pull down menu to change it to “**Certifying Physician**” or “**Pronouncing & Certifying Physician**”.
- 6) Click on the “**9 Notes/Release**” at the top of the screen.

In-State Death – First name:LARRY **Last name:**BROWN **Date of death:**08/01/2012

1 Decedent | **2 Decedent Data** | **3 Parents and Informant** | **4 Disposition** | ***5 CAUSE OF DEATH*** | ***6 CONDITION OF DEATH*** | ***7 CERTIFIER*** | **8 Decedent Info** | ***9 NOTES/RELEASE***

29. Person Completing Cause of Death

Certifier designation list: **Certifying physician**  **5**

Physician list: **Select**

Coroner list: **Select**

First name: **SHANE**

Middle name: **ALLEN**

Last name: **AAMORRIS**

Suffix: **Select**

Title: **MD**

Other title: **MD**

Address number: **1000**

Pre-directional: **SW**

Street name: **JACKSON**

Street designator e.g., St, Ave, etc.: **ST**

Post directional: **Select**

Residential unit: **STE**

Apt or Rm or Suite, No. only: **110**

Rural route and/or box No.:

P.O. box, No. only:

Country: **UNITED STATES**

State/province: **KANSAS**

City or town: **TOPEKA**

Zip code: **66612**

Medical license number: **98765**

Physician online (Y/N)-phone: **Y - 785-555-1234**

Coroner online (Y/N)-phone: **Select**

Date signed by certifier (MM/DD/YYYY):

Coroner Case Info

Coroner case number:

Need to Transfer Case?

Check to transfer case: ☐

Transfer to physician list: **Select**

Transfer to this district (number list): **Select**

Transfer to this district (county list): **Select**

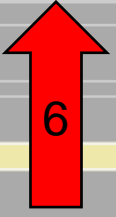
Need to Relinquish Case?

Check to relinquish case: ☐

Reason:

30. Date Filed By State Registrar

Date filed by state registrar (MMDDYYYY):

6 

Previous **Next** **Finish** **Cancel**

Once you have verified and/or completed the medical portion on screen 5 and the condition of death on screen 6, you are ready to certify the medical information.

- 7) You can enter information into the “**Notes**” section. The notes section is there so that you can provide any information that you think might help clarify any unusual or strange information listed on the death certificate. This section will not print on the death certificate.
- 8) Make sure the box next to “**Ready to certify medical information**” is checked.
- 9) Click on the “**Finish**” button at the bottom.

The screenshot shows a web-based form titled "In-State Death -- First name:LARRY Last name:BROWN Date of death:08/01/2012". The form has a purple header and a navigation bar with tabs: 1 Decedent, 2 Decedent Data, 3 Parents and Informant, 4 Disposition, *5 CAUSE OF DEATH*, *6 CONDITION OF DEATH*, *7 CERTIFIER*, 8 Decedent Info, and *9 NOTES/RELEASE*. The main content area is divided into several sections:

- Notes:** A large text area with a blue background and a scroll bar. A red arrow labeled "7" points to this section.
- Amendment Info:** A checkbox labeled "Check if record has been amended".
- Filing Information:** Includes a checkbox for "Release record to State", a label for "Medical info status" with the value "Ready to Certify", and a dropdown for "How filed" with the value "E".
- SSN Verification Info:** Includes a label for "Number of verification tries" with the value "0" and a label for "Date of last verification attempt".
- Duplicate Record Status:** A dropdown menu showing "Unique identity".
- Ready to Certify:** A checkbox labeled "Ready to certify medical information" which is checked. A red arrow labeled "8" points to this checkbox.
- Accept/Reject:** Two checkboxes: "Check to reject personal information" and "Check to reject medical information".
- Case History:** A scrollable text area showing a log of actions: "08/02/2012 User ID: 5102 Case started -- 08/02/2012", "User ID: 5102 Assigns case to SHANE ALLEN", and "AAMORRIS -- 08/07/2012 User ID: 5093 Set case as ready to be certified --".

At the bottom of the form, there are three buttons: "Previous", "Finish", and "Cancel". A red arrow labeled "9" points to the "Finish" button, which is also circled.

You now have the option to print the Unofficial Copy of the Death Certificate, certify the cause of death, or to return to the death record to make a change.

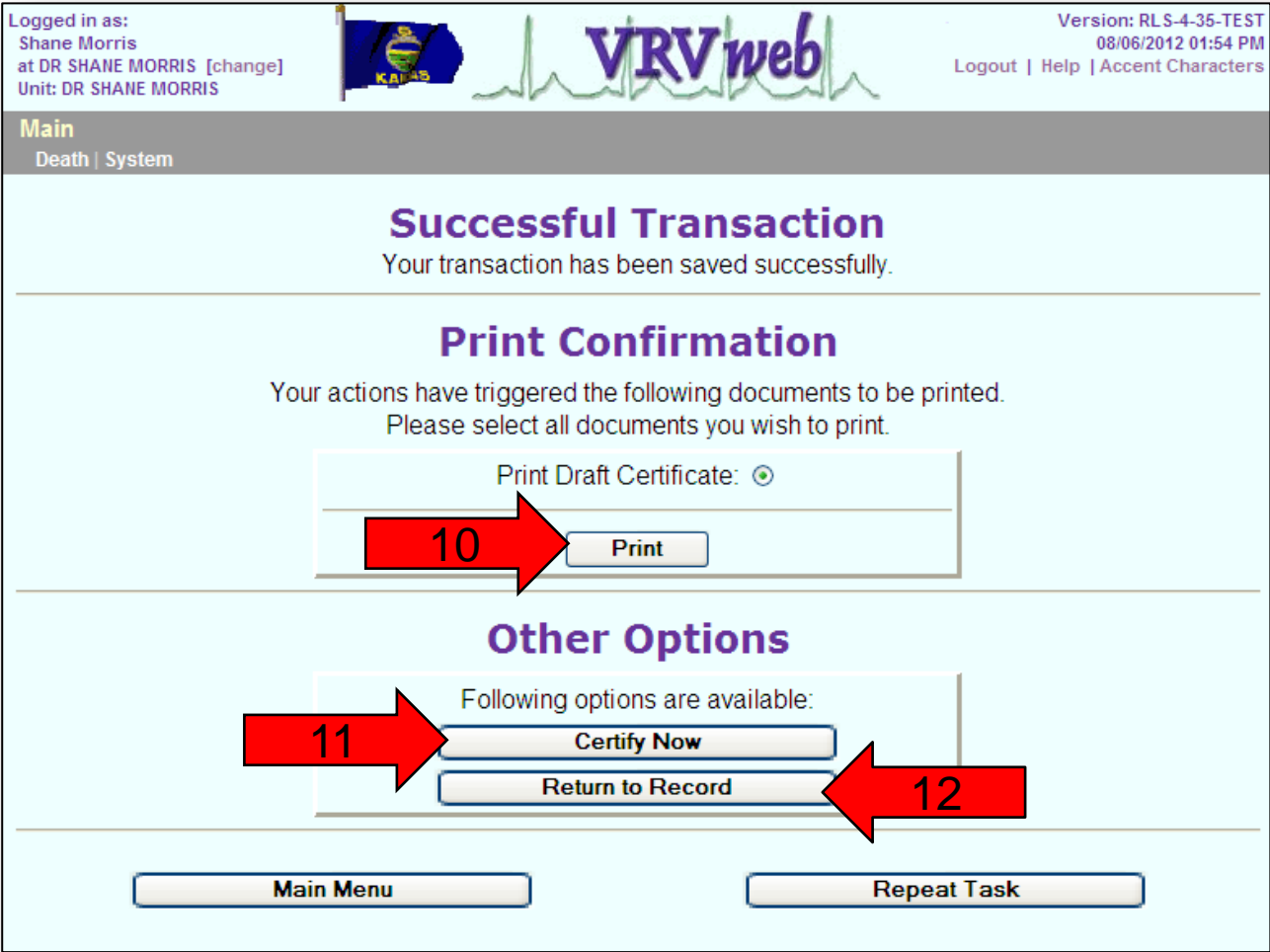
10) If you want to print an unofficial copy of the death certificate, click the “**Print**” button and turn to page 13.

OR

11) If you want to certify the cause of death, click on the “**Certify Now**” button and turn to the next page.


OR

12) If you want to return to the record to make a change, click on the “**Return to Record**” button and then turn back to page 2 of these instructions.



13) Click the “**Activate Signing**” button to start the process to electronically sign the death record.

Logged in as:
Sam Morse
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-36-TEST
01/30/2013 04:13 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main
Death | System

Electronic Signing - Confirm

As the:

-

-

CERTIFYING PHYSICIAN of the death record; to the best of my knowledge, death occurred due to the cause(s) and manner stated.

-

PRONOUNCING "&" CERTIFYING PHYSICIAN of the death record; to the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated.

-

CORONER of the death record; on the basis of my examination and/or investigation, in my opinion, death occurred at the time, date, and place and due to the causes(s) and manner stated.

--

CERTIFIER of the stillbirth (fetal death) record; I certify that this delivery occurred on the date stated and the fetus was born dead.

-

Clicking here constitutes my official signature certifying the cause of death information for the decedent's death or fetal death record.

13

Activate Signing

Continue

- 14) Enter your PIN.
15) Click the "Continue" Button.

Logged in as:
Sam Morse
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-36-TEST
01/30/2013 04:13 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main
Death | System

Electronic Signing - Confirm

As the:

-

CERTIFYING PHYSICIAN of the death record; to the best of my knowledge, death occurred due to the cause(s) and manner stated.

-

PRONOUNCING "&" CERTIFYING PHYSICIAN of the death record; to the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated.

-

CORONER of the death record; on the basis of my examination and/or investigation, in my opinion, death occurred at the time, date, and place and due to the causes(s) and manner stated.

--

CERTIFIER of the stillbirth (fetal death) record; I certify that this delivery occurred on the date stated and the fetus was born dead.

-

Clicking here constitutes my official signature certifying the cause of death information for the decedent's death or fetal death record.

Activate Signing

Enter your PIN; this was provided to you at the time of creating your account.
If you forgotten the PIN, please contact your System Administrator:

14

15

Continue

16) This screen verifies that you successfully certified the cause of death. Click the “**Continue**” button.

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-24-TRN
07/29/2010 11:18 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main

Death | System

Certify Death Case - Confirm

Case successfully certified.

Record Summary

Registration status: **Not Submitted**
Personal info status: **Release**
Medical info status: **Certified**

16 

17) Click the “**Print**” button to print an Unofficial Copy and turn to page 13.

OR

18) Click the “**Main Menu**” button or the “**Repeat Task**” button to return to the main menu. You are now finished with the certification process.

Logged in as: Shane Morris at DR SHANE MORRIS Unit: DR SHANE MORRIS

Version: RLS-4-24-TRN 07/29/2010 11:18 AM Logout | Help | Accent Characters

Main
Death | System

Successful Transaction

Your transaction has been saved successfully.

Print Confirmation

Your actions have triggered the following documents to be printed.
Please select all documents you wish to print.

Print Draft Certificate: ☐

17 → **Print**

18 → **Main Menu** 18 → **Repeat Task**

Logged in as: Shane Morris at DR SHANE MORRIS Unit: DR SHANE MORRIS

Version: RLS-4-24-TRN 07/23/2010 11:14 AM Logout | Help | Accent Characters

Main
Death | System

Open Cases

Task Description	Date Created	Details	Edit	Process
Cause of Death: HAMMIL MARK 07/01/2010	07/08/2010	Details	Edit	Process
Cause of Death: ANDERSON MELISSA 07/01/2010	07/23/2010	Details	Edit	Process
Cause of Death: SMITH LYLE 07/01/2010	07/23/2010	Details	Edit	Process

Click on “**Main Menu**” or “**Repeat Task**” if you want to return to the VRVWeb Menu screen. Since you were completing a cause of death from the main menu, the repeat task button will take you back to the main menu.

Logged in as: Shane Morris at DR SHANE MORRIS Unit: DR SHANE MORRIS

Version: RLS-4-24-TRN 07/23/2010 11:14 AM Logout | Help | Accent Characters

Main
Death | System

Date Created	Details	Edit	Process
07/08/2010	Details	Edit	Process
07/23/2010	Details	Edit	Process
07/23/2010	Details	Edit	Process

News Message
TRAINING SITE You are using the VRV Web training site.

19) Click the “**Generate Document**” button.

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS

Version: RLS-4-24-TRN
07/29/2010 11:16 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main
Death | System

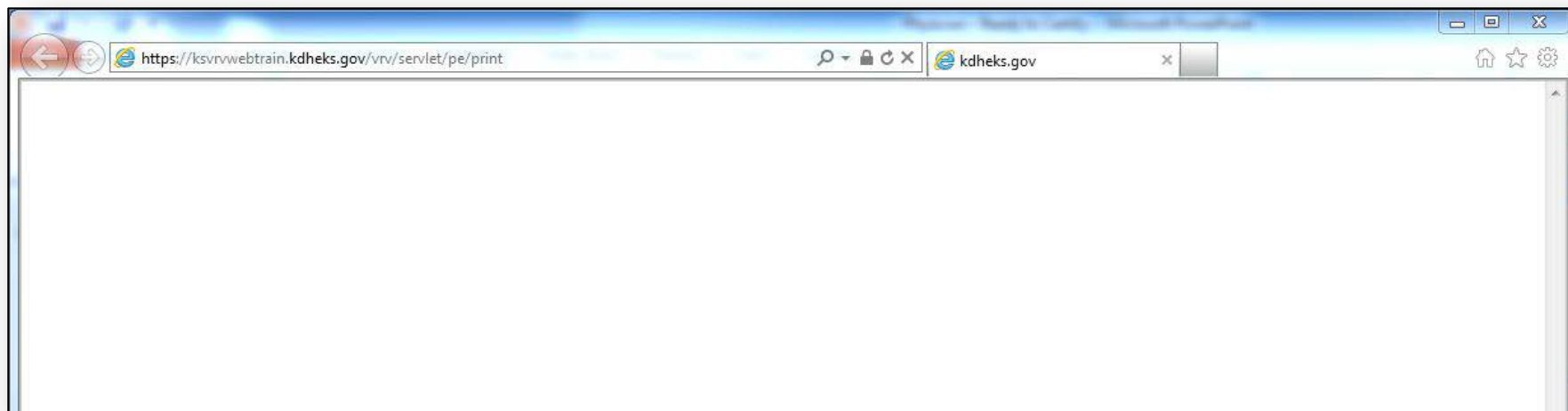
Report - Confirm

Print Draft Certificate

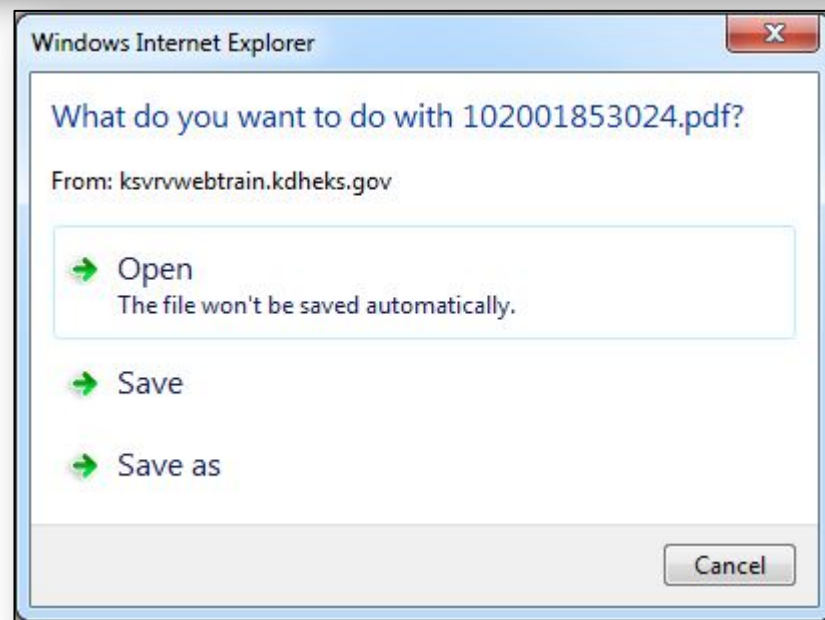
19 → **Generate Document**

Continue

You *may* get this extra window. The certificate should load shortly after this window opens.



Depending on the settings for your computer, you may get this pop up window asking what you want to do with the file. We suggest that you click on "Open".



At this point, you can save a copy of the unofficial copy and/or print the unofficial copy.

20) To save the unofficial copy, click on **"File"** and select **"Save a Copy..."**

AND/OR

21) To print the unofficial copy, click on **"File"** and select **"Print..."**

22) Once you have printed and/or saved the unofficial copy, click on the **"Continue"** button.

The screenshot displays a web application interface for a death certificate. On the left, a file menu is open, showing options like 'Open...', 'Save a Copy...', 'Print...', and 'Exit'. Red arrows labeled 20 and 21 point to 'Save a Copy...' and 'Print...' respectively. The main area shows a 'Department of Health and Environment' death certificate form for 'NEAL HAMMIL'. The form includes fields for sex, date of death, place of birth, and place of death. A large 'OFFICIAL COPY' watermark is visible across the center. On the right, a sidebar contains a 'Report - Confirm' section with buttons for 'Print Draft Certificate', 'Generate Document', and 'Continue'. A red arrow labeled 22 points to the 'Continue' button. The top right corner shows the version 'RLS-4-24-TRN' and the date '07/29/2010 11:18 AM'.

Version: RLS-4-24-TRN
07/29/2010 11:18 AM
Logout | Help | Accent Characters

Report - Confirm

Print Draft Certificate

Generate Document

Continue

20

21

22

File Edit View Document Tools Window Help

Open... Ctrl+O

Create Adobe PDF Using Acrobat.com...

Collaborate

Save a Copy... Shift+Ctrl+S

Save as Text...

Attach to Email...

Close Ctrl+W

Properties... Ctrl+D

Digital Editions

Print Setup... Shift+Ctrl+P

Print... Ctrl+P

1 C:\...\102001861516[1].pdf

2 C:\...\102001568795[1].pdf

3 C:\...\f60c6dc28c2943c7a...1ae616ce229[1].pdf

4 C:\...\9cd1b7600b144ef6a...08c01a02dd4[1].pdf

5 C:\...\102001738587[1].pdf

Exit Ctrl+Q

Department of Health and Environment

Statistics

OF DEATH

State File number

2. Sex MALE

3. If Female, Name Prior To First Marriage

4. Date Of Death (Month, Day, Year) 07/01/2010

7b. Under 1 Year Months Days

7c. Under 1 Day Hours Minutes

8. Place of Birth (City and State or Foreign Country) TOPEKA, KANSAS

10a. Place of Death (Check only one)

☐ Nursing Home

☐ Hospice Facility

☐ Assisted Living Facility

☐ Decedent's Residence

☐ Other (Specify)

10d. City or Town of Death LARNED

10e. Zip Code 67550

12. Surviving Spouse (If wife, give name before first marriage)

13b. State KANSAS

13d. City or Town LARNED

13e. Zip Code 67550

13f. Inside City Limits? ☒ Yes ☐ No ☐ Unknown

14. Father's Name (First, Middle, Last) NEAL HAMMIL

15. Mother's Name Prior to First Marriage (First, Middle, Last) MELISSA SMITH

16a. Informant's Name (First, Middle, Last) SHANE MORRIS

16b. Mailing Address (Street and Number, City, State, Zip Code) 123 S TESTING WAY, TOPEKA, KANSAS 66606

16c. Relationship to Decedent BROTHER

17. Method of Disposition

☐ Burial

☐ Cremation

☐ Removal from State

☐ Donation

☐ Entombment

☐ Other (Specify)

18a. Place of Disposition (Name of cemetery, crematory, or other place)

18b. Location-City or Town, and State

19. Funeral Service Licensee & License No. (Signature)

20. Name of Embalmer & License No.

21. Name and Address of Firm BAKER FUNERAL HOME, PEABODY, KANSAS 66866

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

IMMEDIATE CAUSE (Final disease or condition resulting in death)

a. LUNG CANCER

Due To (Or As A Consequence Of):

b. Due To (Or As A Consequence Of):

c. Due To (Or As A Consequence Of):

Approximate Interval: Onset To Death YEARS

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


23) Click the **“Certify Now”** button and turn back to page 9 of these instructions.

OR

24) Click the **“Return to Record”** button if you want to make a change to the death certificate. Then turn to page 2 of these instructions.

Note: If you already certified the death certificate, you will not have the option to certify now or return to record.

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-24-TRN
07/29/2010 11:16 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main

Death | System

Successful Transaction

Your transaction has been saved successfully.

Other Options

Following options are available:

23

Certify Now

Return to Record

24

Main Menu

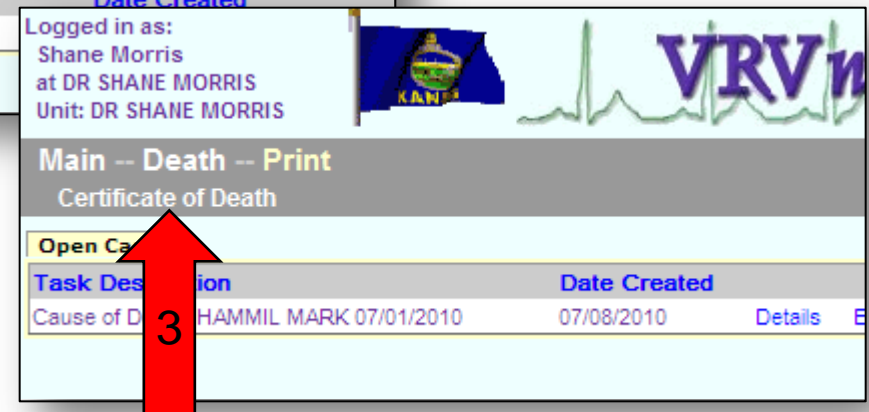
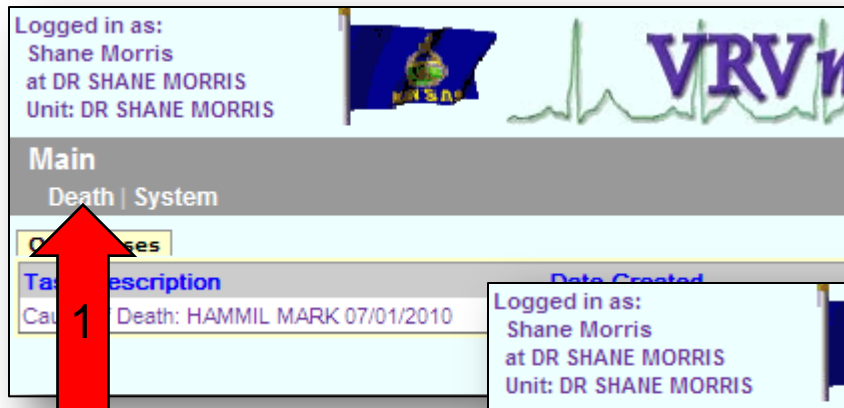
Repeat Task

Printing Certificate of Death

You can print an Unofficial Copy of the death certificate. This Unofficial Copy will be what is called the “live” record. That means any changes made to the death record after the physician certified (signed) the death record will appear on this record.

If you want an Unofficial Copy of the death certificate as it appeared at the time the physician signed it, please refer to the Searching for Death Records section.

- 1) Click on **"Death"**.
- 2) Click on **"Print"**.
- 3) Click on **"Certificate of Death"**.



4) Enter information to search for the death certificate. The most common way to search for a death certificate is to type the date of death plus the last name of the decedent (Boxes A & E). Here are some other common ways to search for a record.

- Date of Death only (Box A)
- First and Last Name of Decedent (Boxes D & E)
- Date Range (example: 02/01/2010 to 05/18/2010, Boxes B & C)

5) Once you have entered the information, click on **"Search"**.

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS

Version: RLS-4-24-TRN
07/22/2010 03:38 PM
Logout | Help | Accent Characters

Main -- Death -- Print -- Certificate of Death

Registrant

Optical Key and Certificate Number

State file number

Optical key number

Date Of Death

Date of death ← A

From (MM/DD/YYYY) ← B

To (MM/DD/YYYY) ← C

Decedent

First name ← D

Middle name

Last name ← E

Soundex on last name ☐

Last Name Prior to First Marriage

Last name prior to first marriage

Location

Country

State

County

Cities located in Kansas

City

Coroner Case Number

Coroner case number

System Record ID Number

Record ID number


5 → Search Cancel

6) Click on “**Details**” for the death that you want to print.

OR

7) If you do not see the individual that you want to print an Unofficial Certificate Copy, click on the “**Cancel**” button to return to the search screen.

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-24-TRN
07/22/2010 03:40 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main -- Death -- Print -- Certificate of Death

Records List

Last Name	First Name	Date of Death	County of Death	Sex	Funeral Home	ODKN	PRN	Unfin	Subm	Reg	CurFlg	Rpl No	How Filed	
PRESENTATION	DONNA	07/01/2010	PAWNEE	F	BAKER FUNERAL HOME	2	No	Yes	0	1	0	0	E	Details
CARLSON	CARL	07/01/2010	PAWNEE	M	BAKER FUNERAL HOME	3	No	Yes	0	1	0	0	E	Details
EVERGREEN	EZEKIEL	07/01/2010	PAWNEE	M	CAPITOL CITY MORTUARY	1	No	No	0	1	0	0	P	Details
WOODS	JAMES	07/01/2010		M	BAKER FUNERAL HOME	1	Yes	No	0	1	0	0	E	Details
HAMMIL	MARK	07/01/2010	PAWNEE	M	BAKER FUNERAL HOME		Yes	No	0	1	0	0	E	Details
LEELA	TORANGA	07/01/2010	PAWNEE	F	BAKER FUNERAL HOME	1	No	No	0	1	0	0	E	Details
SMITH	OLAF	07/01/2010	PAWNEE	M	BAKER FUNERAL HOME	1	Yes	No	0	1	0	0	E	Details
SODA	SUNKIST	07/01/2010	PAWNEE	M	BAKER FUNERAL HOME	2	No	Yes	0	1	0	0	E	Details
PEN	BLUE	07/01/2010	PAWNEE	F	BAKER FUNERAL HOME	1	No	Yes	0	1	0	0	E	Details
TESTING	AMY	07/01/2010	JOHNSON	F	ABBOTT FUNERAL HOME	1	No	Yes	0	1	0	0	P	Details

Cancel

7

6

This is the record details screen. This screen is too big to show a full example. You can see a partial example on the right.

This screen will show the data fields and the data that was entered. You will also see system fields related to the record.

You can scroll down and view all the current information about the death record. This is the live record, so any changes made by the funeral home or the state will be shown here.

At the very bottom there will be a **“Continue”** and a **“Cancel”** button.

8) Click on **“Continue”** to print the Unofficial Copy.

OR

9) Click on **“Cancel”** to return to the Records List as shown on page 4.


Case History
History: 05/17/2010 User ID: 1586 Case started -- 05/17/2010 User ID: 1586 Assigns case to ROBIN WOLFE -- 05/17/2010 User ID: 5049 Set case as ready to be certified --05/17/2010 10:15:39 drwolfe Certified\n
Other Significant Conditions
Other Significant conditions contributing to death: OTHER CONDITIONS OF DEATH AREA
23-25. Death Details
Were autopsy findings available to complete the cause of death?: N
<div>Continue Cancel</div>

Print Unofficial
Copy

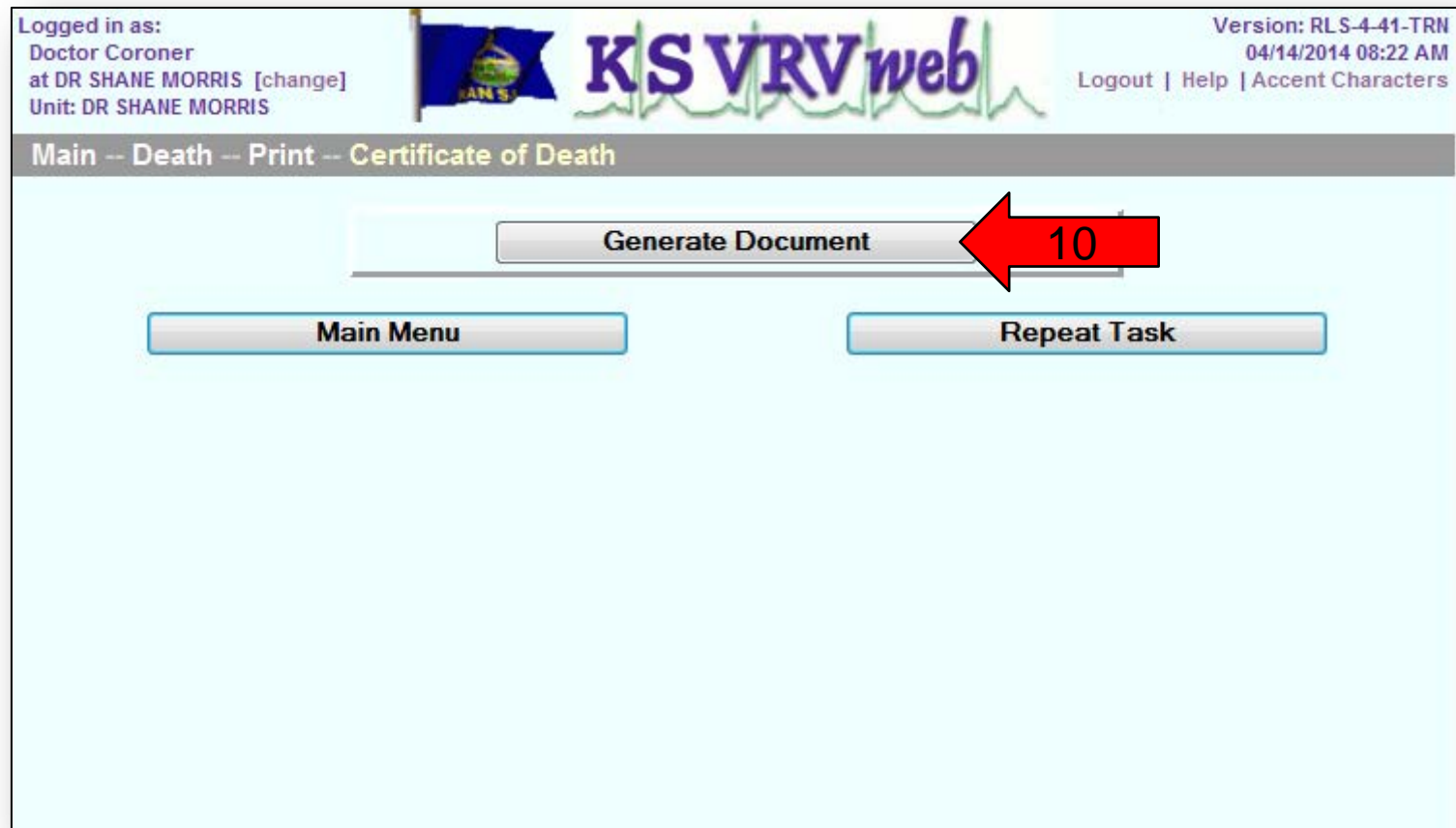
8

9

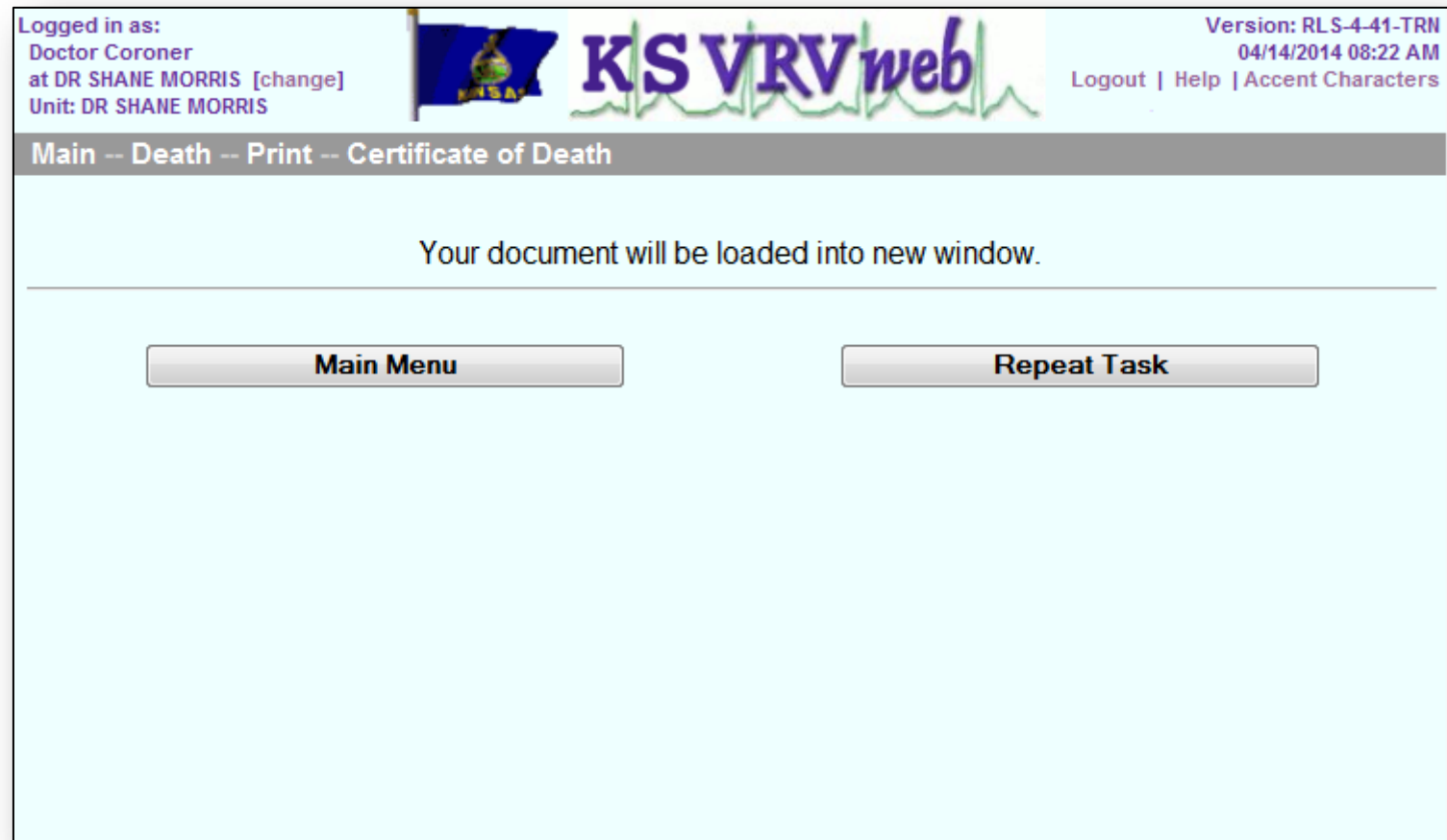
Return to
Records List

Logged in as: Shane Morris at DR SHANE MORRIS Unit: DR SHANE MORRIS		Version: RLS-4-24-TRN 07/22/2010 03:41 PM Logout Help Accent Characters
Main -- Death -- Print -- Certificate of Death		
Record Details		
1., 2., 3. Decedent Name and Sex		
First name: CARL Middle name: CHARLIE Last name: CARLSON Suffix: Sex: M SEX_BYPASS: Check if current last name equals last name prior to first marriage: N Last name prior to first marriage: Entity that started case: FH Status of cremation request for approval: 1 Out-of-state certificate number:		
4., 5. Date of Death and SSN		
Date of death (MM/DD/YYYY): 07/01/2010 Date of death (numeric value): 20100701 Found: N On or about: N Social security number: 999-99-9999 SSN verification status: -1 Current record flag: 1 Invoke OVS2 for SSN verification: R SSN Verified flag: N		
6., 7. Date of Birth and Age		
Date of birth (MM/DD/YYYY): 01/01/1940 Age measure: 1 Age on last birthday (years): 70 Age on last birthday (months): Age on last birthday (days): Age on last birthday (hours): Age on last birthday (minutes): AGE_BYPASS:		
8. Place of Birth		
Country: UNITED STATES State/province: KANSAS City: TOPEKA		
9. US Armed Forces		
Decedent ever in US armed forces?: N		
10. Place of Death		
Place of death: 6 ...Other, specify: Facility name: SAINT JOSEPH LONG TERM CARE Address number: 923 Pre-directional: Street name: CARROLL Street designator e.g., St, Ave, etc.: AVE		

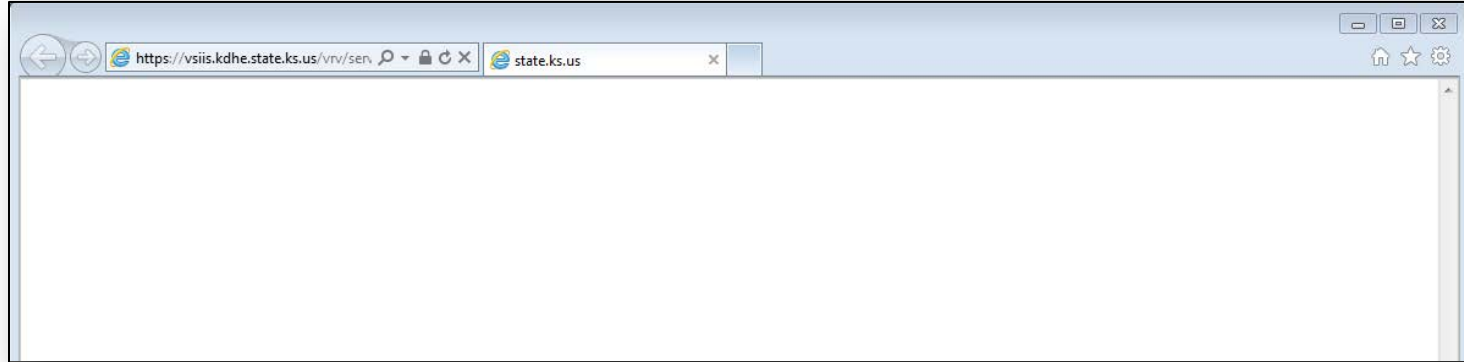
10) Click on the “**Generate Document**” button.



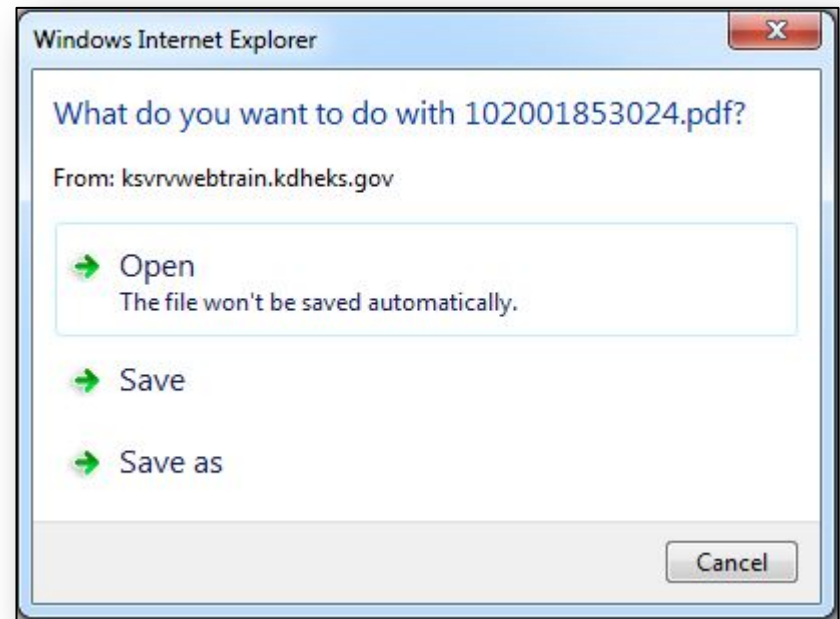
You will get this message that the document will be loaded into a new window. You will need to wait for the record to load at this time.



You *may* also get this extra window. The certificate should load shortly after this window opens.




Depending on the settings for your computer, you may get this pop up window asking what you want to do with the file. We suggest that you click on "Open".



You may now click on “Main Menu” or “Repeat Task”.

Logged in as:
Doctor Coroner
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-41-TRN
04/14/2014 08:22 AM
Logout | Help | Accent Characters

Main -- Death -- Print -- Certificate of Death

Your document will be loaded into new window.

Main Menu Repeat Task

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-24-TRN
07/14/2010 08:28 AM
Logout | Help | Accent Characters


Main
Death | System

Open Cases

Task Description	Date Created	
Ready to Certify: EVERGREEN EZEKIEL 07/01/2010	07/08/2010	Details Edit Process
Cause of Death: LEELA TORANGA 07/01/2010	07/08/2010	Details Edit Process
Cause of Death: HAMMIL MARK 07/01/2010	07/08/2010	Details Edit Process

News Message
TRAINING SITE You are using the VRV Web training site.

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-24-TRN
07/22/2010 03:38 PM
Logout | Help | Accent Characters

Main -- Death -- Print -- Certificate of Death

Registrant

Optical Key and Certificate Number

State file number

Optical key number

Date Of Death

Date of death

From (MM/DD/YYYY)

Last Name Prior to First Marriage

Last name prior to first marriage

Location

Country

State

County

Cities located in Kansas

City

Coroner Case Number

Coroner case number

System Record ID Number

Record ID number

Search Cancel

Click on “Main Menu” if you want to return to the VRVWeb Menu screen.
OR
Click on “Repeat Task” if you want to print another Unofficial Copy of a death certificate.

This is an example of the death certificate as it would look in Adobe Reader.

102001836412[1].pdf - Adobe Reader

File Edit View Document Tools Window Help

1 / 2 63%

Find

Kansas Department of Health and Environment
Office of Vital Statistics
CERTIFICATE OF DEATH

State File number

1. Decedent's Legal Name (First, Middle, Last)
CARL, CHARLIE CARLSON

2. Sex
MALE

3. If Female, Name Prior to First Marriage

4. Date of Death (Month, Day, Year)
07/01/2010

5. Social Security Number
UNKNOWN

6. Date of Birth (Month, Day, Year)
01/01/1940

7a. Age - Last Birthday (Years)
70

7b. Under 1 Year
Months Days Hours Minutes

8. Place of Birth (City and State or Foreign Country)
TOPEKA, KANSAS

9. Was Decedent Ever In U.S. Armed Forces?
☒ Yes ☐ No ☐ Unknown

10a. Place of Death (Check only one)
☐ Hospital ☐ Inpatient ☐ OOA ☒ Nursing Home ☐ Hospice Facility ☐ Assisted Living Facility ☐ Other (Specify)

10b. Facility Name (If not institution, give street and number)
SAINT JOSEPH LONG TERM CARE

10c. County of Death
PAWNEE

10d. City or Town of Death
LARNED

10e. Zip Code
67550

11. Marital Status
☐ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☒ Never Married ☐ Unknown

12. Surviving Spouse (If wife, give name before first marriage)

13a. Residence (Street Address & Apartment No.)
923 CARROLL AVE

13b. City
PAWNEE

13c. County
LARNED

13d. Zip Code
67550

14. Father's Name (First, Middle, Last)
CLAYTON CARLSON

15. Mother's Name prior to First Marriage (First, Middle, Last)
CARRIE CAMPANELA

16a. Informant's Name (First, Middle, Last)
SHANE MORRIS

16b. Relationship to Decedent
BROTHER

16c. Address (Street and Number, City, State, Zip Code)
987 S. TESTING WAY, TOPEKA, KANSAS 66606

16d. Location City or Town, and State
LAWRENCE, KANSAS

17. Method of Disposition
☒ Burial ☐ Cremation ☐ Donation ☐ Entombment ☐ Other (Specify)

18. Place of Disposition (Name of cemetery, crematory, or other place)
LAWRENCE MEMORIAL GARDENS

19. Funeral Service License & License No. (Signature)
J. EDWARD F. CABANA, II 2494

20. Name of Embalmer & License No.
JIM R. CARTER MO-26164

21. Name and Address of Firm
BAKER FUNERAL HOME, 114 SYCAMORE STREET, PEARBODY, KANSAS 66666

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

IMMEDIATE CAUSE (Final disease or condition resulting in death)
a. LUNG CANCER
Due To (Or As A Consequence Of):

Sequentially list conditions, if any, leading to immediate cause listed on line a. Enter the UNDERLYING CAUSE (Disease or injury that initiated the events resulting in death).
b. COPD
Due To (Or As A Consequence Of):

c. Due To (Or As A Consequence Of):

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

23a. Autopsy
☐ Yes ☒ No ☐ Unknown

23b. Were Autopsy Findings Available to Complete the Cause of Death?
☐ Yes ☒ No ☐ Unknown

23c. Was Coroner Contacted?
☐ Yes ☒ No ☐ Unknown

24. Did Tobacco Use Contribute to Death?
☒ Yes ☐ Probably ☐ No ☐ Unknown

25. If Female
☐ Not pregnant within past year ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Pregnant at time of death ☐ Unknown if pregnant within the last year

26. Manner of Death
☒ Natural ☐ Homicide ☐ Accident ☐ Suicide ☐ Could not be determined

27a. Date of Injury (Month, Day, Year)
27b. Time of Injury
27c. Injury at Work?
☐ Yes ☒ No

27d. Describe How Injury Occurred

27e. Location (Street and Number or Rural Route, City or Town, State, Zip Code)

28a. Date Pronounced Dead (Month, Day, Year)
07/01/2010

28b. Time Pronounced Dead
10:45 AM

28c. Actual or Presumed Time of Death
10:45 AM

28d. Name of Person Pronouncing Death (If applicable)

28e. License No.

29a. CERTIFIER
(Check only one)
☒ Certifying physician - To the best of my knowledge, death occurred due to the cause(s) and manner stated.
☐ Pronouncing & Certifying physician - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated.
☐ Coroner - On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.

Signatures of Certifier > /s/ SHANE ALLEN MORRIS License No. 98765 Date Certifier Signed 07/12/2010

29b. Name, Address, and Zip Code of Person Completing Cause of Death
SHANE ALLEN MORRIS, 1000 SW JACKSON ST STE 110, TOPEKA, KANSAS 66612

30. Date Filed by State Registrar (Month, Day, Year)

VS231 Rev. 05/30/2009 (1)

34. Education (Check the box that best describes the highest degree or level of school completed at the time of death.)
☐ 8th grade or less
☐ 9th-12th grade; no diploma
☐ High school graduate or GED
☐ Some college credit, but no degree
☐ Associate degree (e.g., AA, AS)
☐ Bachelor's degree (e.g., BA, BS)
☐ Master's degree (e.g., MA, MS, MEd, MEd, MEd, MEd)
☐ Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)
☐ Unknown

35. Decedent's Usual Occupation (Give kind of work done during most of working life. Do not use retired.)
CLERK

36. Kind of Business/Industry (Do not give name of company.)
RETAIL

102001836412[1].pdf - Adobe Reader

File Edit View Document Tools Window Help

Open... Ctrl+O

Create Adobe PDF Using Acrobat.com...

Collaborate

Save a Copy... Shift+Ctrl+S

Save as Text...

Attach to Email...

Close Ctrl+W

Properties... Ctrl+D

Digital Editions

Print Setup... Shift+Ctrl+P

Print... Ctrl+P

1 C:\...\102001836412[1].pdf

2 C:\...\Complete Arcane v3.5.pdf

3 C:\...\Supplement - Exp...onics Handbook.pdf

4 C:\...\Complete Adventurer v3.5.pdf

5 C:\...\Players Handbook II v3.5.pdf

Exit Ctrl+Q

Note: To print a copy of the death certificate, click on "File", then click on "Print...".

If you want to save an electronic copy of this record, click on "File", then click on "Save a Copy...".

Transferring Case

The transferring case procedure allows you to transfer a case that is not yours to another on-line physician or an on-line coroner district so that they may complete the medical portion (cause of death) and sign the death record.

If you do not know who should be completing the death record or if the physician or coroner that should be completing the medical portion is not on-line, see the Relinquish Case section of the manual to relinquish the case.

There may be times when you have been selected as the physician to sign the death record, but the case is not yours. You know whose case it is and that physician or coroner is on-line.

- 1) Click on “**Process**” for the death that you want to transfer.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-35
08/09/2012 08:48 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main

Death | System

Open Cases

Task Description	Date Created			
Ready to Certify: SMITH LARRY 08/01/2012 null AAMORRIS	08/08/2012	Details	Edit	Process
Cause of Death: SMITH RACHEL 08/01/2012 null AAMORRIS	08/02/2012	Details	Edit	Process

News

News Message

TRAINING SITE You are using the VRV Web training site.



1

2) Confirm this individual is not your case. Once you have confirmed that this is not your case, click on the tab **"7 Certifier"**.

In-State Death -- First name: RACHEL Last name: SMITH Date of death: 08/01/2012

1 Decedent | 2 Decedent Data | 3 Parents and Informant | 4 Disposition | *5 CAUSE OF DEATH* | *6 CONDITION OF DEATH* | ***7 CERTIFIER*** | 8 Decedent Info | *9 NOTES/RELEASE*

1-3. Decedent's Name and Sex

First name: RACHEL
Middle name: JEAN
Last name: SMITH
Suffix: Select
Sex: Female
☐ Check if current last name equals last name prior to first marriage
Last name prior to first marriage: JORDAN

4-5. Date of Death and SSN

Date of death (MM/DD/YYYY): 08/01/2012
Found: ☐
On or about: ☐
Social security number: 999-99-9999
SSN verification status: Select

6-7. Date of Birth and Age

Date of birth (MM/DD/YYYY): 01/01/1
Age measure: Years
Age on last birthday (years): 82
Age on last birthday (months):
Age on last birthday (days):
Age on last birthday (hours):
Age on last birthday (minutes):

2

Previous Next Finish Cancel

Screen 7 allows you to transfer the case to the correct on-line physician or coroner.

- 3) Click on the **“Check to transfer case”** checkbox. The transfer physician list and the transfer district drop downs will be enabled for you to either transfer to an on-line physician or an on-line coroner district. From the appropriate drop down, select the physician or coroner district the case needs to be transferred to. Once you have tabbed off the selection, the system will show a message as seen here on this screen. If you do not know the district number, you can use the third pull down list to select by county.
- 4) Click on **“OK”** to proceed with the transfer or click on **“Cancel”** to stop the transfer procedure.
- 5) Click on **“Finish”** to complete transfer process.

Click on **Finish** to complete transfer process.

In-State Death – First name: RACHEL Last name: SMITH Date of death: 08/01/2012

1 Decedent | 2 Decedent Data | 3 Parents and Informant | 4 Disposition | 5 CAUSE OF DEATH* | 6 CONDITION OF DEATH* | 7 CERTIFIER* | 8 Decedent Info | 9 NOTES/RELEASE*

29. Person Completing Cause of Death

Certifier designation list:

Physician list:

Coroner list:

First name:

Middle name:

Last name:

Suffix:

Title:

Other title:

Coroner Case Info

Coroner case number:

Need to Transfer Case?

Check to transfer case: ☒

Transfer to physician list:

Transfer to this district (number list):

Transfer to this district (county list):

Need to Relinquish Case?

Check to relinquish case: ☐

Reason:

Windows Internet Explorer

You are transferring this to another certifier. When you transfer, the medical fields are no longer available to you and any medical information that you may have entered is removed. Click OK to continue to the next field, click CANCEL if you would like to correct your entry.

Residential unit:

Apt or Rm or Suite, No. only:

Rural route and/or box No.:

P.O. box, No. only:

Country:

State/province:

City or town:

Zip code:

Medical license number:

Physician online (Y/N)-phone:

Coroner online (Y/N)-phone:

Date signed by certifier (MM/DD/YYYY):

Select

ABDALLAH - JOSEPH - 428503

ABHYANKAR - SUNIL - 429543

ADDISSE - TEWODROS - 428657

ADEAGBO - BAMIDELE - 4332

AL-HASHMI - SAMER - 426014

AL-SARRACIN - ALAN - 418287

ALBERT - STEVEN - 524773

ALEXANDER - SHANE - 52529

ALI - BARAR - 432310

ALLARD - REBECCA - 431590

ALLEN - DAVID - 427617

ALLEN - JAY - 425875

ALLEN - PATRICK - 525758

ARLES - 418555

FREY - 428583

CY - 426498

DOUGLAS - 422

LARRY - 415917

THOMAS - 4322

TELIAN - 430907

APPL - BRAD - 421690

ARAKELOVA - NINA - 430422

ARANO - KRISTINE - 431758

ARGOSINO - RODOLPHO - 41

ARMS - RICHARD - 413726

ARROYO - ZEFERINO - 41609

ASHCOM - THOMAS - 424024

ATKIN - JOHN - 412842

ATTWOOD - JEFFREY - 42307

Select

1ST DISTRICT

2ND DISTRICT

3RD DISTRICT

4TH DISTRICT

5TH DISTRICT

6TH DISTRICT

7TH DISTRICT

8TH DISTRICT

9TH DISTRICT

10TH DISTRICT

11TH DISTRICT

12TH DISTRICT

13TH DISTRICT

14TH DISTRICT

15TH DISTRICT

16TH DISTRICT

17TH DISTRICT

18TH DISTRICT

19TH DISTRICT

20TH DISTRICT

Select

ALLEN

ANDERSON

ATCHISON

BARBER

BARTON

BOURBON

BROWN

BUTLER

CHASE

CHAUTAUQUA

CHEROKEE

CHEYENNE

CLARK

CLAY

CLOUD

COFFEY

COMANCHE


COWLEY

CRAWFORD

DECATUR

6) You will get a Warning Screen, showing items that are not completed on the death record. Scroll down and click on the “Save (as Pending)” button.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-35
08/09/2012 08:53 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main

Death | System

VRVWeb Warning

The record you are trying to save is UNFINISHED. All of the following fields are required for a FINISHED record.

Fields Required to Complete Death Record - Medical Section additional fields (to be completed by Certifier or Nosologist) Fix all the following:

Record is not Ready to Certify
Field Group Description: Record is not Ready to Certify

Cause of Death or Manner not completed
Field Group Description: Cause of Death or Manner not completed

Tobacco Cause not completed
Field Group Description: Tobacco Cause not completed

Fields Required to Complete Death Record - Medical Section Fix all the following:

[Certifier designation list](#)
Field Description: Select the type of certifier.

[Pregnancy status](#)
Field Group Description: Pregnancy status is required if Decedent's sex is Female

[Were Autopsy Findings Available?](#)
Field Group Description: Were Autopsy Findings Available to complete the cause of death?


[Cause of death must be completed](#)
Field Group Description: Cause of death must be completed

6

Save (as Pending)

7) Click on “Main Menu” or “Repeat Task”. Both buttons will return you to the main menu.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-35
08/09/2012 08:54 AM
Logout | Help | Accent Characters

Main
Death | System

Successful Transaction
Your transaction has been saved successfully.

Print Confirmation
Your actions have triggered the following documents to be printed.
Please select all documents you wish to print.

Print Draft Certificate: ☐

Print

Other Options
Following options are available:

Return to Record

7

Main Menu

Repeat Task

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-26-TRN
03/01/2011 08:57 AM
Logout | Help | Accent Characters

Main
Death | System

No open tasks

Task Description	Date Created
------------------	--------------

News Message
There is no news for Shane Morris

Logged in as:
Shane Morris
at DR SHANE MORRIS
Unit: DR SHANE MORRIS



Version: RLS-4-26-TRN
03/01/2011 08:57 AM
Logout | Help | Accent Characters

Main
Death | System

No open tasks

Task Description	Date Created
------------------	--------------

News Message
There is no news for Shane Morris

Click on “Main Menu” or “Repeat Task” if you want to return to the VRVWeb Menu screen.

The death should no longer be listed as an open task.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-35
08/09/2012 08:54 AM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main

Death | System

Open Cases

Task Description	Date Created	
Ready to Certify: SMITH LARRY 08/01/2012 null AAMORRIS	08/08/2012	Details Edit Process

News

News Message

TRAINING SITE You are using the VRV Web training site.

Relinquish Case Section

The relinquish case procedure allows you to relinquish a case that is not yours. There may be times that you get a case that is not yours and you either do not know whose case it is or the physician who should complete the medical portion is not on-line. Following this procedure will allow you to relinquish the case so that the funeral home or hospital that started the case can get the death record to the correct physician.

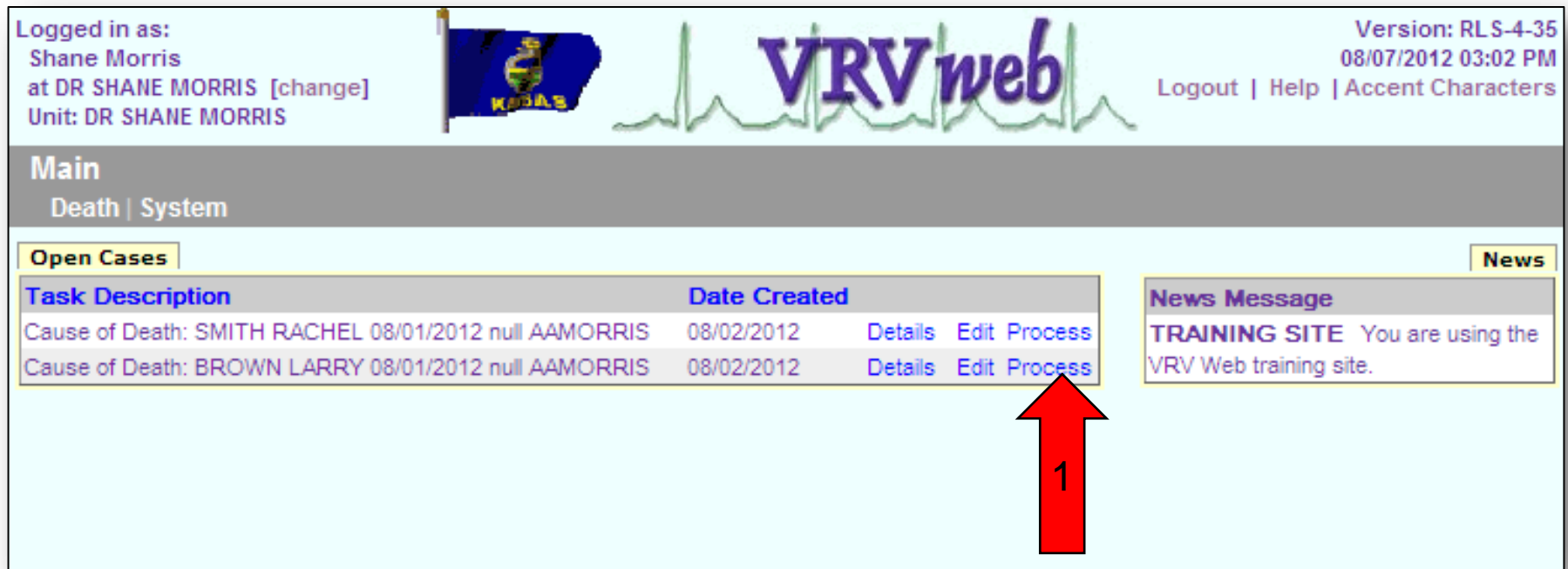
If you do know who should be completing the death record and the physician is on-line, see the Transfer Case section of the manual to transfer the case to that physician.

Relinquishing Case

May be accomplished by the physician or physician assistant.

There may be times when you have been selected as the physician to sign the death record, but the case is not yours and you either do not know whose case it is or if you do know the physician whose case this is and that physician is not on-line.

- 1) Click on **"Process"**.



The screenshot shows the VRVweb interface. At the top, it displays the user's login information: "Logged in as: Shane Morris at DR SHANE MORRIS [change] Unit: DR SHANE MORRIS". To the right, it shows the version "Version: RLS-4-35" and the timestamp "08/07/2012 03:02 PM", along with links for "Logout | Help | Accent Characters". Below this is a navigation bar with "Main" and "Death | System". The main content area is divided into two sections: "Open Cases" and "News". The "Open Cases" section contains a table with two rows of case data. The "News" section contains a message about the training site. A red arrow with the number "1" points to the "Process" link in the "Open Cases" table.

Task Description	Date Created	Details	Edit	Process
Cause of Death: SMITH RACHEL 08/01/2012 null AAMORRIS	08/02/2012	Details	Edit	Process
Cause of Death: BROWN LARRY 08/01/2012 null AAMORRIS	08/02/2012	Details	Edit	Process

News Message
TRAINING SITE You are using the VRV Web training site.

2) Confirm this individual is not your case. Once you have confirmed that this is not your case, click on the tab “7 Certifier”.

In-State Death -- First name:RACHEL Last name:SMITH Date of death:08/01/2012

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH

6 CONDITION OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE

1-3. Decedent's Name and Sex

First name

RACHEL

Middle name

JEAN

Last name

SMITH

Suffix

Select

Sex

Female

☐ Check if current last name equals last name prior to first marriage

Last name prior to first marriage

JORDAN

4-5. Date of Death and SSN

Date of death

08/01/2012

Found

☐

On or about

☐

Social security number

999-99-9999

SSN verification status

Select

6-7. Date of Birth and Age

Date of birth

01/01/1

Age measure

Years

Age on last birthday (years)

82

Age on last birthday (months)

Age on last birthday (days)

Age on last birthday (hours)

Age on last birthday (minutes)

Previous

Next

Finish

Cancel

A red arrow points from the bottom towards the tab labeled '*7 CERTIFIER*'. The number '2' is written in white inside the red arrow.

February 12, 2015

Physician Relinquish Case

3

3) Click on the “Check to relinquish case” checkbox.

In-State Death -- First name: RACHEL Last name: SMITH Date of death: 08/01/2012

1 Decedent

2 Decedent Data

3 Parents and Informant

4 Disposition

5 CAUSE OF DEATH

6 CONDITION OF DEATH

7 CERTIFIER

8 Decedent Info

9 NOTES/RELEASE

29. Person Completing Cause of Death

Certifier designation list

Certifying physician

Physician list

Select

Coroner list

Select

First name

SHANE

Middle name

ALLEN

Last name

AAMORRIS

Suffix

Select

Title

MD

Other title

MD

Address number

1000

Pre-directional

SW

Street name

JACKSON

Street designator

ST

e.g., St, Ave, etc.

Post directional

Select

Residential unit

STE

Apt or Rm or Suite, No. only

110

Rural route and/or box No.

P.O. box, No. only

Country

UNITED STATES

State/province

KANSAS

City or town

TOPEKA

Zip code

66612

Medical license number

98765

Physician online

Y - 785-555-1234

(Y/N)-phone

Coroner online

Select

(Y/N)-phone

Date signed by certifier

(MM/DD/YYYY)

Coroner Case Info

Coroner case number

Need to Transfer Case?

Check to transfer case

Transfer to physician list

Select

Transfer to this district (number list)

Select

Transfer to this district (county list)

Select

Need to Relinquish Case?

Check to relinquish case

Reason

30. Date Filed By State Registrar

Date filed by state registrar

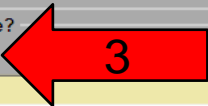
(MMDDYYYY)

Previous

Next

Finish

Cancel



After you check on the relinquish check box, a system message will appear.

- 4) Click on “OK” to continue relinquishing the case or you may click on “Cancel” to correct your entry. If you click on “Cancel”, uncheck the Check to relinquish case by clicking on the checkbox to stop the process of relinquishing the case.

In-State Death – First name: RACHEL Last name: SMITH Date of death: 08/01/2012

1 Decedent | 2 Decedent Data | 3 Parents and Informant | 4 Disposition | *5 CAUSE OF DEATH* | *6 CONDITION OF DEATH* | *7 CERTIFIER* | 8 Decedent Info | *9 NOTES/RELEASE*

29. Person Completing Cause of Death

Certifier designation list:

Physician list:

Coroner list:

First name:

Middle name:

Last name:

Suffix:

Title:

Coroner Case Info

Coroner case number:

Need to Transfer Case?

Check to transfer case: ☐

Transfer to physician list:

Transfer to this district (number list):


Transfer to this district (county list):

Need to Relinquish Case?

Check to relinquish case: ☒

Reason:

Windows Internet Explorer

 You are relinquishing this case. When you relinquish a case and enter the reason for relinquishing, the medical fields are no longer available to you and any medical information that you may have entered is removed.
Click OK to continue to the next field, click CANCEL if you would like to correct your entry.

Decedent Address

Apt or Rm or Suite, No. only:

Rural route and/or box No.:

P.O. box, No. only:

Country:

State/province:

City or town:

Zip code:

Medical license number:

Physician online (Y/N)-phone:

Coroner online (Y/N)-phone:

Date signed by certifier (MM/DD/YYYY):

- 6) After you have entered the reason, click on **"Finish"** at the bottom of the screen.

In-State Death – First name: RACHEL Last name: SMITH Date of death: 08/01/2012

[1 Decedent](#) |
 [2 Decedent Data](#) |
 [3 Parents and Informant](#) |
 [4 Disposition](#) |
 [*5 CAUSE OF DEATH*](#) |
 [*6 CONDITION OF DEATH*](#) |
 [*7 CERTIFIER*](#) |
 [8 Decedent Info](#) |
 [*9 NOTES/RELEASE*](#)

29. Person Completing Cause of Death

Certifier designation list

Physician list

Coroner list

First name

Middle name

Last name

Suffix

Title

Other title

Address number

Pre-directional

Street name

Street designator
e.g., St, Ave, etc.

Post directional

Residential unit

Apt or Rm or Suite, No. only

Rural route and/or box No.

P.O. box, No. only

Country

State/province

City or town

Zip code

Medical license
number

Physician online
(Y/N)-phone

Coroner online
(Y/N)-phone

Date signed by certifier
(MM/DD/YYYY)

Coroner Case Info

Coroner case number

Need to Transfer Case?

Check to transfer case ☐

Transfer to physician list

Transfer to this district (number list)

Transfer to this district (county list)

Need to Relinquish Case?

Check to relinquish case ☒

Reason

30. Date Filed By State Registrar

Date filed by state registrar
(MMDDYYYY)

- 7) You will get a Warning Screen, showing items that are not completed on the death record, scroll down and click on the “**Save (as Pending)**” button.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS

Version: RLS-4-35
08/07/2012 03:05 PM
Logout | Help | Accent Characters

Main
Death | System

VRVWeb Warning

The record you are trying to save is UNFINISHED. All of the following fields are required for a FINISHED record.

Fields Required to Complete Death Record - Medical Section additional fields (to be completed by Certifier or Nosologist) Fix all the following:

[Record is not Ready to Certify](#)
Field Group Description: Record is not Ready to Certify

[Cause of Death or Manner not completed](#)
Field Group Description: Cause of Death or Manner not completed

[Tobacco Cause not completed](#)
Field Group Description: Tobacco Cause not completed

Fields Required to Complete Death Record - Medical Section Fix all the following:

[Certifier's first name](#)
Field Description: Enter the name of the certifier - first name.

[Certifier designation list](#)
Field Description: Select the type of certifier.

[Certifier's last name](#)
Field Description: Enter the name of the certifier - last name.

[Address of Person Completing Cause of Death](#)
Field Group Description: Address of Person Completing Cause of Death is required

[Pregnancy status](#)
Field Group Description: Pregnancy status is required if Decedent's sex is Female

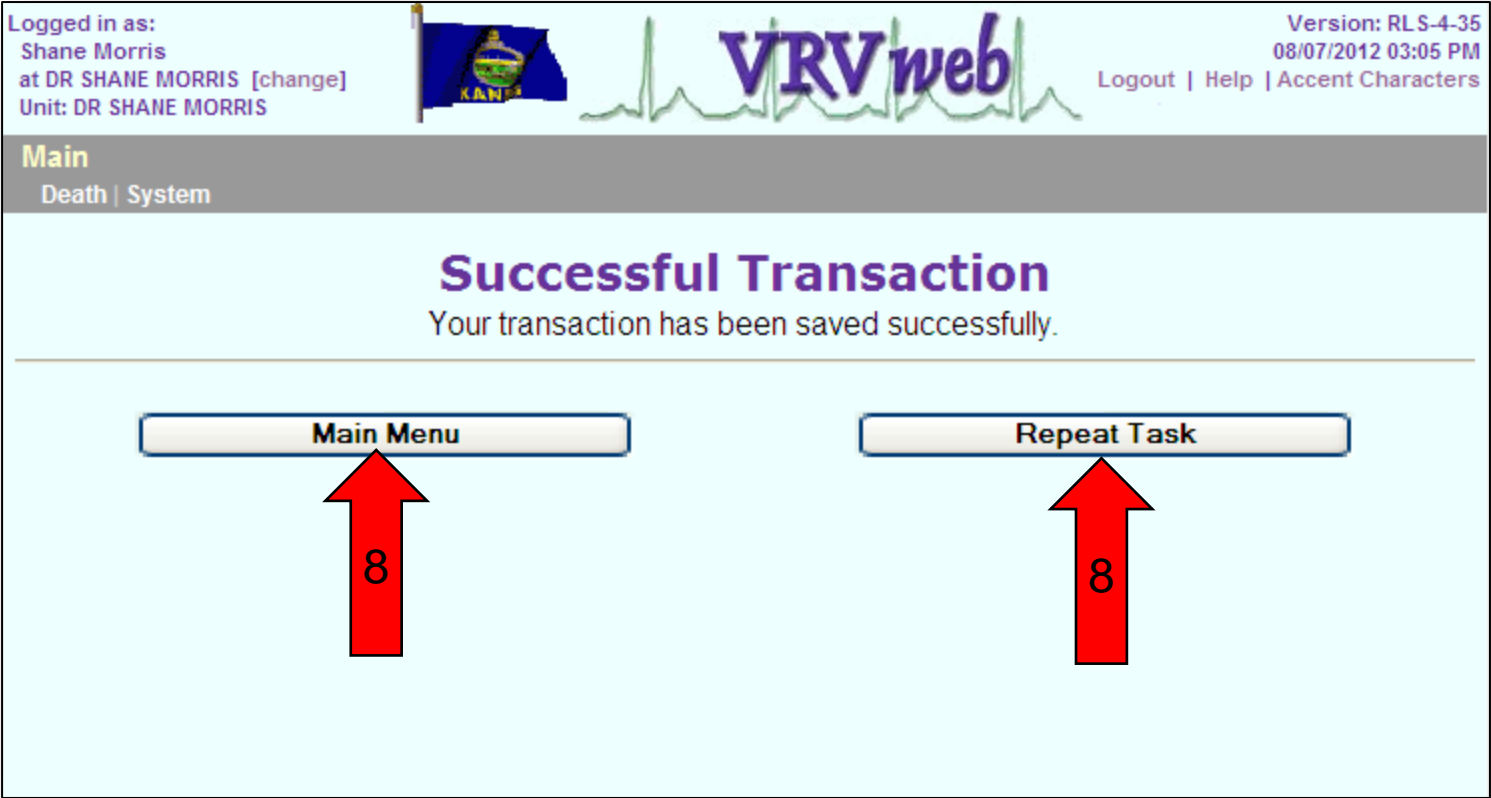
[Were Autopsy Findings Available?](#)
Field Group Description: Were Autopsy Findings Available to complete the cause of death?

[Cause of death must be completed](#)
Field Group Description: Cause of death must be completed





You have successfully relinquished the case. The funeral home or hospital will be notified automatically so they can proceed with getting the record to the correct physician.

8) Click on “Main Menu” or “Repeat Task” buttons to return to the main menu screen.



As you can see from this screen shot, the case you relinquished no longer appears under your open cases.

Logged in as:
Shane Morris
at DR SHANE MORRIS [change]
Unit: DR SHANE MORRIS



Version: RLS-4-35
08/07/2012 03:06 PM
[Logout](#) | [Help](#) | [Accent Characters](#)

Main

Death | System

Open Cases

Task Description	Date Created	
Cause of Death: BROWN LARRY 08/01/2012 null AAMORRIS	08/02/2012	Details Edit Process

News

News Message

TRAINING SITE You are using the VRV Web training site.

Helpful Hints

VRVWeb: <https://ksrvvweb.kdheks.gov/vrv/>

KDHE Home Page: <http://www.kdheks.gov/>

- Press the **End** key to go to the bottom of page or list; similarly, press the Page Down key to move partially down a page.

- Press the **Home** key to go to the top of page; similarly, press the **Page Up** key to move partially up a page.

- Press the **Tab** key to move forward.

- Press the **Shift+Tab** keys to move back.

- Drop-down list: Type the first letter of the selection (e.g. “Y” for Yes).

- Check box: Use the space bar to select or deselect.

- Press the **Alt+T** keys to insert the current date (without having to type it in manually).

- Do not use periods when entering, save keystrokes.

- Do not use the ampersand (&) in place of typing out the word “AND”.

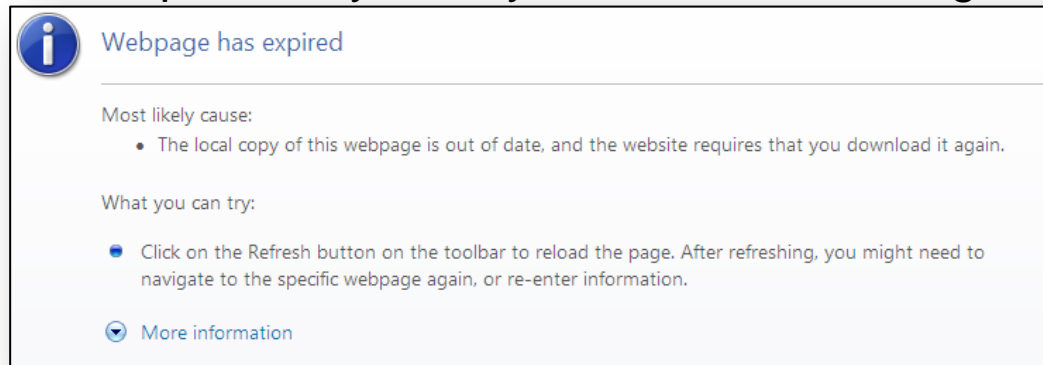
- Do not use periods for half numbers, (e.g. for 101 ½, do not enter 101.5).

- Always tab through the fields to ensure calculation and coding fields are getting set in the background.

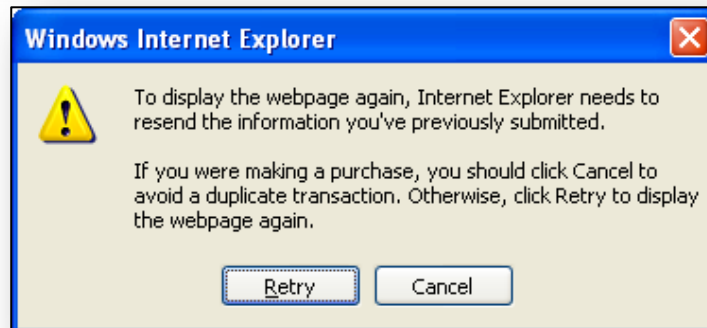
- US Territories are: American Samoa, Guam, Northern Mariana Islands, Puerto Rico and Virgin Islands. These are found on the State drop-down fields after choosing United States for the country.

- Use Drop downs for counties and cities whenever possible and tab off the field after the selection is made.

- Press **Esc** (the escape key) on your keyboard if you accidentally removed information from a field and you want to put the information back.
-
- If you hit the backspace key on your keyboard while entering information into the VRVWeb, it's possible you may receive the following screen.



Press **F5** on your keyboard. You will then get this pop-up.



Click the “**Retry**” button. You will then be taken back to the VRVWeb and most of your data that you have entered should still be there.

- To find out what browser you are using, type whatbrowser.org in your internet browser address bar and hit enter.

- Space is a character. Don't put a space after entering names, cities, and other fields.

- Press the **Ctrl + F** keys to open the search function to locate a word or words in your document or on the screen.

- Press **Ctrl + P** to open a print function.

- Press **Ctrl + C** to copy text.

- Press **Ctrl + V** to paste copied items.

- Hover your mouse cursor over a field name in the VRV Web for more information on what to enter for that field.

- Use drop down lists whenever possible. If the item you want to select is not on the drop down list, please inform Vital Statistics so we can add that item to the list.

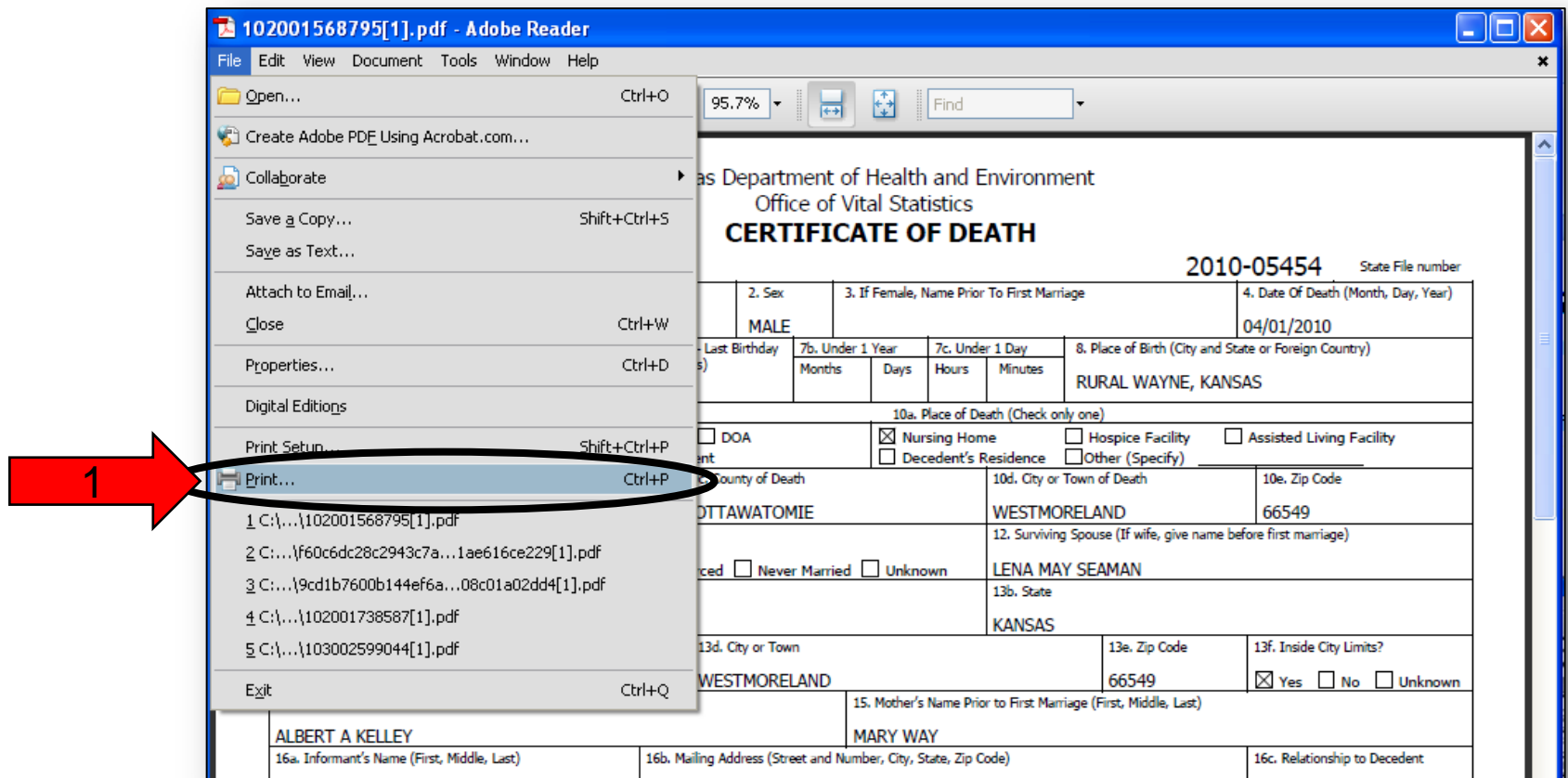
Trouble Shooting

Trouble Shooting

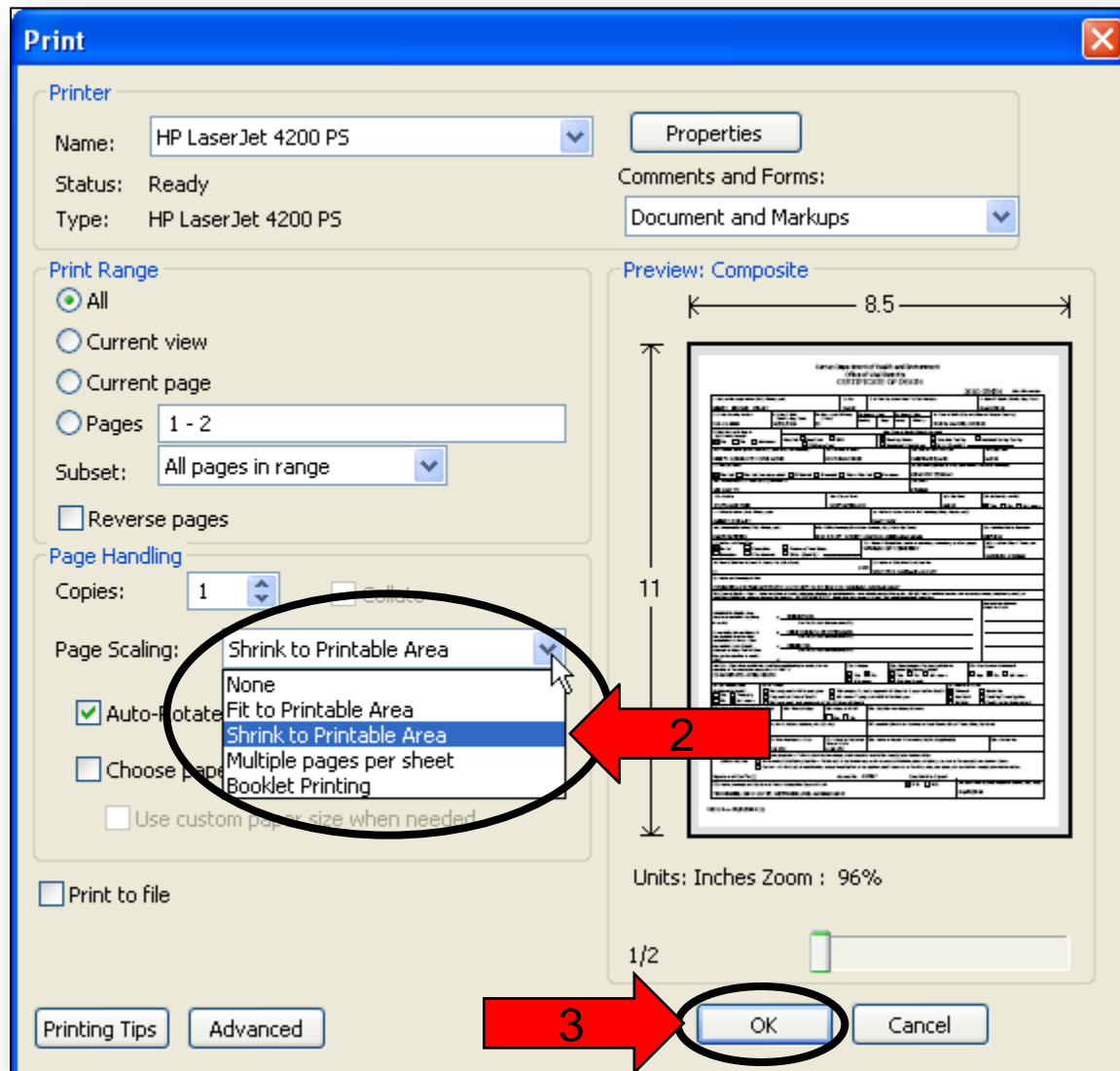
Adobe Print Settings

“When I print a certificate with Adobe, it cuts off part of the certificate. How do I print the entirety of the record?”

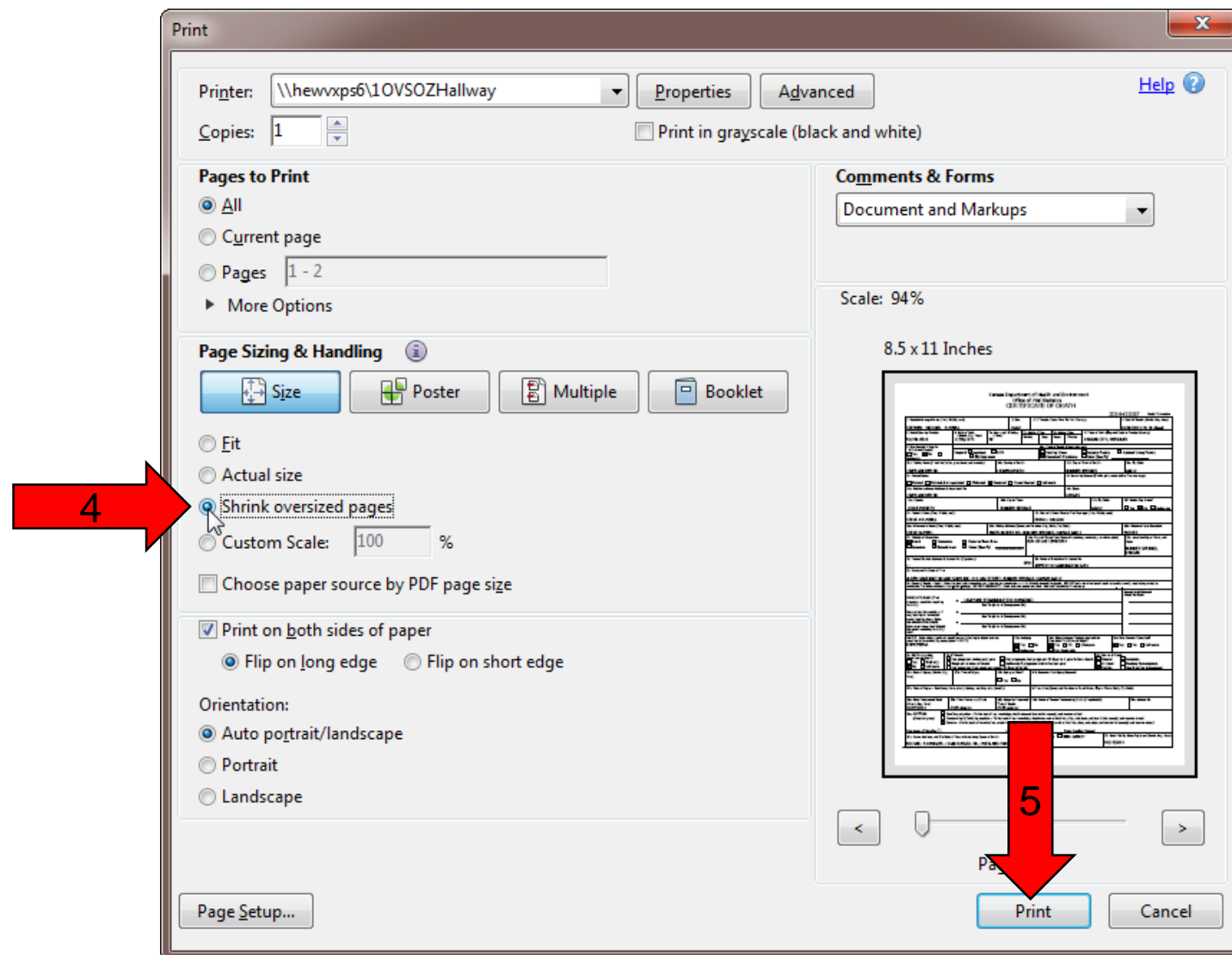
- 1) Prior to printing your next certificate or draft certificate or any form that loads in Adobe, click on **“File”**, then click on **“Print”** from the drop down menu.



- 2) Make sure the Page Scaling is set to: “**Shrink to Printable Area**”.
- 3) Click on ‘**OK**’.



- 4) If you have a different version of Adobe Reader, you may not see the pull down menu. Instead, check the **“Shrink oversized pages”** option.
- 5) Then click on **“Print”**.



“When I generate a document (draft birth or death), it has different information than what was entered in the VRV Web. How do I fix that?”

- 1) Return to the record.
- 2) Go to the page that had the incorrect information.
- 3) Re-enter and Tab through everything on that page.
- 4) Generate another draft certificate to verify that the changes worked.

“I am a physician/coroner and I have a death record on my Open Cases that should be on a different physician’s/coroner’s Open Cases. How do I move the record to that physician’s/coroner’s Open Cases?”

- 1) Follow the instructions for transferring a record in the “Transfer” chapter of the Physician and Physician’s Assistant User Guide.

“I’m a physician and I received an email notification that I had a death record that I needed to complete on the VRV Web, but when I logged in, there was nothing on my open cases. Where is the record?”

- 1) The Funeral Home may have transferred the death record to another physician or a coroner district. To make sure, please call Kansas Vital Statistics at (785) 296-1431, (785) 296-0791, (785) 296-2675, or email ovsfieldreps@kdheks.gov.

“I cannot generate a document from the main menu, including the monthly report. What can I do?”

- 1) You will need to make sure you are using Internet Explorer.
- 2) Check to make sure you have your Compatibility View Setting turned off. For help turning off your compatibility view settings, call (785) 296-0791, (785) 296-2675, (785) 296-1431, or email ovsfieldreps@kdheks.gov.

“When I’m logging in, I get a question I never set up. How do I answer the question?”

- 1) You don’t.
- 2) Close all currently open windows.
- 3) Start the login process over again.
- 4) If you continue to receive a question that you never set up, call our office at (785) 296-2675, (785) 296-0791, (785) 296-1431, or email ovsfieldreps@kdheks.gov.

“When I’m logging in, I see a different picture than the one I selected when I set up my account. Should I continue logging in?”

- 1) No. Do not continue if you see the wrong picture.
- 2) Close all currently open windows.
- 3) Start the login process over again.
- 4) If you continue to receive an image that you didn’t select, it’s possible you might have answered your security question wrong. Follow the instructions for recovering your security questions in the Password and Login section of the User Manual(page 53-58).

“The system is telling me that I need to change my password before it expires, how do I do this?”

- 1) Follow the instructions on changing your password in the Password and Login section, pages 20-24.

“The system is asking me to enter my PIN, but I don’t remember having a PIN.”

- 1) When you set up your account, we suggested that you set your PIN to the last four digits of your social security number.
- 2) If that didn’t work, you can call our office at (785) 296-0791, (785) 296-2675, (785) 296-1431, or email ovsfieldreps@kdheks.gov to have someone at the state help you reset your PIN.

“We have a new employee in our office. Can I just let them use my account to log into the system?”

- 1) No. Do not share your login information with other users.
- 2) Call our office at (785) 296-0791, (785) 296-2675, (785) 296-1431, or email ovsfieldreps@kdheks.gov so we can send you a user agreement for a new user.

“I was working on a record and I clicked on ‘finish’ to save what I have entered so far and the record is no longer on my Open Cases tab. Where did it go and how can I get it back?”

- 1) It’s possible a system flag was set incorrectly in the background. Call our office at (785) 296-1431, (785) 296-0791, (785) 296-2675 or email ovsfieldreps@kdheks.gov and explain the situation.

“I set the Compatibility View Setting correctly, but my computer is not saving the change.”

- 1) Open up Internet Explorer and click on “Tools”.
- 2) Click on “Internet Options”.
- 3) Uncheck the “Delete browsing history on exit” box.

