



MISSOURI DEPARTMENT OF
HEALTH &
SENIOR SERVICES

**Missouri Electronic Vital Records (MoEVR)
Critical Congenital Heart Disease (CCHD)
Screening Results**

User Manual

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Introduction

The Missouri Electronic Vital Records (MoEVR) system is an online data entry system used to support the registration of Missouri vital events for the Missouri Department of Health and Senior Services and other users such as birthing facilities, attending physicians, funeral directors, and medical examiners. Through MoEVR, birthing facilities are able to enter newborn CCHD screening results and meet the reporting requirements of Missouri Statute 191.334.

This User Manual will outline the steps to obtain access to the CCHD reporting screen within MoEVR and provide step-by-step instructions on how to use the database to report CCHD screening results. If questions or issues arise regarding MoEVR or the CCHD reporting process, please utilize the following contact phone numbers:

MoEVR Help Desk
573-751-7149

Bureau of Genetics and Healthy Childhood, Newborn Screening Program
573-751-6266 or 800-877-6246

Requesting Access

To access the MoEVR website, the application form **VITAL RECORDS USER ACCESS REQUEST MO 580-2968** must be completed by the applicant and approved by the Bureau of Vital Records. To obtain this form, please contact the Bureau of Vital Records either by phone at 573-526-0348 or by email at moevrsupport@health.mo.gov.

When you receive the form, the following information must be completed. At the top of the form, in the section **IDENTIFYING INFORMATION**, complete the data fields for:

- Name
- Office Address
- Social Security Number
- E-mail Address
- Office Telephone
- Office Fax

At the top of the form on the right side, there is a section with the heading **ACTION REQUESTED**. If you are not currently a MoEVR user, check mark the boxes for **Add User** and **Add Access**. If you already have a current login for MoEVR, check mark the box for **Add Access**. To the right of the section **ACTION REQUESTED**, there is a section with the heading **PREFERRED METHOD OF CONTACT**. Please indicate your preference.

Below the section **IDENTIFYING INFORMATION**, there is the section titled **SELECT ROLE(S) THAT APPLY**. In this section, go to the first column labeled **BIRTH** and check mark **Data Entry Clerk - CCHD**. The sections pertaining to **CERTIFIER/DECERTIFIER**, **LICENSED FUNERAL DIRECTOR**, **LICENSED CERTIFIER**, and **LICENSED EMBALMER** do not apply to your request. However, to the right of these sections, there is a section where you are to list the name and complete address of each facility associated for this user. Please complete this section as applicable.

At the bottom of the form, there is the section with the heading **SECURITY STATEMENT/APPROVALS**. Sign your name in the **USER SIGNATURE** field and provide the date the form was completed. You will need to have a supervisor in your hospital/center/facility sign in the **SUPERVISOR SIGNATURE** field and **DATE when the form was signed**. Once the form has been completed, either mail the form to:

Missouri Department of Health and Senior Services
Bureau of Vital Records
P.O. Box 570
Jefferson City, MO 65102-0570

OR

Fax the form to 573-526-3846, as listed at the top of the form.

Once the form has been processed, the Bureau of Vital Records will notify you by email stating that access has been granted. The email will contain an identification number, temporary password to be used to login to MoEVR, and a link that will guide you through the steps of selecting security questions and a security image.

Before MoEVR may be accessed, you must have the web browser Internet Explorer version 6.026 or higher.

Logging into MoEVR

1. The web address to log into MoEVR is: <https://moevr.dhss.mo.gov/moevr/gui/login/welcomeMO.jsp>.
2. Click the **LOGIN** button at the bottom of the page as indicated below.

PHONE . FAX
P (573) 751-7149
F (573) 526-3846

PHYSICAL . ADDRESS
930 Wildwood Drive
Jefferson City, Missouri 65109

MAILING . ADDRESS
Missouri Department of
Health and Senior Services
Bureau of Vital Records
P.O. Box 570
Jefferson City, MO 65102



MISSOURI ELECTRONIC VITAL RECORDS

The purpose of the Missouri Electronic Vital Records (MoEVR) system is to support the registration of Missouri vital events for the Missouri Department of Health and Senior Services and other users such as funeral directors, attending physicians, medical examiners and birthing facilities. This system may be used only for the purpose for which it is provided. Any attempt to file fraudulent certificates of live birth, death or reports of fetal death is punishable in accordance with Missouri statutes.

By accessing this system, I agree to use this system only for the purpose of registering a Certificate of Live Birth, Certificate of Death or Report of Fetal Death for events occurring in the State of Missouri.

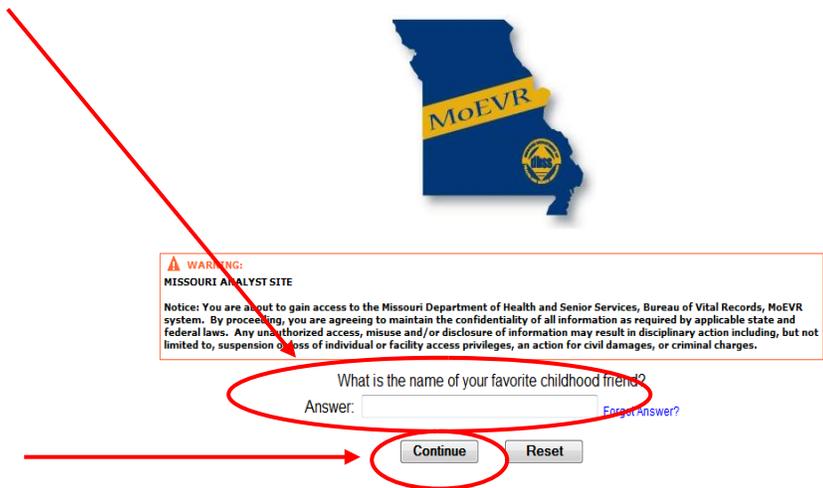
I understand that failure to adhere to the above agreement will result in loss of access to the MoEVR system. Any unauthorized access, misuse and/or disclosure of information may result in disciplinary action including, but not limited to, suspension or loss of individual or facility access privileges, an action for civil damages, or criminal charges.

LOGIN

3. Enter the **Username** provided by the Bureau of Vital Records. Your **Username** will be a combination of your last name and first name. Click the **Continue** button as indicated below. Please note: the username is case sensitive so make sure the caps lock is off before beginning.



4. Enter the appropriate answer to the security question you selected, and click the **Continue** button as indicated below.



5. Verify the security image shown is the one you selected and click the **Continue** button. Below is an example of a security image from which you can select.



WARNING:
MISSOURI ANALYST SITE

Notice: You are about to gain access to the Missouri Department of Health and Senior Services, Bureau of Vital Records, MoEVR system. By proceeding, you are agreeing to maintain the confidentiality of all information as required by applicable state and federal laws. Any unauthorized access, misuse and/or disclosure of information may result in disciplinary action including, but not limited to, suspension or loss of individual or facility access privileges, an action for civil damages, or criminal charges.

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



flowers
[Forgot Image or Key?](#)

6. Enter your chosen password and click the **Log In** button as indicated below.



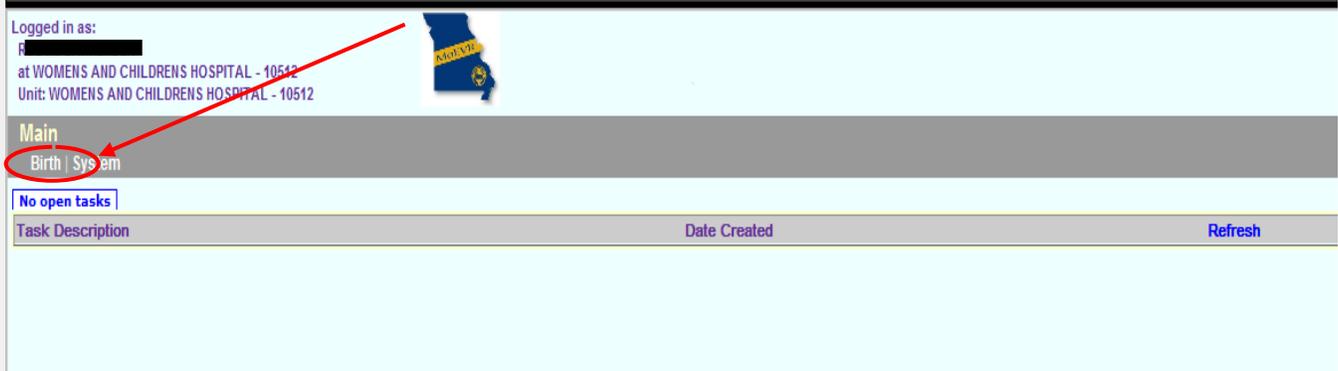
WARNING:
MISSOURI ANALYST SITE

Notice: You are about to gain access to the Missouri Department of Health and Senior Services, Bureau of Vital Records, MoEVR system. By proceeding, you are agreeing to maintain the confidentiality of all information as required by applicable state and federal laws. Any unauthorized access, misuse and/or disclosure of information may result in disciplinary action including, but not limited to, suspension or loss of individual or facility access privileges, an action for civil damages, or criminal charges.

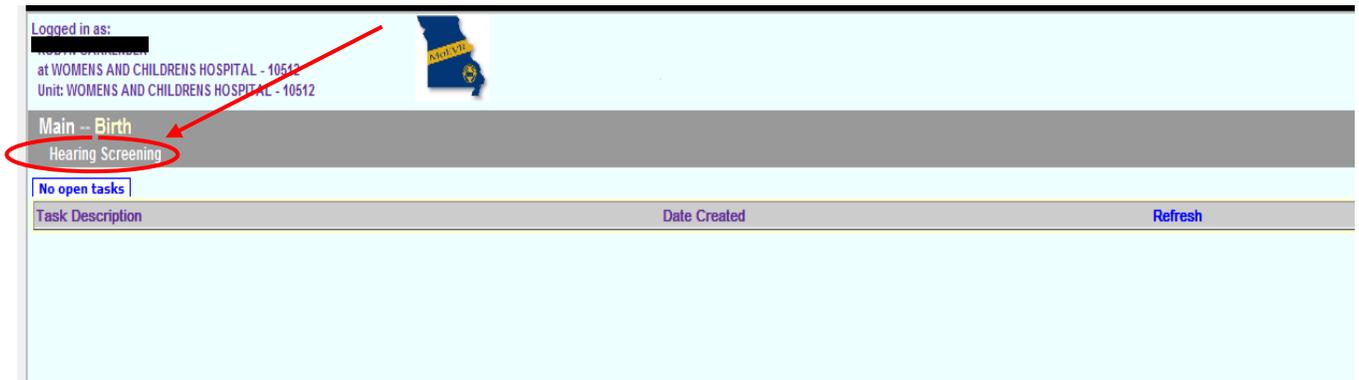
Password: [Forgot Password?](#)

Locating the CCHD Reporting Screens

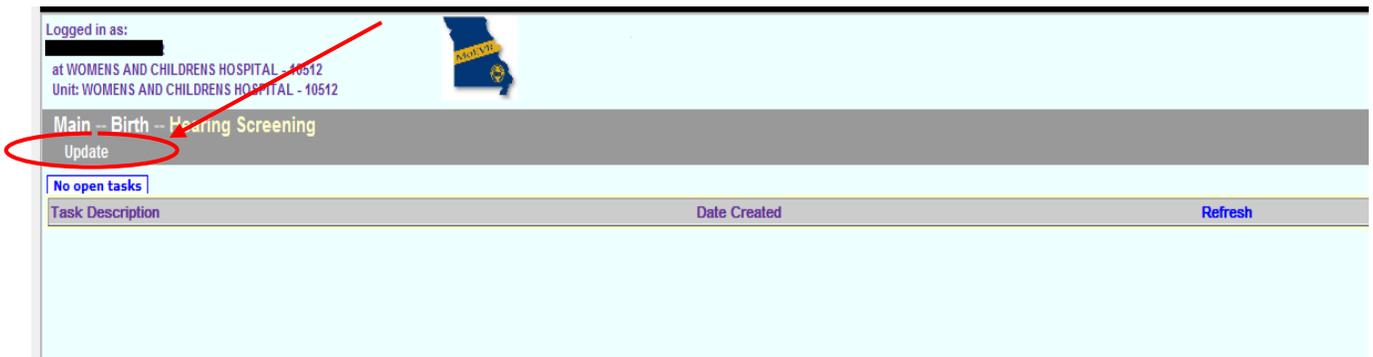
1. Click on **Birth** located below **Main** as indicated below.



2. Click on **Hearing Screening** below **Main – Birth** as indicated below.



3. Click **Update** below **Main – Birth – Hearing Screening** as indicated below.



Searching for Records

The information provided in the Registrant form will be used to search birth records from your facility only. Birth certificate data must be entered into the MoEVR system prior to this time in order for the baby's information to be located.

1. Type any combination of the following data fields into the form labeled Registrant, using the tab key between text fields:
 - Child's First Name
 - Child's Middle Name
 - Child's Last Name
 - Child's Sex (From drop down select male, female or undetermined)
 - Child's Date of Birth **OR** date of birth ranges From and To (Enter as mm/dd/yyyy)
 - Mother's First Name
 - Mother's Last Name
 - Mother's Maiden Name
 - Father's First Name
 - Father's Last Name

Once the Registrant information has been entered, click the **Search** button.

Main -- Birth -- Hearing Screening -- Update

Registrant

Child's Name

First: BABY
Middle: LITTLE
Last: GIRL
Soundex on last name:

Child's Gender

Sex: FEMALE

Date of Birth

Date of birth (mm/dd/yyyy): 01/01/2014
From:
To:

Mother's name

First: MAMMA
Last: FOR
Maiden name: BABY

Father's name

First: DADDY
Last: BABY

2. The child's first and last name, date of birth, sex, and mother's maiden name, will appear on the screen as indicated below. If your search criteria were broad, you may have a list of names to choose from.

Logged in as: [REDACTED] at WOMEN'S AND CHILDREN'S HOSPITAL - 10512 Unit: WOMEN'S AND CHILDREN'S HOSPITAL - 10512

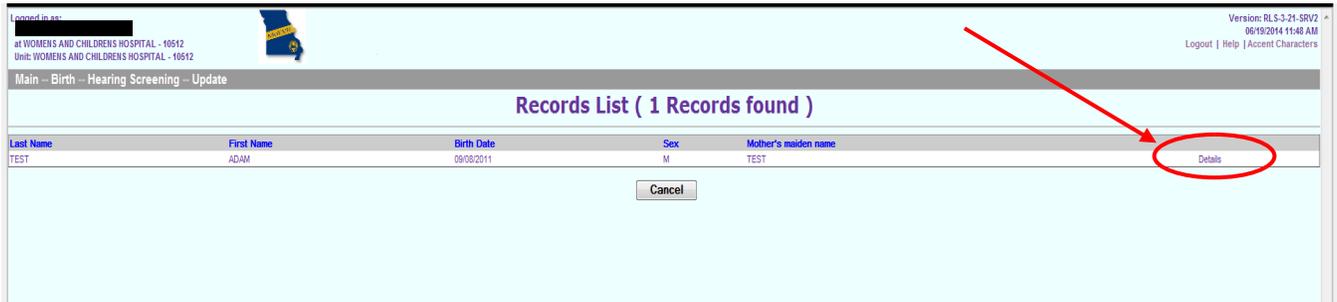
Version: RLS-3-21-SRV2 06/19/2014 11:48 AM Logout | Help | Accent Characters

Main -- Birth -- Hearing Screening -- Update

Records List (1 Records found)

Last Name	First Name	Birth Date	Sex	Mother's maiden name	Details
TEST	ADAM	09/08/2011	M	TEST	Details

3. Locate the appropriate record and click on **Details** at the far right of the row in which the baby's name, birth date, sex, and mother's maiden name appears.



4. After clicking on **Details**, the screen below should appear. This is information from the birth certificate entry screen. Verify this is the correct baby, and click the **Continue** button at the bottom of the screen as indicated below. If this is not the correct baby, go back to the Registrant screen by clicking **Cancel** on the screen below and then click **Cancel** on the Record List screen. Re-enter the information to locate the correct baby.

If you are still unable to locate a match, the most likely reasons would be that the birth certificate has not been entered or the baby has a different last name than was entered on the birth certificate. If the birth certificate has not been entered, you will need to wait to enter the CCHD screening results until after the birth certificate has been entered into MoEVR. If the baby was not born at your facility, you must complete a paper form. If the birth certificate has been entered, please refer to the baby's birth record and the name entered on the birth certificate in order to ensure you are using the correct name.



Documenting CCHD Screening Results

1. Another view of the birth certificate portion of MoEVR will appear. Click the **Next** button to proceed to the data entry screen.

Main -- Birth -- Hearing Screening -- Update

1 Baby and Mother | 2 Hearing Screening | 3 CCHD Reporting

Medical Record Numbers
Mother's medical record number:
Newborn's medical record number:

Baby's Name
First: RUDOLPH
Middle:
Last: REINDEER
Suffix:

Date of Birth
Date of birth: 12/20/2012

Time of Birth
Time of birth: 08:00
Time indicator: A
(A=AM; P=PM; M=military; N=noon; D=midnight; U=unknown)

Sex
Sex: M

Mother's Current Legal Name
First: LUCY
Middle:
Last: REINDEER
Suffix:

Mother's Name Prior to First Marriage
First: LUCY
Middle: LOU
Last: DOE
Suffix:

Birth/Transfer Facility
Birth Facility name: TRUMAN MEDICAL CENTER - HOSPITAL HILL
Newborn transferred within 24 hours of delivery? N
Transferred to name:
Facility ID (infant transferred to):

Previous | **Next** | Finish | Cancel

2. The Hearing Screening results reporting screen should now appear. The fields will be grey or white and you will not be able to manipulate this screen. Click on the **Next** button as indicated below.

Main -- Birth -- Hearing Screening -- Update

1 Baby and Mother | 2 Hearing Screening | 3 CCHD Reporting

Hearing Screening
Was a hearing screening test performed? Yes

Hearing Results and Methods
Left ear results: PASS | Left ear method: OAE
Right ear results: PASS | Right ear method: OAE

Screening Date
Date of screening (MMDDYYYY): 12/16/2013

Not Screened
Reason not screened: Select
Specify other reason:

Screening Before Discharge
Did screening occur prior to discharge? Yes

Bloodspot/Hearing Lab Form Number
Bloodspot/Hearing form number: #1140800945
Re-enter bloodspot/hearing form number:

Discharge Disposition
Discharge disposition: HOME

Screener
Screener: OTHER

Hearing Risk Factors (check all that apply)
 No risk factors
 Caregiver concern regarding hearing status
 Family history of permanent childhood hearing loss
 ECMO
 In-utero infection (e.g. CMV, herpes, rubella, syphilis and toxoplasmosis)
 Syndrome/physical finding associated with hearing loss
 Neurodegenerative disorder
 Culture positive postnatal infection associated with hearing loss (e.g. meningitis)
 Chemotherapy
 NICU stay more than 5 days
 Head trauma (e.g. basal skull/temporal bone fracture)
 Ventilation support
 Hyperbilirubinemia with transfusion
 Ototoxic medications (e.g. gentimycin, tobramycin)
 Loop diuretics (e.g. furosemide)
 Craniofacial anomalies
Other, specify:

Newborn's Primary Care Physician/Clinic
Name:

Hearing Screening Comments

Previous | **Next** | Finish | Cancel

- The CCHD Reporting screen should now appear. Data fields that appear white must be filled. Begin data entry by indicating if CCHD screening was or was not completed. If “Yes” is selected, you will be prompted to enter data for the **First CCHD Screening Result**. If “No” is selected, you will be prompted to enter data for why baby was not screened.

The screenshot shows the 'CCHD Reporting' screen with the following sections:

- Critical Congenital Heart Disease (CCHD)**: CCHD Screen completed?
- First CCHD Screening Result**: Date of Screen (MMDYYYY), Time of Screen, Time Indicator, SpO2 Right Hand %, SpO2 Foot %, Screening Outcome, Not Screened due to, Other, specify.
- Second CCHD Screening Result**: Was second CCHD screen completed?, Date of Screen (MMDYYYY), Time of Screen, Time Indicator, SpO2 Right Hand %, SpO2 Foot %, Screening Outcome, Not Screened due to, Other, specify.
- Third CCHD Screening Result**: Was third CCHD screening completed?, Date of Screen (MMDYYYY), Time of Screen, Time Indicator, SpO2 Right Hand %, SpO2 Foot %, Screening Outcome, Not Screened due to, Other, specify.
- Final Disposition**: Echocardiogram completed?, Status?, Other, specify.
- CCHD Comments**: Text area for comments.

Navigation buttons: Previous, Next, Finish, Cancel.

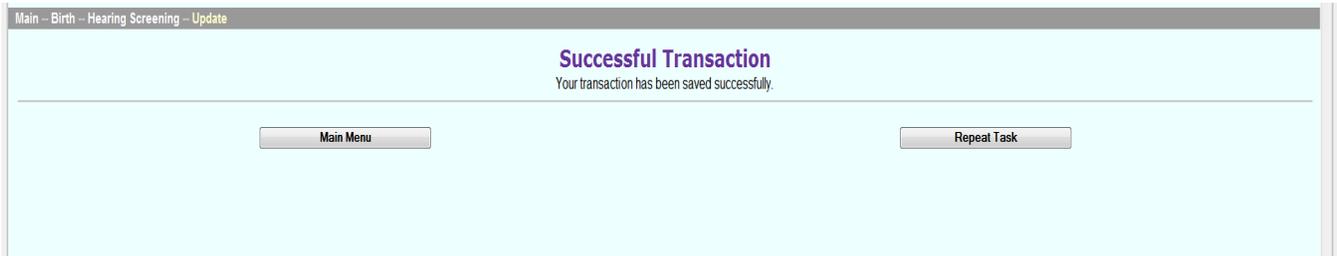
- Continue to enter CCHD screening results as indicated. There is a comment box located at the bottom right of the screen. Please utilize this free text box to document any comments that may clarify baby’s disposition or provide additional information regarding CCHD screening results. Please review your documentation to verify all data has been entered accurately. Then click on the **Finish** button as indicated below.

The screenshot shows the 'CCHD Reporting' screen with the following data entered:

- Critical Congenital Heart Disease (CCHD)**: CCHD Screen completed?
- First CCHD Screening Result**: Date of Screen (MMDYYYY) 11/07/2015, Time of Screen 22:00, Time Indicator Military, SpO2 Right Hand % 98, SpO2 Foot % 94, Screening Outcome R = Repeat Screen in 1 hour, Not Screened due to Select, Other, specify.
- Second CCHD Screening Result**: Was second CCHD screen completed? Yes, Date of Screen (MMDYYYY) 11/07/2015, Time of Screen 23:00, Time Indicator Military, SpO2 Right Hand % 97, SpO2 Foot % 99, Screening Outcome R = Repeat Screen in 1 hour, Not Screened due to Select, Other, specify.
- Third CCHD Screening Result**: Was third CCHD screening completed? Yes, Date of Screen (MMDYYYY) 11/08/2015, Time of Screen 00:00, Time Indicator Military, SpO2 Right Hand % 98, SpO2 Foot % 97, Screening Outcome P = Pass, Not Screened due to Select, Other, specify.
- Final Disposition**: Echocardiogram completed? Select, Status? W = Within Normal Limits, Other, specify.
- CCHD Comments**: DISCHARGED HOME WITH PARENTS. NORMAL NEWBORN CARE.

Navigation buttons: Previous, Next, Finish, Cancel. The 'Finish' button is highlighted with a red circle and arrow.

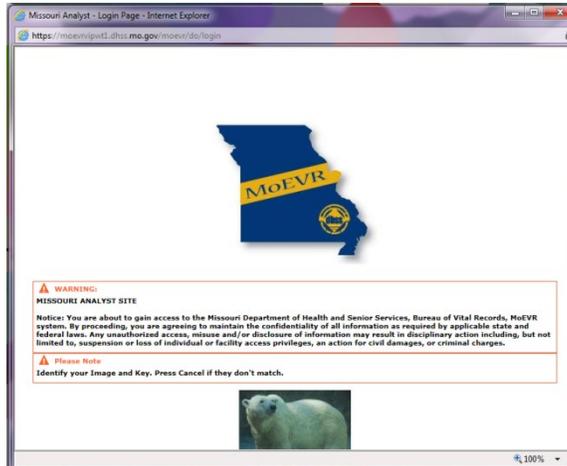
- The final screen is labeled **Successful Transaction**. The CCHD screening record has now been entered into the MoEVR system. Click the **Repeat Task** button located on the right side of the screen to enter another CCHD screening result. This will take you back to the **Registrant** entry screen. If the **Main Menu** button is clicked, you will be taken back to step 1 of *Locating the CCHD Reporting Screens* as outlined on page 8 of this manual.



Troubleshooting

Problem: You cannot see the buttons below the picture and you cannot scroll down the page (see below).

Suggested Solution: Attempt to enlarge or maximize your screen.



Problem: You accidentally clicked the Finish button before you were actually finished documenting.

Suggested Solution: You can pull the baby's record back up and continue documenting where you left off then click Finish to save the newly added information.

Problem: You want to document the first screen while you are waiting for the required time to pass to complete the second screen.

Suggested Solution: You must have completed the CCHD screening in its entirety before documenting the screening results in MoEVR.

Problem: You want to enter both CCHD and hearing screening results.

Suggested Solution: In order to be able to enter results for both CCHD and hearing screening, you must be approved for both user roles. If you have already been approved for both roles, please reference the MoEVR Hearing & CCHD User Manual located at www.health.mo.gov/cchd. If you would like to request information on how to obtain access for both roles, please contact the Bureau of Genetics and Healthy Childhood at 573-751-6266.

Please Note: If a baby was not born at your facility, you will not be able to document this child's screening results in MoEVR. In this situation, please complete the paper CCHD Reporting Form available at www.health.mo.gov/cchd and submit via mail or fax to the Bureau of Genetics and Healthy Childhood as indicated on the form.

If you have questions regarding technical difficulty logging into MoEVR, please call the MoEVR help desk at 573-751-7149.

For questions regarding CCHD screening results reporting, please call the Bureau of Genetics and Healthy Childhood at 573-751-6266 or 800-877-6246.