

2019

ERAVE PHYSICIAN'S USER MANUAL

Physician's Guide to Electronic Death Reporting

This guide contains instructions on how to enter medical information for a deceased individual using the Electronic Death Registration System. This guide is intended for use by Certifying Physicians Only.



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1 To-Do Queues

All uncompleted death cases must be opened from the Open Cases Queue. Once opened, the Physician can complete and certify the Medical Information Section.

Once you log into ERAVE click “View Queues” to display the To Do Queues.



Open Cases Queue

- Houses death cases that have been assigned to the Physician for completion and/or certification of the Medical Information Section.
- Death Cases that have been completed by the Physician and are waiting to be submitted for registration by the funeral home.

Open Cases (3) Pending COD (1) RFI (1)							
First	Last Name	Date of Death	PI Status	Med. Status	Case Status	Details	Action
TODD	LANDRY	12/01/2017	New	Certified	Not submitted	Details	Process
BRETT	BELEAM	11/24/2017	New	Case pending	Not submitted	Details	Process
COUNTY	CORONER	11/14/2014	Case pending	Case pending	Not submitted	Details	Process

Pending COD Queue

- Houses death case with the Cause Of Death pending. This type of death case will only appear in this queue when the death case becomes registered at the Vital Records State Office. The Physician can access the death case from this queue at any time and enter the Cause and Manner of Death. Once that Medical Information has been added, the death case will disappear from the Pending COD queue.

Open Cases (3) Pending COD (2) RFI (1)											
First	Last Name	Date of Death	County of Death	Date of Birth	Sex	Funeral Home	PI Status	MI Status	Case Status	Certificate	Rev Details Action
PERRY	PENDING	11/05/2017	CLEVELAND	01/01/1944	M	ERAVE FUNERAL HOME	Signed	Certified	Registered	20170000010	Details Process

RFI Queue

- Holds case that have a pending Request For Information (RFI) letter from the State Office. An RFI letter is sent to the certifier when there is a need for additional medical information or there are question about the Cause/Manner of Death.

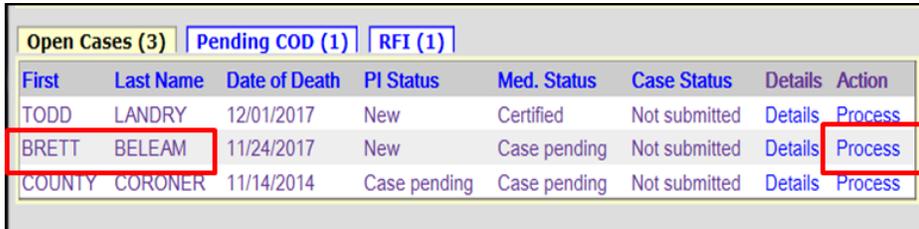
Open Cases (3) Pending COD (2) RFI (1)									
Decedent First	Last Name	Date of Death	Certifier First	Last Name	Status	Query Date	Details	Action	
DAVE	TEST	05/27/2009	A	ENOCH	QUERY	12/06/2017	Details	Process	

2 Accessing a Death Case from the Open Cases Queue

Step 1. From the Main Menu click “View Queues” to display the To Do Queues.



Step 2. Locate the decedents’ name in the Open Case queue and click the word “Process”.



The screenshot shows a table titled 'Open Cases (3)' with sub-tabs for 'Pending COD (1)' and 'RFI (1)'. The table has columns for First Name, Last Name, Date of Death, PI Status, Med. Status, Case Status, Details, and Action. The row for 'BRETT BELEAM' is highlighted, and the 'Process' link in the Action column is also highlighted with a red box.

First	Last Name	Date of Death	PI Status	Med. Status	Case Status	Details	Action
TODD	LANDRY	12/01/2017	New	Certified	Not submitted	Details	Process
BRETT	BELEAM	11/24/2017	New	Case pending	Not submitted	Details	Process
COUNTY	CORONER	11/14/2014	Case pending	Case pending	Not submitted	Details	Process

Step 3. Record opens at Tab 1 Decedent. Click “Tab 8 Actual Date/Pronounce/Contact.”



Note: When you click Tab 8, you may see this popup message asking you to verify information on Tab 8. Click the “OK” button on this popup and then click Tab 8 again.

3. Creating & Completing a Death Case

Creating a death case consists basically of first adding basic information that the ERAVE application uses to search cases that already exist to see if the case has already been started. If no matching cases are found, you can continue entering case information and save the information you added. The instructions in this chapter tell you where to find the form you need, what pages and sections are on the form, and provide various tips to guide you through the process of filling out the form. *Certifying Physician is responsible for Tabs 8-11*

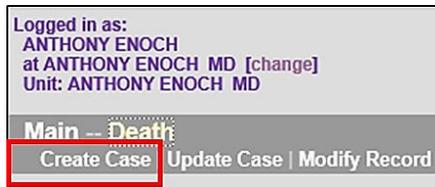
Step 1 From the ERAVE Main Menu click “Death.”



Logged in as:
ANTHONY ENOCH
at ANTHONY ENOCH MD [change]
Unit: ANTHONY ENOCH MD

Main
Death | Requests | System | View Queues

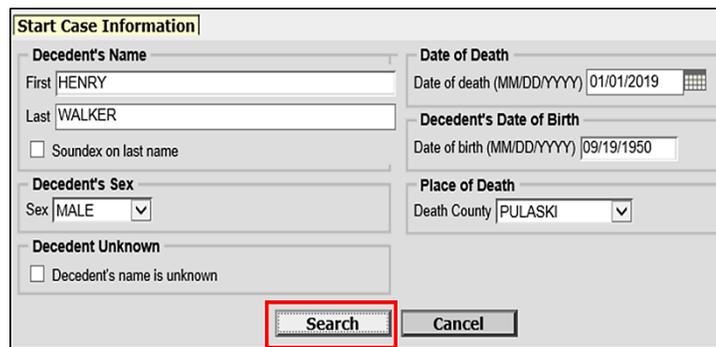
Step 2 Click “Create Case.”



Logged in as:
ANTHONY ENOCH
at ANTHONY ENOCH MD [change]
Unit: ANTHONY ENOCH MD

Main -- Death
Create Case | Update Case | Modify Record

Step 3 Start Case Information Screen – Enter the decedent’s first and last names, gender, Date of Death, Date of Birth and Place of Death aka Death County.



Start Case Information

Decedent's Name
First HENRY
Last WALKER
 Soundex on last name

Decedent's Sex
Sex MALE

Decedent Unknown
 Decedent's name is unknown

Date of Death
Date of death (MM/DD/YYYY) 01/01/2019

Decedent's Date of Birth
Date of birth (MM/DD/YYYY) 09/19/1950

Place of Death
Death County PULASKI

Search Cancel

Click the **SEARCH** button. (*Record List Screen Appears.*)

Step 4 Record List Screen should say “0” Records Found. Click the “Create New Case” button. (Record opens at Tab 1. Decedent.)

Step 5 Click Tab 8 Actual/Pronounce/Contact (Tab 8 appears.)

Step 6 Tab 8 Actual Date/Pronounce/Contact

Complete “Sections; 3. Actual or Presumed Date/Time of Death & 18a-b. Date/Time Pronounced Dead.”

Section 18c. Person Pronouncing Death

- a. Select one of the following from the “Pronouncer Type” dropdown menu:
 - i. Select “Pronouncer Same as Certifier” if you are Pronouncing and Certifying
 - ii. Select “Physician” if another physician pronounced, then select that physicians’ name from the Physician List.
 - iii. Select “Hospice RN” if a Hospice Nurse pronounced, then select that nurses’ name from the Hospice RN list.
 - iv. Select “Medical Examiner” if a Medical Examiner pronounced, then select the ME from the Medical Examiner list.
 - v. Select “Coroner” if a Coroner pronounced, then select the Coroners’ name from the Coroner list.

Section 19. ME or Coroner Contacted – Select “Yes” or “No” from dropdown menu.

Click the **NEXT** button.

Note: if a pronouncer’s name is not in either of the dropdown list, enter the name into the name fields and select their title from the Title List.

Step 7 Tab 9 Cause of Death

- Enter the Immediate Cause on line “a”
- Enter the Approximate Interval for line “a”
- If Necessary, list all Underlying Causes on lines b, c and d.

If Cause of Death is pending check the Cause of Death Pending checkbox

Part II

Enter any other significant conditions that contributed to death.

Click the **NEXT** button.

Step 8 Tab 10 Manner/Details/Injury

21. Autopsy – Select “Yes” or “No” from the dropdown menu.
If “Yes”, answer “Were autopsy findings available...”
 22. Manner of Death – Select either: Natural, Accident, Suicide, Homicide, Pending Investigation, Could not be determined or Execution.
 - 23-24. Death Details – Did tobacco contribute select “Yes” or “No”
- Answer Pregnancy question only if female decedent.

Complete Sections 25a-d thru 25f if manner of death was an Accident, Suicide or Homicide.
If necessary, complete section 25g.

Click the **NEXT** button.

Step 9 Tab 11 Certifier

- a. Select either “Certifying Physician” or “Pronouncing and Certifying Physician” from the Certifier Designation dropdown menu.

Click the **NEXT** button.

The screenshot shows two form sections. Section 26a, 'Certifier's Name and Designation', includes fields for Certifier designation (CERTIFYING PHYSICIAN), Physicians (ENOCH - ANTHONY - 45634), Medical examiners, Coroners, Hospice RN's, First name (ANTHONY), Middle name, Last name (ENOCH), Suffix, Title list, Title (MD), Preferred method of contact (EMAIL), Contact information (ANTHONY.ENOCH@ARKANSAS.GOV), Case access (ELECTRONIC), Phone number (501-661-2476), and Date signed by certifier. Section 26b, 'Certifier's Address', includes Number and street (123 MAIN ST), Apartment number, Country (UNITED STATES), State/province (ARKANSAS), City list, City or town (BENTON), and Zip code (72202). Below these sections are buttons for Previous, Next, Finish, and Cancel. The 'Next' button is highlighted with a red box.

3.1 Tab 12 Case Actions – How to Assign a Death Case to a Funeral Home

Note: Do not assign a Medical Certifier to the death case.

- a. In the section entitled Assign/Transfer/Notify **Funeral Home** select “Assign Funeral Home to Case” from the Action dropdown menu. From the Responsible Funeral Home dropdown menu select the funeral home responsible for the death case.
- b. If the Funeral Home is not yet known, select “Not Listed – Drop to Paper.”

Click the **FINISH** button.

The screenshot shows the 'Assign/Transfer/Notify Funeral Home' section of the form. The Action dropdown is set to 'ASSIGN FUNERAL HOME TO CASE'. The Responsible funeral home dropdown is set to 'ERAVE FUNERAL HOME - LITTLE ROCK'. The Case access dropdown is set to 'ELECTRONIC'. The Notify funeral home checkbox is checked. Below this section are buttons for Previous, Next, Finish, and Cancel. The 'Finish' button is highlighted with a red box.

3.2 Understanding the ERAVE Warning Screen

ERAVE Warning

All Medical Exceptions should be reviewed Fix following: The “Cause of Death Edit Check” will not prevent you from signing off on a death Case.

All Medical Exceptions should be reviewed Fix following:

[Cause of Death edit check](#)

Field Group Description: An edit check on a cause of death entry is left unresolved.

Required to Submit to State. Fix all the following: This message is simply a reminder that the Medical Information Section has not been Certified or Signed off on by the physician. This exception will disappear once the Medical Section has been certified.

Required to Submit to State. Fix all the following:

[Personal Information Section](#)

Field Group Description: Must be signed or dropped to paper.

[Medical Information Section](#)

Field Group Description: Must be certified or dropped to paper.

The following information must be entered to complete the medical information section. Fix all the following: Items in this section are either incomplete fields and/or unanswered medical questions. These items must be completed before the physician can sign off on the death case.

The following information must be entered to complete the medical information section. Fix all the following:

[Was medical examiner or coroner contacted must be answered](#)

Field Group Description: Was medical examiner or coroner contacted must be answered.

[Coroner must be contacted](#)

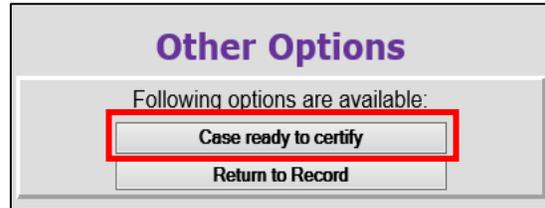
Field Group Description: Age is under 18, cause is not natural, death was not in a facility, or the cause of death includes a keyword that indicates a coroner should be contacted. On screen 8 the field labeled "Was medical examiner or coroner contacted?" should indicate that the coroner was informed about the case.

Scroll to the bottom of the ERAVE Warning Screen and click the Save (as pending) button.

3.3 How to Certify a Death Case



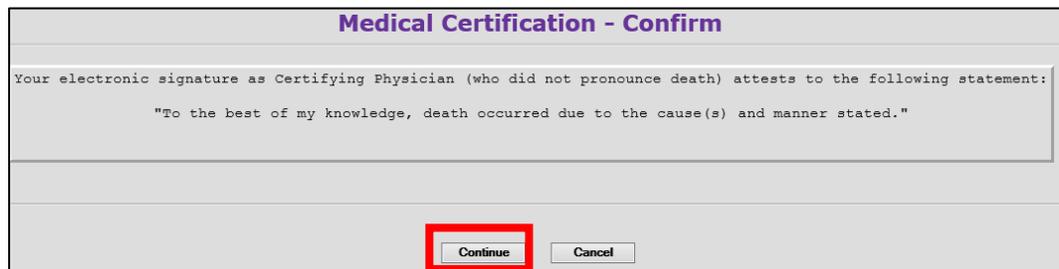
Step 1. On the Successful Transaction screen click the "Case Ready to Certify" button.



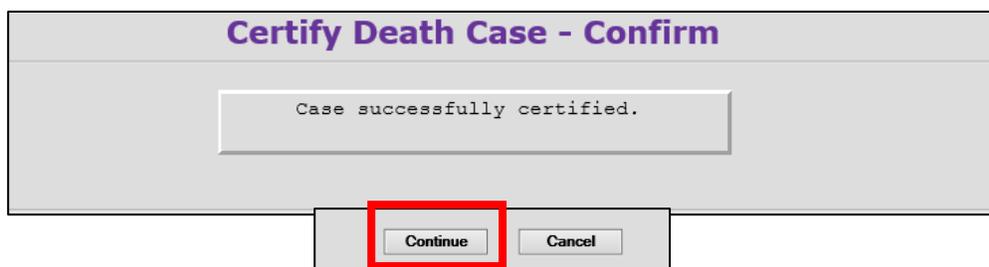
Step 2. Click the "Certify Case" button.



Step 3. On the Medical Certification-Confirm screen click the "Continue" button.



Step 4. On the Certify Death Case-Confirm screen click the "Continue" button.



Your Death Case is now certified. On the Successful Transaction Screen click the Main Menu button to return to the ERAVE Main Screen and Logout.

4. How to Un-Certify a Death Case

A Certifying Physician will have the ability to Un-Certify a death case if changes need to the Medical Information.

Step 1 From the ERAVE Main Menu click “View Queues.”



Step 2 Locate the decedent’s name in the Open Cases Queue and click “Process.”

First	Last Name	Date of Death	PI Status	Med. Status	Case Status	Details	Action
HENRY	WALKER	01/01/2019	New	Certified	Not submitted	Details	Process
CASEY	CONTROL	01/01/2019	Case pending	Case pending	Not submitted	Details	Process
JOHN	DOE	12/01/2018	New	Case pending	Not submitted	Details	Process
HAROLD	IVES	12/01/2017	Signed	New	Not submitted	Details	Process
FRED	HENRY	11/30/2017	Case pending	New	Not submitted	Details	Process

Step 3 Record opens and defaults to Tab 1 Decedent. Click Tab 12 Case Actions.



If one or more Pop ups appear click the “OK” button on the pop up and then click Tab 12 Case Actions again.



Step 4 On Tab 12 Case Actions locate the Medical Information Actions section and click the Un-certify Checkbox.

The screenshot shows the 'Case Actions' tab with various sections. The 'Medical Information Actions' section is highlighted with a red box. It contains the following options:

- Ready to certify medical information
- Un-certify ← Click this checkbox
- Medical information exceptions: N
- Fax attestation signed, no markups

Other sections visible include 'Decline to Certify', 'Personal Information Actions', 'Assign/Transfer/Notify Medical Certifier', 'Assign/Transfer/Notify Funeral Home', and '50/52. Registration Information'.

Step 5 Click the **FINISH** button.

The navigation bar contains four buttons: 'Previous', 'Next', 'Finish', and 'Cancel'. The 'Finish' button is highlighted.

Step 6 On the ERAVE Warning Screen click the “Save (as Pending)” button.

Step 7 On the Successful Transaction screen click the “Return to Record” button.

The Certifying Physician can only modify the information on Tabs 8-11. The Funeral Home is responsible for information on Tabs 1-7.

For gender, date of birth and First and/or Last name discrepancies, change the information on Tab 11 Certifier in the Case Information Section.

The 'Case Information' section contains the following fields:

- Decedent's first name: HENRY
- Decedent's last name: WALKER
- Decedent's date of birth: 09/19/1950
- Sex: MALE

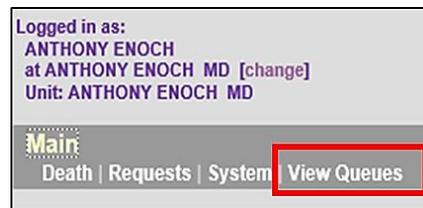
Once the necessary changes have been made click the **FINISH** button, if there are no exceptions click Save as pending and re-certify the death case.

5. How to Add the Cause of Death (Pending COD Death Record)

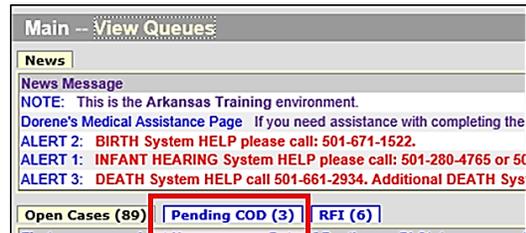
Once a death case with a Pending Cause of Death has been registered with Arkansas State Vital Records, Registration Department that death case will appear in a Pending COD Queue for the Certifying Physician or Physicians' Assistant. To see the Pending COD Queue, the Certifying Physician or Physician's Assistant must log into ERAVE and click *View Queues*.

Either the Certifying Physician or Physician's Assistant can access that death case from the Pending COD Queue to add the Cause of Death. Once the Cause of Death has been added and the Supplemental Cause of Death Report has been printed the death case will disappear from the Pending COD queue. **Use the Amend Record function if COD is pending for more than 90 days.**

Step 1 From the ERAVE Main Menu click "View Queues." *(To-Do Queues appear.)*



Step 2 Click the "Pending COD Tab."
(Pending COD Queue is displayed.)



Step 3 Locate the decedent's name in the Pending COD Queue then click "Process."
(Record Details screen appears.)

Open Cases (88)		Pending COD (4)		RFI (6)									
First	Last Name	Date of Death	County of Death	Date of Birth	Sex	Funeral Home	PI Status	MI Status	Case Status	Certificate	Rev	Details	Action
LARRY	FISHBURNE	2/31/2018	PULASKI	12/12/1949	M	ERAVE FUNERAL HOME	Signed	Certified	Registered	20180000120		Details	Process
HAROLD	JOHNSON	08/20/2014	PULASKI	01/01/1954	M	ERAVE FUNERAL HOME	Signed	Certified	Registered	20140000260		Details	Process
BETTYE	NORTON	04/16/2014	COLUMBIA	09/16/1946	F	ERAVE FUNERAL HOME	Signed	Certified	Registered	20140000130		Details	Process
WHITE	COUNTY	01/01/2014	PULASKI	01/01/1966	F	ERAVE FUNERAL HOME	Signed	Certified	Registered	20140000310		Details	Process

Step 4 Scroll to the bottom of the Record Details screen and click the “Continue” button.

Step 5 Basis/Reason for Modification Screen – Enter the appropriate reason into the Reason Field. Basis will default to Cause of Death. Next click the **FINISH** button.
(Record Opens at Tab 1. Decedent.)

The screenshot shows a window titled "Basis/Reason for Modification". It has two main sections: "Basis" and "Reason". The "Basis" section has a dropdown menu currently showing "CAUSE OF DEATH". The "Reason" section has a text area containing the text "ADDING THE CAUSE AND MANNER OF DEATH.". At the bottom of the window, there are two buttons: "Finish" and "Cancel". The "Finish" button is highlighted with a red rectangular box.

Step 6 When record opens click “Tab 9 Cause of Death.” (Tab 9 Cause of Death appears.)

The screenshot shows the header of an Arkansas - EDRS record. The header is purple and white. It displays "Arkansas - EDRS: Name: FISHBURNE, LARRY DOD: 12/31/2018". Below the header is a navigation bar with 12 tabs: "1 Decedent", "2 Decedent Info", "3 Place of Death", "4 Parents/Informant", "5 Disposition", "6 Decedent History", "7 Funeral Home/Embalmer", "8 Actual Date/Pronounce/Contact", "9 Cause of Death", "10 Manner/Details/Injury", "11 Certifier", and "12 Case Actions". The "9 Cause of Death" tab is highlighted with a red rectangular box.

Note: if cause of death has been pending for more than 90 days you will receive a message stating you must use the Amend Record function to add the cause of death.

Step 7 Un-check the Cause of Death Pending check box. (Cause of Death fields become available)

The screenshot shows a section titled "20. Cause of Death PART I.". It contains instructions: "Enter the chain of events (diseases, injuries, or complications) that directly caused the death. DO NOT enter events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. ABBREVIATE. Enter only one cause on a line." Below the instructions is a checkbox labeled "Cause of death pending" which is checked. This checkbox is highlighted with a red rectangular box. Below the checkbox is the text "IMMEDIATE CAUSE (Final disease or condition resulting in death)". Underneath that is a text input field labeled "a." containing the word "PENDING".

Step 8 On Tab 9 Cause of Death – Add the Cause of Death on line “a” and add the approximate interval for line “a.” if Necessary add any Underlying Causes on lines b, c and d. In Part II add any other significant conditions that contributed to death.

20. 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.

Cause of death pending

IMMEDIATE CAUSE (Final disease or condition resulting in death) APPROXIMATE INTERVAL:
Onset to death

a. CUTE COMBINED ALCOHOL, METHAMPHETAMINE AND CITALOPRAM INTOXICATION UNKNOWN
 Due to (or as a consequence of)

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

b. Due to (or as a consequence of)

c. Due to (or as a consequence of)

d. 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.
 Other Significant Conditions contributing to death

Click the **NEXT** button.

Step 9 On Tab 10 Manner/Details/Injury – Change sections; 21 Autopsy, 22 Manner of Death and 23-24 Death Details. If necessary complete the injury sections.

21. Autopsy
 Was an autopsy performed? Yes No
 Were autopsy findings available to complete the cause of death? Yes No

22. Manner of Death
 Manner of death: Pending Investigation

23-24. Death Details
 Did tobacco use contribute to death? Unknown No Yes
 If female, select one from list:
 Verification required:

25a-d. When and Where Injury Occurred
 Date of injury (MM/DD/YYYY):
 Approximate
 Time of injury (HH:MM):
 Time indicator:
 Approximate
 Place of injury (e.g. decedent's home, construction site, restaurant, wooded area):
 Injury at work?

25e. Location of Injury Address
 Location unknown:
 Number and street:
 Apartment number:
 Country: UNITED STATES
 State/province: ARKANSAS
 City list:
 City or town:
 Zip code:
 Validate address:
 Validation result: Address not validated.
 Accept address

25f. Describe How Injury Occurred
 Description:

25g. If Transportation Injury
 Specify:
 Other - specify:

Click the **FINISH** button.

Step 10 Record Modify-Confirm Screen – Check to make sure current changes are correct and also make sure no additional changes are needed. If additional changes are needed click the “Make Another Change” button.

Record Modify - Confirm

Please confirm that the following changes are correct

Reason: CAUSE OF DEATH : ADDING THE CAUSE AND MANNER OF DEATH.
 Today's Date: 01/11/2019

[Edit Additional Information](#)

Field (DB Name)	Original Value	Changed Value	Remove Change
Manner of death (MANNER)	P	N	Remove

Some system columns will be changed. [Show system columns](#)

If no other changes are needed, click the **CONTINUE** button.

Step 11 On the **Successful Transaction Screen** to print the Supplemental Cause of Death do the following:

- a. Select “Print Supplemental Cause of Death.”
- b. Select “Skip this print option” for all other documents.

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 Affidavit for Correction:
 Skip this print option:

Print Supplemental Cause of Death:
 Skip this print option:

Click the **PRINT** button.

Step 12 Click the “Generate Document” button and wait for the image to appear.

Report - Confirm

Supplemental Report of Cause of Death

Step 13 Print the Supplemental Cause of Death.

 ARKANSAS DEPARTMENT OF HEALTH Vital Records Supplemental Report of Cause of Death			
Name of Deceased LARRY FISHBURNE			
Date of Death DEC. 31, 2018	County of Death PULASKI		Sex MALE
I hereby certify that the cause of death of the decedent was as given below and the original certificate of death should be amended accordingly. Note: If this form is used as authorization to amend a cause of death previously reported on a death certificate, please check here. <input type="checkbox"/>			
Reason for amendment: <input type="checkbox"/> Autopsy <input type="checkbox"/> Other Specify _____			
3a. DATE OF DEATH (Mo/Day/Yr) DEC. 31, 2018	3b. TIME OF DEATH 10:30 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM		
16a. DATE PRONOUNCED DEAD (Mo/Day/Yr) DEC. 31, 2018	16b. TIME PRONOUNCED DEAD 11:00 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	16c. NAME AND TITLE OF PERSON PRONOUNCING DEATH (PRINT / TYPE) ANTHONY ENOCH, MD	19. WAS MEDICAL OR CORONER CONTACTED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20. 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. CAUSE OF DEATH IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. CUTE COMBINED ALCOHOL, METHAMPHETAMINE AND CITALOPRAM INTOXICATION Due to (or as a consequence of) b. _____ Due to (or as a consequence of) c. _____ Due to (or as a consequence of) d. _____ Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST.			APPROXIMATE INTERVAL: Onset to Death UNKNOWN
PART II. Enter other significant conditions contributing to death, but not resulting in the underlying cause given in PART I.			21a. WAS AN AUTOPSY PERFORMED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			21b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
22. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Suicide <input type="checkbox"/> Homicide <input type="checkbox"/> Pursuant to a judicial sentence of Death - Execution <input type="checkbox"/> Pending investigation <input type="checkbox"/> Could not be determined			
23. DID TOBACCO USE CONTRIBUTE TO DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> Probably <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		24. IF FEMALE: <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Unknown if pregnant within last year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death	
25a. DATE OF INJURY (Mo/Day/Yr)	25b. TIME OF INJURY <input type="checkbox"/> AM <input type="checkbox"/> PM	25c. PLACE OF INJURY (e.g. Decedent's home, construction site, restaurant, wooded area)	25d. INJURY AT WORK? <input type="checkbox"/> Yes <input type="checkbox"/> No
25e. LOCATION OF INJURY: (Number, Street, Apartment No., City, State, Zip Code)			
25f. DESCRIBE HOW INJURY OCCURRED:			25g. IF TRANSPORTATION INJURY, SPECIFY: <input type="checkbox"/> Driver / Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other (Specify) _____
Name of Certifier (Print or Type) ANTHONY ENOCH, MD		Title MD	License # 45634
Signature of Certifier		Date	

Once you have printed the Supplemental, close the image window and click the "Continue" button. Then click the Main Menu button

6. How to Amend a Death Case

Step 1 From the ERAVE Main Menu click “Death.”

Logged in as:
ANTHONY ENOCH
at ANTHONY ENOCH MD [change]
Unit: ANTHONY ENOCH MD

Main
Death | Requests | System | View Queues

Step 2 Click “Modify Record.”

Logged in as:
ANTHONY ENOCH
at ANTHONY ENOCH MD [change]
Unit: ANTHONY ENOCH MD

Main -- Death
Create Case | Update Case | Modify Record

Step 3 Click “Amend Record.”

Logged in as:
ANTHONY ENOCH
at ANTHONY ENOCH MD [change]
Unit: ANTHONY ENOCH MD

Main -- Death -- Modify Record
Correct Record | Amend Record

Step 4 **Death Record Search Criteria Screen** – User can search using *ONE* of the following:
The decedent’s First and Last Names or Date of Death or Certificate Number.

Death Record Search Criteria

Record Identifiers
Assigned case number
ME case number
Certificate number

Decedent's Name
First
Middle
Last
Suffix
 Swap names
 Soundex on last name

Date of Death
Date of death (mm/dd/yyyy)
To

Date of Birth
Date of Birth (mm/dd/yyyy)
To

Location of Death
County
Arkansas cities
City

Click the **SEARCH** button.

Step 5 On the Record List Screen click the word “Details.”

Main -- Death -- Modify Record -- Amend Record

Records List (1 Records found)

First	Last Name	Date of Death	County of Death	Date of Birth	Sex	Funeral Home	PI	Status MI	Status Case	Status Certificate	Re / Details
HENRY	WALKER	01/01/2019	PULASKI	09/19/1950	M	ERAVE FUNERAL HOME	Signed	Certified	Registered	2019000001 0	Details

Cancel

Step 6 On the Record Details Screen scroll to the bottom and click the “Continue” button.

Step 7 Basis/Reason for Modification Screen – Select “Affidavit” from the Basis dropdown menu. Enter the reason for making the amendment into the Reason text field.

Note: if the amendment was court ordered select “Court Order” from the basis dropdown menu.

Basis/Reason for Modification

Basis
Basis: AFFIDAVIT

Reason
Reason: CHANGE TO CAUSE AND MANNER OF DEATH

Finish Cancel

Click the **FINISH** button.

Step 8 Record opens at *Tab 1 Decedent*. Navigate to the Medical Information Section(s) (Tabs 8-11) you wish to amend and edit the information.

Note: if a popup appears click the “OK” button, then proceed to make changes to the medical information.

Step 9 After all changes have been made click the **FINISH** button.

Step 10 Record Modify-Confirm Screen – Check to make sure current changes are correct and also make sure no additional changes are needed. If additional changes are needed click the “Make Another Change” button.

Record Modify - Confirm

Please confirm that the following changes are correct

Reason: AFFIDAVIT : CHANGE TO CAUSE AND MANNER OF DEATH
 Today's Date: 01/11/2019

[Edit Additional Information](#)

Field (DB Name)	Original Value	Changed Value	Remove Change
Update pending flag (FL_UPDATE_PENDING)	N	Y	Remove
Manner of death (MANNER)	N	C	Remove
Request fee paid (FL_REQUEST_FEE_PAID)	N	P	Remove
Was an autopsy performed? (AUTOPSY)	N	Y	Remove
Did tobacco use contribute to death? (TOBAC)	U	P	Remove
Were autopsy findings available to complete the cause of death? (AUTOPSY_F_AVAIL)		Y	Remove

Some system columns will be changed. [Show system columns](#)

If no other changes are needed, click the **CONTINUE** button.

Re-Certifying the Death Case

Step 11 Successful Transaction Screen – Click the “Certify Case” button.

Other Options

Following options are available:

Step 12 On the **Medical Certification-Confirm Screen** – Click the “Continue” button.

Step 13 On the **Certify Death-Confirm Screen** – Click the “Continue” button.

Printing the Affidavit

Step 14 On the **Successful Transaction Screen** select “Print Affidavit for Correction, Select “Skip this print option” for all other documents then click the “Print” button.

Step 15 On the **Report-Confirm Screen** click the “Generate Document” button and wait for the image to appear.

Step 16 Affidavit appears. Print the Affidavit then close the image Window


201900001

**ARKANSAS DEPARTMENT OF HEALTH
VITAL RECORDS
AFFIDAVIT FOR CORRECTION OF A RECORD**

The original record of death for HENRY WALKER

Who died on JANUARY 1, 2019, in the County of PULASKI, State of Arkansas is
incorrect or incomplete as follows:

NOTE: (ANY FRAUDULENT ENTRY MADE WILL BE TURNED OVER TO THE PROSECUTING ATTORNEY)

ITEM	The record now shows:	The true facts are:
22. Manner of Death	N	C
21a. Autopsy Performed	N	Y
23. Tobacco Use	U	P
21b. Autopsy Findings Available		Y

The above information is true to the best of my knowledge, information and belief.

Affiant ANTHONY ENOCH Date January 11, 2019

123 MAIN ST. BENTON, AR, 72202
Present Address

/s/
Signature

To return to the ERAVE Main Menu click CONTINUE then click the “Main Menu” button.

ERAVE Help Desk Information

ERAVE SYSTEM ISSUES – (501) 661-2785

DEATH AMENDMENTS – (501) 661-2810

