## **Find a Patient**

The Clinical Module has been designed for viewing, editing, or creating new patient records, as well as details related to patient cases.

Step 1: Select the Clinical tab. This will direct the browser to the Find Patient screen.

| HHLPSS  | -    | -        |               |         | SELECT A PATIENT |
|---|------|----------|---------------|---------|------------------|
| Healthy Homes and Lead<br>Poisoning Surveillance System | Home | Clinical | Environmental | Reports |                  |
| Find Patient  |      | Sec. 1   |               |         |                  |
| Clinical Letters  | Find | Patient  |               |         |                  |

Step 2: Search for a patient record by typing in part or all of the last name, first name, and if needed, other patient information you have available. Click the **Search** button.

| HHLPSS<br>Healthy Homes and Lead<br>Poisoning Surveillance System | Home Clinical | Environmental | Reports     |                           | SELECT A PATIENT  |   |
|---|---------------|---------------|-------------|---------------------------|---|---|
| Find Patient  | Cardia Para   |               |             |                           |   | 1 |
| Clinical Letters  | Find Patient  |               |             |                           |   |   |
| Patient Info  | HHLPSS ID     | Local ID      | Stellar/Mig | prated ID                 |   |   |
| Patient Address   |               |               |             |                           |   |   |
| Blood Lead Tests  | 1.00          |               |             |                           |   |   |
| Case Details  | Last Name     |               | First Name  |                           |   |   |
| Case Exposure   |               |               |             |                           |   |   |
| Associated Persons  | SSN           | Medicaid ID   | DOB         | Jurisdiction              |   |   |
| Other Blood Tests   |               |               |             | All Jurisdiction          | and the second se |   |
| Other Medical   |               |               |             |                           |   | - |
| Chelation   | Address       |               |             |                           |   |   |
| Notes   |               |               |             | For best results, enter j | ust the street number   |   |
| Patient Attachments   | City          | Zip           |             | or just the street name.  |   |   |
|   |               |               |             | -                         |   |   |
|   | Phone         |               |             |                           |   |   |
|   | Search        |               |             |                           |   |   |

**Step 3:** Select the correct patient. If the patient is listed in the search results, select the patient's name to open the Patient Information screen.

| HHLPSS  | (OLANTERN, JILL) DOB: 1/1/2016 ID#: 2018924 JURI.: DEPARTMENT OF PUBLIC HEALTH FOR MADISON AND DANE C |               |            |       |                          |             |                   |  |
|---|---|---------------|------------|-------|--------------------------|-------------|-------------------|--|
| Healthy Homes and Lead<br>Poisoning Surveillance System | Home Clinical   | Environmental |            | Repo  | Reports                  |             |                   |  |
| Find Patient  |   | HHLPSS        | Date of    | Local |                          |             |                   |  |
| Clinical Letters  | Name  | ID            | Birth      | ID    | Address                  | Case Status | Jurisdiction      |  |
| Patient Info  | Jack OLantern   | 2018878       | 10/31/2017 |       | 1403 PRAIRIE ROSE Dr Su  | Open        | Department of Pub |  |
| Patient Address   | Jill OLantern   | 2018924       | 1/1/2016   |       | 1403 Prairie Rose Dr Sun | Open        | Department of Pub |  |
| Blood Lead Tests  | 1   |               |            |       |                          |             |                   |  |
| Case Details  |   |               |            |       |                          |             |                   |  |
| Case Exposure   |   |               |            |       |                          |             |                   |  |
| Associated Persons                                      |   |               |            |       |                          |             |                   |  |

Step 3 (continued): If the results don't match your patient (you got too many results, the wrong results, or no results were returned), click the Revise Search button near the bottom of the page, which will return you to the search screen to enter additional search criteria,



## **Patient Information**

Step 4: View or edit the patient demographic information. The patient's name, date of birth, and HHLPSS ID number are displayed at the top of the page (highlighted in yellow). This is useful to verify you are in the correct record, especially when looking up more than one patient.

| HHLPSS<br>Healthy Homes and Lead<br>Poisoning Surveillance System |                     |            | 1/1/2016 ID#: 201<br>vironmental | 8924 Juri<br>Reports | .: DEPAR TIMENT       | OF PUBLIC HEALTH FOR MADISON AND DAVE C   |
|---|---------------------|------------|----------------------------------|----------------------|-----------------------|---|
| Find Patient<br>Clinical Letters                                  | Last Name AK        |            | First Name<br>Jill               |                      | Middle Name<br>Middle | Case Type (Case Status) State Case (Open) |
| Patient Info     Family Mambara Patient Address                   | DOB<br>01/01/2016   | Cu         | rrent Age<br>Yrs. 10 Mos.        | Sex<br>Female        | Twi                   | n Local ID No.<br>Medical Rec             |
| Blood Lead Tests<br>Case Details<br>Case Exposure                 | Ethnicity S         | Select     | Race<br>Unknow                   | Select               |                       | Max Blood Pb 12.4<br># Reports 2          |
| Associated Persons<br>Other Blood Tests<br>Other Medical          | -                   |            |                                  |                      |                       | SSN Medicaid ID                           |
| Chelation<br>Notes<br>Patient Attachments                         | Country of Birth    | ~          | State/Province                   |                      | Languaç               | pe Interview in English?                  |
|   | Number<br>1403      | Direction  | Street<br>Prairie Rose           |                      | Ty                    |   |
|   | City<br>Sun Prairie |            | County<br>Dane                   | $\sim$               | State                 | Zip<br>53590                              |
|   | Census Tract 011600 | Parcel No. |                                  | District             |                       | Follow -up received                       |
|   | Guardian Phone      |            | Guardian First N                 | lame                 |                       | ardian Last Name                          |
| Helj<br>Save  | 2                   |            |                                  |                      |                       |   |
| Rever<br>Print Screen   |                     |            |                                  |                      |                       |   |

**Note:** Fields that have grayed-out text and background cannot be edited. Text boxes that can be edited have **black** text or **black** borders, and a white background.

**Step 5:** Click the **Save** button in the bottom left corner menu to save any edits you make to patient details. If you leave the page without saving, your changes will be lost.

|              | Patient Phone |
|--------------|---------------|
| Help         |               |
| Save         |               |
| Revert       |               |
| Print Screen |               |
| Log Out      |               |

**Step 6:** Click the **Revert** button to cancel your changes before saving and revert to the prior values.

|              | Patient Phone |  |
|--------------|---------------|--|
| Help         |               |  |
| Save         |               |  |
| Revert       |               |  |
| Print Screen |               |  |
| Log Out      |               |  |

Step 7: Click the Log Out button to end a HHLPSS session.

|              | Patient Phone |  |
|--------------|---------------|--|
| Help         |               |  |
| Save         |               |  |
| Revert       |               |  |
| Print Screen |               |  |
| Log Out      |               |  |

## Questions

Please contact the HHLPSS coordinator at 608-266-5817 or email <u>DHS Lead Poisoning Prevention</u>.



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