

You can use the **Other Medical Information** screens to enter details related to a patient's health insurance, health care provider, and health status.

Step 1: Select the **Clinical** tab and find the patient [see [Job Aid 3.1: Find a Patient and Patient Information \(P-02299-3.1\)](#)]. Verify you have the correct patient by reviewing the patient information at the top of the screen (highlighted in yellow).

The screenshot shows the HHL PSS interface with the 'Clinical' tab selected. At the top, a yellow box contains patient information: (OLANTERN, JILL) DOB: 1/1/2016 ID#: 2018924 JURI.: DEPARTMENT OF PUBLIC HEALTH FOR MADISON AND DANE C. Below this is a navigation bar with 'Home', 'Clinical', 'Environmental', and 'Reports' tabs. A left sidebar menu is visible with 'Find Patient' highlighted. The main content area displays a table of patient records:

Name	HHL PSS ID	Date of Birth	Local ID	Address	Case Status	Jurisdiction
Jack OLantern	2018878	10/31/2017		1403 PRAIRIE ROSE Dr Su...	Open	Department of Pub...
Jill OLantern	2018924	1/1/2016		1403 Prairie Rose Dr Sun...	Open	Department of Pub...

Step 2: Click on **Other Medical** on the left side menu. This will bring up the **Health Insurance Information** screen for that patient. For patients with clinical cases, HHL PSS allows the collection of initial blood lead test funding information. To add or update information on this page, select the appropriate response in the relevant drop-down menus and, if necessary, add associated text in the corresponding textbox. Click the **Save** button on the bottom left side menu to save any edits you make.

The screenshot shows the 'Other Medical' screen for the same patient. The left sidebar menu has 'Other Medical' highlighted. The main content area contains the following form fields:

How was the initial blood test paid for? Other
Why was the initial blood test done? Other

Health Insurance Information

Is case enrolled in Medicaid? Eligibility Date
Medicaid Managed Care? Which Plan?
Is case covered by a private health plan or HMO (not Medicaid)? If Yes, Specify (e.g. Kaiser, Humana)
Is case on WIC? If no/Unknown, was referral made?

At the bottom of the sidebar menu, the 'Save' button is highlighted.

Health Status

Step 3: Click on **Health Status** on the left side menu to add or view the patient’s health information. You can add information about the patient’s height and weight. Be sure to enter the date the measurements were performed. After entering the information, click on the **Add** button. **Note:** You can only enter whole numbers into the **Height (in.)** field. Fractions of inches cannot be entered. In the **Weight (lbs.)**

HHL PSS
Healthy Homes and Lead Poisoning Surveillance System

(OLANTERN, JILL) DOB: 1/1/2016 ID#: 2018924 JURI.: DEPARTMENT OF PUBLIC HEALTH FOR MADISON AND DANE C

Home Clinical Environmental Reports

Date	Height (in.)	Weight (lbs.)	Delete
11/1/2018	36	40	<input type="checkbox"/>

Add

Was nutrition assessment done? If Yes, By whom?

Did PHN perform a neuro-developmental assessment?

Is Case Is case being breast fed? Is case a nursing mother?

Has the case ever been anemic (hemoglobin blood result less than, but not including 11 in a child)? If yes, when? From: To: Has case been given iron supplements?

Has case had any symptoms of lead poisoning? If yes, specify:

New Help Save Revert Print Screen Log Out

To delete the height or weight entered in this section, click on the **Delete** checkbox to add a check mark.

Date	Height (in.)	Weight (lbs.)	Delete
11/1/2018	36	40.00	<input checked="" type="checkbox"/>

Add

Click on the **Save** button on the bottom left side menu to save your changes.

Help
Save
Revert
Print Screen
Log Out

To add or update any of the information on the **Health Status** screen, make the appropriate selection in the relevant dropdown menu, and, as needed, add text in the textbox. Click the **Save** button in the

The screenshot shows the 'Health Status' form. The left sidebar menu includes: Other Medical, Insurance/Provider, **Health Status**, Provider Information, Chelation, Notes, Patient Attachments, New, Help, **Save**, Revert, Print Screen, and Log Out. The main form area contains the following fields:

- Was nutrition assessment done? (dropdown) If Yes, By whom? (dropdown)
- Did PHN perform a neuro-developmental assessment? (dropdown)
- Is Case (dropdown) Is case being breast fed? (dropdown) Is case a nursing mother? (dropdown)
- Has the case ever been anemic (hemoglobin blood result less than, but not including 11 in a child)? (dropdown) If yes, when? From: (text) To: (text) Has case been given iron supplements? (dropdown)
- Has case had any symptoms of lead poisoning? (dropdown) If yes, specify: (text area)

Provider Information

Step 4: Click on **Provider Information** on the left side menu to add or view provider information. Enter any new provider information into the appropriate fields.

The screenshot shows the 'Provider Information' form. The left sidebar menu includes: Find Patient, Clinical Letters, Patient Info, Patient Address, Blood Lead Tests, Case Details, Case Exposure, Associated Persons, Other Blood Tests, Other Medical, Insurance/Provider, Health Status, **Provider Information**, Chelation, Notes, Patient Attachments. The main form area contains the following fields:

- Date PCP initially contacted? (text) 11/01/2018
- Did PCP determine an environmental investigation was necessary? (dropdown) No
- Date case summary sent to PCP (text) 11/02/2018
- Provider (text) (ID=1419305) MULLICK, SAMIR [Choose] [Delete]
- Organization (text) (ID=523) PEDIATRIC ASSOC- MILW SOUTH [Choose] [Delete]

Click on the **Save** button on the bottom left side menu to save any changes.

The close-up shows the bottom left sidebar menu with the following options: Help, **Save**, Revert, Print Screen, and Log Out.

Questions

Please contact the HHLPPS coordinator at 608-266-5817, or email [DHS Lead Poisoning Prevention](#).