You can use the **Family Members and Guardian** screen to enter details for family members and guardian of the selected patient, including phone numbers.

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

HHLPSS 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						
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 2: Click on **Patient Info** in the left side menu to expand a submenu for **Family Members**.

HHLPSS	(OLANTER	RN, JILL) DO)B: 1/1/2016 ID#: 2	2018924 JURI	.: DEPARTMENT OF	PUBLIC HEALTH FOR MADISON AND DANE C
Healthy Homes and Lead Poisoning Surveillance System	Home	Clinical	Environmental	Reports		
Find Patient	Last Name	AKA	First Name		Middle Name	Case Type (Case Status)
Clinical Letters	OLantern		Jill		Middle	Surveillance Case (Open)
Patient Info	DOB		Current A en	Sex	Twin	
Family Members	01/01/2016		Current Age	* Female		Local ID No.
Patient Address	01/01/2016		3 Yrs. 2 Mos.	remaie		Medical Rec
Blood Lead Tests	Ethnicity	Select	Race	Select		Max Blood Pb 23
Case Details		Jeleci				Max Blood Pb 23
Case Exposure	Unknown		Unkno	own		# Reports 8
Associated Persons						SSN
Other Blood Tests						
Other Medical						Medicaid ID
Chelation						Next Pb Date 1/31/2019
Notes	Country of Birt	h	State/Provinc	e	Language	Interview in English?
Patient Attachments		-	~	-	\checkmark	✓
	Number 1403	Direction		Drive Apt Suite	е	Direction Apt. No.

Step 3: Click on Family Members in the left side menu to open the Family Members and Guardian screen.

HHLPSS	(OLANTERN, JILL) DOB: 1/1/2016 ID#: 2018924 、	JURI.: DEPARTMENT OF PUBL	IC HEALTH FOR I	MADISON AND DANE C
Healthy Homes and Lead Poisoning Surveillance System	Home Clinical Environmental Repo	rts		
Find Patient	Family Members and Guardian			
Clinical Letters	Failing members and Guardian			
Patient Info	Name	Relationship	Primary	Choose
Family Members	Jack Olantern	Brother	No	
Patient Address	Jack Sr. OLantern	Father	No	
Blood Lead Tests	Jane OLantern	Mother	No	
Case Details				
0 F				

Adding Family Member or Guardian

Step 4: To add a family member or guardian for the patient, press the New button in the bottom left menu to enable the fields. The minimum fields required to create a new family member are indicated with a red asterisk (*) (circled in red). Enter these and other known information for the new family member.

HHLPSS	(OLANTERN, J	ILL) DOB: 1	/1/2016 ID#: 201	8924 JURI.:	DEPARTMENT OF P	UBLIC H	EALTH FOR N	ADISON AND DANE C
Healthy Homes and Lead Poisoning Surveillance System	Home Clin	ical Env	vironmental	Reports				
Find Patient	Family Mem	hers an	d Guardian					
Clinical Letters	r anny men	bers an	u ouurului					
Patient Info	Name				Relationship		Primary	Choose
Family Members	Jack Olantern				Brother		No	
Patient Address	Jack Sr. OLantern				Father		No	
Blood Lead Tests	Jane OLantern				Mother		No	
Case Details								
Case Exposure								
Associated Persons								
Other Blood Tests								
Other Medical	First Name		Middle Name	ſ	ast Name		Maiden	Name
Chelation	Jack	x *			Dlantern		*	
Notes			1					
Patient Attachments	DOB	Sex			nship to Child		Primary G	uardian
	10/31/2017	Male		Brothe	er	✓ *	No	\sim
			a					
	Add Phone	Cancel						
New								
Help								
Save								
Revert								
Print Screen								
Log Out								

Step 5: Click the **Save** button in the bottom left side menu to save the record.



Adding Phone Numbers

Step 6: To add a phone number to a family member, select the hyperlinked name (circled in red).

HHLPSS	(OLANTERN, JILL) DOB:	: 1/1/2016 ID#: 201	8924 JURI.:	DEPARTMENT OF PUBL	IC HEALTH FOR N	ADISON AND DANE	
Healthy Homes and Lead Poisoning Surveillance System	Home Clinical E	nvironmental	Reports				
ind Patient	Family Mombora a	nd Cuardian					
Clinical Letters	 Family Members and Guardian 						
Patient Info	Name			Relationship	Primary	Choose	
Family Members	Jack Olantern			Brother	No	Chicose	
Patient Address	Jack Sr. OLantern			Father	No		
Blood Lead Tests	Jane OLantern			Mother	No		
Case Details							

Step 7: Click on the **Add Phone** button. This will open the phone number box within the page.

HHLPSS Healthy Homes and Lead Poisoning Surveillance System	(OLANTERN, JI Home Clini			24 JURI.: [eports	DEPARTMENT OF P	UBLIC HE	EALTH FOR N	ADISON AND DANE C
Find Patient Clinical Letters	Family Mem	bers and	d Guardian					
Patient Info	Name				Relationship		Primary	Choose
Family Members	Jack Olantern				Brother		No	
Patient Address	Jack Sr. OLantern				Father		No	
Blood Lead Tests	Jane OLantern				Mother		No	
Case Details								
Case Exposure								
Associated Persons								
Other Blood Tests								
Other Medical	First Name		Middle Name	La	ist Name		Maiden	Name
Chelation	Jack	×			lantern		*	Hamo
Notes	ou ok		I				I	
Patient Attachments	DOB	Sex		Relation	ship to Child		Primary G	uardian
	10/31/2017	Male	~	Brother		✓ *	No	\checkmark
	Add Phone	Cancel						
New								
Help								
Save								
Revert								
Print Screen								
Loa Out								

Step 8: Enter the phone number in the format (XXX) XXX-XXXX, and select the phone type from the dropdown menu. Click the radio button labeled Main if this is the main contact number for the person. Click Save to add the phone number to the family member's record. A phone number can be edited or deleted by clicking on Edit or Delete.

Associated Fersons	(
Other Blood Tests						
Other Medical	First Name	Middle N	ama I	ast Name		Maiden Name
Chelation	Jane	×*		DLantern	,	
Notes	Jane	~		Zantern		In
Patient Attachments	DOB	Sex	Relation	nship to Child		Primary Guardian
		Female	✓ Mother	r	✓ *	Yes 🗸
	Add Phone	Cancel				
	Phone		Туре		Mair	Edit Delete
	(555) 555-555	i5	Mobile		 Image: Image: Ima	Edit Delete
					V 0	Save
			1			
New						
Help						
Save						
Revert						
Print Screen						
Log Out						

Making a Family Member a Guardian

Step 9: From the **Family Members and Guardian** screen, select the hyperlinked name you want to make a guardian and then click the **Choose** button.

HHLPSS	(OLANTERN, JILL) DOB: 1/1/2016 ID#: 20	018924 JURI.: DEPARTMENT OF PUBLIC H	EALTH FOR MADISON AND DANE C					
HHLPSS Healthy Homes and Lead Poisoning Surveillance System	Home Clinical Environmental	Reports						
Find Patient	Family Members and Guardia	'n						
Clinical Letters								
Patient Info	Name	Relationship	Primary Choose					
Family Members	Jack Olantern	Brother	No					
Patient Address	Jack Sr. OLantern	Father	No					
Blood Lead Tests	Jane OLantern	Mother	Yes					
Case Details								
Case Exposure								
Associated Persons								
Other Blood Tests								
Other Medical	First Name Middle Name	Last Name	Maiden Name					
Chelation	Jack Sr.	OLantern	*					
Notes	Sack St.	OLantern	I					
Patient Attachments	DOB Sex	Relationship to Child	Primary Guardian					
		▼ Father ▼*	No					
	Add Phone Cancel							
	Phone Type	Main Edit D	lelete					

Step 10: A dialog box pops up titled, "Parents/Guardian -- Webpage Dialog." Click on the radio button under **Primary Guardian** and click on the **Choose** button. Close the dialog box by clicking the red X.

HHLPSS Healthy Homes and Lead Poisoning Surveillance System	(O Hor	LANTERN, JILL) DOB: 1/1/2016 ID#: 2018924 JURI.: DEPART ne Clinical Environmental Reports	MENT OF PUBLIC HEALTH FOR MADIS	ON AND DANE C
Find Patient Clinical Letters	Fan	Ø Parent/Guardians Webpage Dialog		×
Patient Info Family Members	Nam Jack	Select Primary Guardian for Patient	Choose	
Patient Address Blood Lead Tests	Jack Jane	Name	Relationship to Case	Primary Guardian
Case Details Case Exposure		Jack Olantern Jack Sr. OLantern	Brother Father	
Associated Persons Other Blood Tests		Jane OLantern	Mother	0
Other Medical Chelation Notes Patient Attachments	First I Jack DOB			
	Ad			
	(608 (608			
New Help Save				
Revert Print Screen Log Out				
		https://hhlpssu: 🔍 Local intranet Protected	d Mode: Off	4

Step 11: You will return to the Family Members and Guardian screen. The family member selected as guardian will show "Yes" in the Primary column. Under Primary Guardian in the drop-down menu it is greyed out, but also says "Yes."

HHLPSS	(OLANTERN, JILL) DOB: 1/1/2016 ID#: 2018924	JURI.: DEPARTMENT OF PUBLIC	HEALTH FOR MADISON AND DANE C
Healthy Homes and Lead Poisoning Surveillance System	Home Clinical Environmental Repo	orts	
Find Patient	Family Members and Guardian		
Clinical Letters	r anny members and odardian		
Patient Info	Name	Relationship	Primary Choose
Family Members	Jack Olantern	Brother	No
Patient Address	Jack Sr. OLantern	Father	Yes
Blood Lead Tests	Jane OLantern	Mother	No
Case Details			
Case Exposure			
Associated Persons			
Other Blood Tests			
Other Medical	First Name Middle Name	Last Name	Maiden Name
Chelation	Jack Sr.	OLantern	*
Notes	Jack SI.	OLantern	I
Patient Attachments	DOB Sex F	telationship to Child	Primary Guardian
	×	Father V	* Yes

Step 12: When you are done making changes, you must click the **Save** button in the bottom left corner before leaving the screen or your changes will not be saved and added to the record.

New
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>.

