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	(OLANTERN, JILL) D	OB: 1/1/20	16 ID#: 201	8924 J	URI.: DEPARTMENT OF PUBLIC	HEALTH FOR M	ADISON AND DANE C
Poisoning Surveillance System	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	(OLANTE	(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	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 Age	Sav	Twin	
Family Members	01/01/2016		2 Vro. 2 Mon	* Eomalo		Local ID No.
Patient Address	01/01/2010		5 TTS, 2 MOS.	remaie		Medical Rec
Blood Lead Tests	Ethnicity	Select	Race	Select		Max Blood Ph
Case Details	Ustranus	Jeleu		Jeleci		
Case Exposure	Unknown		UNKNO	wn		# Reports 8
Associated Persons						SSN
Other Blood Tests						
Other Medical						Medicaid ID
Chelation						Next Pb Date 1/31/2019
Notes	Country of Bi	rth	State/Province	•	Language	Interview in English?
Patient Attachments	,					
	Number	Direction	Street		Type	Direction Ant No.
	1/03	Direction	Drairia Dosa D	rivo Ant Suito	Type	
	1403		▼ Prairie Rose L	inve Apt Suite		¥ Z

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 PUBLIC HEALTH FOR MADISON AND DANE C					
Healthy Homes and Lead Poisoning Surveillance System	Home Clinical Environmental Reports					
Find Patient	Eamily Members and Guardian					
Clinical Letters	raining 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						
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 Healthy Homes and Lead	(OLANTERN, J	(OLANTERN, JILL) DOB: 1/1/2016 ID#: 2018924 JURI.: DEPARTMENT OF PUBLIC HEALTH FOR MADISON AND DANE C							
Find Patient	Family Merr	nbers an	d Guardia	n					
Clinical Letters									
Patient Info	Name					Relationship		Primary	Choose
Family Members	Jack Olantern					Brother		No	
Patient Address	Jack Sr. OLanter	<u>n</u>				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	×			0	lantern		*	
Notes			1		Ľ				
Patient Attachments	DOB	Sex			Relation	ship to Child		Primary G	uardian
	10/31/2017	Male		$\checkmark$	Brother		✓ *	No	$\sim$
	Add Phone	Cancel						-	
New	J								
Help									
Save									
Revert Print Screen									

**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#: 2018924 JURI.	DEPARTMENT OF PUBLIC	HEALTH FOR MADISON AND	DANE C
Healthy Homes and Lead Poisoning Surveillance System	Home Clinical Environmental Reports			
Find Patient	Eamily Members and Guardian			
Clinical Letters	Family 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				

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

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 Clir	Home Clinical Environmental Reports						
Find Patient	Eamily Men	bere and	Cuardian					
Clinical Letters								
Patient Info	Name Relationship Primary					Choose		
Family Members	Jack Olantern				Brother		No	
Patient Address	Jack Sr. OLanter	n			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	st Name		Maiden	Name
Chelation	Jack	× *		0	antern		*	
Notes			1	1			1	
Patient Attachments	DOB	Sex		Relations	ship to Child		Primary G	uardian
	10/31/2017	Male	~	Brother		✓ *	No	$\sim$
	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	aet Name		Maiden Name
Chelation				2) antern	,	
Notes	Jane	~		/Lancen		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		<ul> <li>Image: Image: Ima</li></ul>	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#: 2018924 JURI.: DEPARTMENT OF PUBLIC HEALTH FOR MADISON AND DANE C					
Healthy Homes and Lead Poisoning Surveillance System	Home Clinical Environmental	Reports				
Find Patient	Family Members and Guardia	an				
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	l ast Name	Maiden Name			
Chelation			*			
Notes	Jack St.	OLantern				
Patient Attachments	DOB Sex	Relationship to Child	Primary Guardian			
		✓ Father ✓ *	No			
	Add Phone Cancel					
	Phone Type	Main Edit D	elete			

**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	(OLANTERN, JILL) DOB: 1/1/2016 ID#: 2018924 JURI.: DEPARTMENT OF PUBLIC HEALTH FOR MADISON AND DANE C Home Clinical Environmental Reports						
Find Patient Clinical Letters	Fan	Ø Parent/Guardians Webpage Dialog		×			
Patient Info     Family Members	Nam Jack	Select Primary Guardian for Patient	Choose	Cancel			
Blood Lead Tests	<u>Jack</u> 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	First I Jack						
Patient Attachments	DOB						
	Ad Phot (608 (608						
New Help Save Revert Print Screen							
Log Out		https://hhlpssu; 🔍 Local intranet   Protected	I 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 JUF	I.: DEPARTMENT OF PUBLIC H	EALTH FOR MADISON AND DANE C			
Healthy Homes and Lead Poisoning Surveillance System	Home Clinical Environmental Reports					
Find Patient	Family Members and Guardian					
Clinical Letters						
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 Nama	Maidaa Nama			
Chelation	First Name Middle Name	Clastere	*			
Notes	Jack Sr.	OLantern				
Patient Attachments	DOB Sex Rela	ionship to Child	Primary Guardian			
	Fati	er 🗸 *	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>.

