Protecting Our Children's Health

Securely, Accurately, Confidentially

Quick Reference Guide To Vermont Public Health Patient Profile

The Vermont Public Health Patient Profile is a group of applications that provide access to screening and prevention data. Access is based upon permission levels. These are built upon the Vermont Department of Health Shared Public Health Information Exchange (SPHINX) database. Access is managed by the individual programs.

> *Vermont Early Hearing Detection and Intervention *Immunization Registry *Dried Blood Spot *Blood Lead *Developmental Screening



Support Telephone: 1-800-537-0076 (1-802-651-1872) Fax 1-802-951-1218 E-mail: <u>VTEHDI@vermont.gov</u>

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Logging Out
Further Assistance

* Logging In *

LOGGING INTO THE PUBLIC HEALTH PATIENT PROFILE

- Open Microsoft Internet Explorer. (Google Chrome and Safari are not supported)
- Type http://healthvermont.gov/family/hearing in the address bar.
- OR type Vermont Early Hearing Detection and Intervention into the search bar.
- Select the option, Vermont Early Hearing Detection and Intervention.
- Click the <u>Screening Results Log On</u> graphic to log into the registry.
- Enter your user name, password, and click <u>OK</u>.



BASICS ON USING THE VERMONT PUBLIC HEALTH PATIENT PROFILE

STEP ONE: SEARCHING FOR A PATIENT

- Click <u>Search Patient</u>.
- Enter the patient's last name, first name, and date of birth. (Use the Tab key or mouse to move between cells)
- Click *Find*. A list of possible matches will be displayed.
- Click <u>Select</u> next to the correct patient name.

👌 Patient Profile R6 (SPH)	INX-TEST / dbSphi	nx) - Windows Internet Explor	rer	1111			X
VERMONT DEPARTMENT OF HEALTH		Individual Pro	file		2	VERMONT DEPARTMENT OF HEALTH	*
User: janet.fortune	Practice: HOP Clinic-	Burlington	Pai	tient: None Sele	cted	Logout	
			Search Pati	ent			
Actions: Search Patient	use "wild card se	please search for LAST NAME + arches, where you enter "J" or " ist. These searches make it eas	FIRST NAME + J*" to find a rea	DATE OF BIRT			
Current Patient	First Name: Middle Name:		Date	of Birth: 1	/01/2001		
Programs:	Last Name: Identifiers:	DECEMBER			_		
Hearing	Search Results:	IMR Patient	First Name	Middle Name	Date of Birth		
			Molly		1/1/2001	1	
		New Search Find	Add New	Save	Cancel		
For q	uestions, or help wi	th this application, please conta	act imr@state.v	t.us or call (88	8)688-4667		
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						100%	▼ "4

STEP TWO: VERIFY PATIENT INFORMATION

Verify Patient Information

- Please verify you have the correct patient by checking the patient name, date of birth, mother or guardian. We recommend all information be verified before moving on to the next steps.
- If this is not the correct patient then return to <u>Search Patient</u> and start from the beginning.

	R6 (SPHINX-TE	ST / dbSphinx) - Wind	ows Internet Exp	olorer	
DEPARTMENT OF HEALTH		Individual Prot	file	-	VERMONT DEPARTMENT OF HEALTH
Jser: janet.fortune	Practice: HOP Cli	nic-Burlington	Patient: [December, Molly	Logout
A		Pa	atient Information	n	
Actions:	Patient ID:		IMR Status:	Inactive - Moved or G	Gone Elsewhere 🛛 🔻
Search Patient	Preferred Name:	Verify	<	+	Verifv 🚽
Current Patient	*First Name:	Molly	*Date of Bin	th: 1/1/2001	
	Middle Name:	Verify	*Gender:	Female 🔻	
	*Last Name:	December	*Residence	Burlington	
Programs:	Suffix:			Out of State	
Hearing	Race:	American Indian or Alaska Native	describes w Check the "	ispanic Origin? (Check th hether patient is Spanish/ No" box if patient is not ¡panic/Latino,)	
		Chinese	No		
		Filipino	No, not S	panish/Hispanic/Latina/L	atino
		Guamanian or Chamorro	Unknown		
		Japanese	Yes		
		Korean	Ves, Cub	an kican, Mexican American,	Chicana/Chicana
		Native Hawaiian		acan, Mexican American, er Spanish/Hispanic/Latin	
		Other	Ves, Pue		
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		Other Pacific Islander			
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	Address Loc.: Address Type:	Mailing Address	Totreet:		
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	Confidentiality:		*State:	VT VT *Zip: 05401	+4:
			*Country:	UNITED STATES	
	Communication:		Country:		
		Method Number / A	ddress Extension	Location Confidential	ity
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	Mother Middle N		Guardian Mi		
	*Mother Last Na		*Guardian L		
	Mother Maiden N			Father	•
		New Search Find	Add New S	Cancel	
For q	uestions, or help wit	th this application, please conta	ct imr@state.vt.us or o	all (888)688-4667	
					🖲 75% 🛛 🔻
					1370

ENTERING INTO THE HEARING APPLICATION

STEP ONE: ACCESSING HEARING INFORMATION

From the Patient Information screen, click the blue <u>*Hearing*</u> link on the left side of the screen.

- If it is grayed-out, or nothing happens when you click on it, that means that you may not have permission to view or edit this information.
- Contact the VTEHDI staff to request access.

DEPARTMENT OF HEALTH		Individ	dual Profil	2					VERM	
; janet.fortune	Practice: HOP Cli	inic-Burlington		Patie	ent: Dece	ember, N	olly	-		Logout
•		-					-			-
			Pati	ent Informa	tion					
ctions:	Patient ID:			IMR St		Inacti	ve - Move	d or Gone l	Flsewhere	-
arch Patient	Preferred Name:									
urrent Patient	*First Name:	Molly			of Birth:	1/1/20	01			
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rograms:	*Last Name: Suffix:			*Reside	ence:		Out of S			· · ·
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		Chinese		No -	not Snan	ich/Hicn	anic/Lati	ina/Latin	0	
		Guamanian or Cham		Unkne	own				-	
		Japanese	0.10	Unk	nown					
		Korean		Ves Ves	Cuban					
		Native Hawaiian				n, Mexica	an Ameri	can, Chio	ana/Chi	cano
		Other					ispanic/l	Latina/La	itino	
		Other Asian		Ves	Puerto F	Rican				
		Other Pacific Islande	er							
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* High Risk Information *

STEP TWO: VIEWING OR EDITING PATIENT PROFILE HIGH RISK INFORMATION

- 1. Note* the bolded font identifies which page you are viewing.
- 2. Most information found here is acquired from the Electronic Birth Record.
- 3. If you have a "view only" permission status all information should already be filled in with a "Yes", "No" or "Unknown".

*If you have an "Edit" status then you will need to answer the Risk Factors that are highlighted in Red with "Yes", "No" or "Unknown".

🤶 Patient Profile R6	(SPHINX-TEST / dbSphinx) - Window	s Internet Explore	r 🗆 🗖 📈 🕹
VERMONT DEPARTMENT OF HEALTH	Individual Profile	:	VERMONT DEPARTMENT OF HEALTH
User: janet.fortune	Practice: HOP Clinic-Burlington	Patient: Decem	ber, Molly Logout
Actions:		tion to Common the	
ACLIONS: Search Patient		tient Summary	Surger 0 months and 12 days
Current Patient	Patient: December, Molly Date of Birth: 1/1/2 Residence: Burlington Practice Name: Loc		2 years 9 months and 13 days
Providers Immunization Information for	Bir	th Information	
Families 8. the Public	Birth Information:		••••••
Programs:	Medical Record Number: Type of Birthplace: 000112233 Hospital	Facility Name: Fletcher Allen Heal 🔻	
-	Estimate of Gestation: Other Type of Birthplace	e: Other Facility Name:	Multiple Birth Order:
Hearing	40		First
	High	Risk Information	
Hearing Actions	I INo ▼ Family history of permanent hearing		l Infections:
Newborn Hearing Screening	i childhood		Toxoplasmosis
Early Childhood Screening	No Active congenital infections 		Cytomegalovirus
Diagnosis	No Tear Pits/Tags		Herpes Simplex Virus
\lor	No Syndrome associated with hearing	loss	▼ Rubella
	No Ototoxic medications given to ba	y	▼ Syphilis
	No Was the child born with craniofacian abnormalilties?	al	
	Other Factors:		
	Infant living at the time of the report	ort	i i
	No Child admitted to a NICU for > 4 H	nours	
	 Infant transferred within 24 hours 	of delivery	<u>i</u>
	Facility Name		
	• Ini	tial Screening	• • • • • •
	Hearing Screening:		
	Screening Type: Date: Initial (medical) Sc T 1/3/2001	Place of Screening: Fletcher Allen Heal 🔻	Screener Initials: me
	Right Ear Results: Right Ear Technology: Pass	Left Ear Results: Pass 🗸 🗸	Left Ear Technology: DPOAE
	No Screening Conducted:		
	No Screen Reason: Transferred to:	Date:	
		_	
	Follow Up Plan for ASAP:		
		w-Up Screening	
	Enter New Follow Up Screening There are no Follow Up test results for th	his child.	
		Screening Results	
	Final Screening Result / Outcome: Pass Bilaterally	▼	
		Actions	
	Save Cancel		
For quest	ions, or help with this application, please contact vte	hdi@state.vt.us or call 1-8	800-537-0076
			75% -

STEP THREE: VIEWING OR EDITING INITIAL HEARING SCREENING INFORMATION

Initial Hearing screening:

1. Provide the date, place, screener, results and technology used for the initial screening.

	(SPHINX-TEST / dbSphinx) - Window	s internet Explore		×
VERMONT	Individual Profile	2	VERMONT	
Jser: janet.fortune	Practice: HOP Clinic-Burlington	Patient: Decemb		
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Actions:	Pa	tient Summarv		1
Search Patient	Patient: December, Molly Date of Birth: 1/1/2		2 years 9 months and 13 days	
Current Patient	Residence: Burlington Practice Name: Lo	om Practice		
Immunization Information for Providers				
Immunization Information for Families & the Public	Birth Information:	th Information		
	Medical Record Number: Type of Birthplace:	Facility Name:		
Programs:	000112233 Hospital 🔻	Fletcher Allen Heal 🔻		
	Estimate of Gestation: Other Type of Birthplac	e: Other Facility Name:	Multiple Birth Order:	
fearing	40		First	
	High	Risk Information		
learing Actions	No Family history of permanent heari		al Infections:	
Newborn Hearing Screening	childhood		▼ Toxoplasmosis	
arly Childhood Screening	No Active congenital infections		Cytomegalovirus	
)iagnosis	No Ear Pits/Tags		Herpes Simplex Virus	
	No Syndrome associated with hearing		Rubella	
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	No Was the child born with craniofaci abnormalilties?	ai		
	Other Factors:			
	Infant living at the time of the rep			
	No Child admitted to a NICU for > 4	hours		
	Infant transferred within 24 hours	of delivery		
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	Facility Name In Hearing Screening: Screening Type: Date:	Itial Screening	Screener Initials:	
	Facility Name Facility Name In Hearing Screening: Screening Type: Date: Initial (medical) Sc 1/3/2001	Itial Screening Place of Screening: Fletcher Allen Hea ▼	me	
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1. No Screen Conducted:

When the initial screen field does not have data, the No Screen Conducted field provides information as to why an initial hearing screen may not have been conducted at or around the time of birth.

The reason for no screen conducted is found in the drop down menu.

If a patient has been transferred to another hospital please fill in the information "Transferred To" and "Date" that they were transferred.

葠 Patient Profile R	6 - Windows Internet Explorer	x
VERMONT DEPARTMENT OF HEALTH	Individual Profile	
User: janet.fortune	Practice: HOP Clinic-Burlington Patient: December, Molly Logout	
Actions:	Patient Summary	
Search Patient Current Patient Immunization Information for	Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days Residence: Burlington Practice Name: Loom Practice	
Providers Immunization Information for Families & the Public	Birth Information	
Programs:	Medical Record Number: Type of Birthplace: Facility Name: 000112233 Hospital Fletcher Allen Hea	
Handon	Estimate of Gestation: Other Type of Birthplace: Other Facility Name: Multiple Birth Order: 40 First T	
Hearing	High Risk Information	
Hearing Actions Newborn Hearing Screening	No ▼ Family history of permanent hearing loss in childhood Congenital Infections: Toxoplasmosis	
Early Childhood Screening	No ▼ Active congenital infections	
Diagnosis	No ▼ Ear Pits/Tags No ▼ Syndrome associated with hearing loss	
	Na V Otetavis medications given to baby	
	No Was the child born with craniofacial abornalities?	
	Other Factors: Infant living at the time of the report No Child admitted to a NICU for > 4 hours Infant transferred within 24 hours of delivery Facility Name	н
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	I No Screen Reason: Transferred to: Date:	
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	Final Screening Result / Outcome: Pass Bilaterally	
	Actions	
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2. Follow-Up Plan for ASAP:

This is a view only field and is managed by VTEHDI staff only. When a patient does not have or does not pass an initial hearing screening a recommendation is made and VTEHDI staff will follow-up with PCP and family.

Construction Individual Profile Construction
Actions: Patient Summary Search Patient Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days Current Patient Programs: Programs: Birth Information Medical Record Number: Type of Birthplace: Programs: O00112233 Hearing Actions Medical Record Number: Yes Family history of permanent hearing loss in childhood Screening No Active congenital infections No Syndrome associated with hearing loss No Ototxic medications given to baby No Was the child born with craniofacial abnormalities? Other Factors: Infant living at the time of the report No Child admitted to a NICU for > 4 hours
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Search Patient Current Patient Current Patient Demonization Information for Providers Providers Dimmunization Information for Providers Programs: Birth Information: Medical Record Number: Type of Birthplace: OD0112233 Hearing Actions Newborn Hearing Screening Diagnosis No Quartopic Actions given to baby No Syndrome associated with hearing loss No Otoxic medications given to baby No Cotoxic medications given to baby No Child admitted to a NICU for > 4 hours
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Immunization Information for Providers Immunization Information for Particle Name: Down Practice Programs: Hearing Actions Hearing Actions Newborn Hearing Screening Diagnosis No V Ear Pits/T ags No V Cotoxic medications given to baby No V Octoxic medications given to baby No V Syndrome associated with hearing loss No V Cotoxic medications given to baby No V Cotoxic medications given to the report No V Child admitted to a
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Families & the Public Birth Information: Medical Record Number: Type of Birthplace: Facility Name: 000112233 Hospital Fletcher Allen Hea Estimate of Gestation: Other Type of Birthplace: Other Facility Name: Hearing High Risk Information Hearing Actions Yes Family history of permanent hearing loss in childhood Newborn Hearing Screening Yes Family history of permanent hearing loss in childhood Congenital Infections: No Active congenital infections Image: Congenital Infections Toxoplasmosis Diagnosis No Syndrome associated with hearing loss Image: Rubella No Syndrome associated with hearing loss Rubella No Was the child born with craniofacial abnormalilties? Synhilis Other Factors: Infant living at the time of the report Synhilis No Child admitted to a NICU for > 4 hours Supervisition
Programs: 000112233 Hospital Fletcher Allen Hea Hearing Estimate of Gestation: Other Type of Birthplace: Other Facility Name: Multiple Birth Order: Hearing High Risk Information Hearing Actions Yes Family history of permanent hearing loss in childhood Congenital Infections: Newborn Hearing Screening No Active congenital infections Toxoplasmosis Diagnosis No Syndrome associated with hearing loss Toxoplasmosis No Syndrome associated with hearing loss Rubella No Ototoxic medications given to baby Syphilis No Was the child born with craniofacial abnormalilties? Syphilis Other Factors: Infant living at the time of the report No No Child admitted to a NICU for > 4 hours Suphilis
Hearing Estimate of Gestation: Other Type of Birthplace: Other Facility Name: Multiple Birth Order: Hearing Actions High Risk Information Newborn Hearing Family history of permanent hearing loss in childhood Congenital Infections: Screening No Active congenital infections Toxoplasmosis Diagnosis No Ear Pits/Tags Herpes Simplex Virus No Ototoxic medications given to baby Rubella No Was the child born with craniofacial abnormalilities? Syphilis Other Factors: Infant living at the time of the report No No Child admitted to a NICU for > 4 hours Supplice
Hearing 40 First Hearing Actions High Risk Information Newborn Hearing Congenital Infections: Screening Toxoplasmosis Early Childhood Screening No Diagnosis No No Syndrome associated with hearing loss No Ototoxic medications given to baby No Was the child born with craniofacial abnormalilities? Other Factors: Infant living at the time of the report No Child admitted to a NICU for > 4 hours
Hearing High Risk Information Hearing Actions Yes Family history of permanent hearing loss in childhood Congenital Infections: Newborn Hearing No Active congenital infections Toxoplasmosis Early Childhood Screening No Active congenital infections Toxoplasmosis No Ear Pits/Tags Toxoplasmosis Pherpes Simplex Virus No Syndrome associated with hearing loss Rubella No Ototoxic medications given to baby Syphilis No Was the child born with craniofacial abnormalilities? Syphilis Other Factors: Infant living at the time of the report No No Child admitted to a NICU for > 4 hours Supervisition of the report
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Hearing Actions Yes Family history of permanent hearing loss in childhood Congenital Infections: Early Childhood Screening No Active congenital infections Toxoplasmosis Diagnosis No Ear Pits/Tags Perpes Simplex Virus No Syndrome associated with hearing loss Rubella No Ototoxic medications given to baby Syphilis No Was the child born with craniofacial abnormalities? Syphilis Other Factors: Infant living at the time of the report No No Child admitted to a NICU for > 4 hours Suppose
Newborn Hearing Screening Toxoplasmosis Early Childhood Screening No Diagnosis Active congenital infections No Ear Pits/Tags No Syndrome associated with hearing loss No Syndrome associated with hearing loss No Ototoxic medications given to baby No Was the child born with craniofacial abnormalities? Other Factors: Infant living at the time of the report No Child admitted to a NICU for > 4 hours
Barly Childhood Screening No Active congenital infections Cytomegalovirus Diagnosis No Ear Pits/Tags Therpes Simplex Virus No Syndrome associated with hearing loss Rubella No Ototoxic medications given to baby Syphilis No Was the child born with craniofacial abnormalilities? Syphilis Other Factors: Infant living at the time of the report No No Child admitted to a NICU for > 4 hours Child admitted to a NICU for > 4 hours
Diagnosis No Ear Pits/Tags Herpes Simplex Virus No Syndrome associated with hearing loss Rubella No Ototoxic medications given to baby Syphilis No Was the child born with craniofacial abnormalilities? Syphilis Other Factors: Infant living at the time of the report No No Child admitted to a NICU for > 4 hours Supervision
No Syndrome associated with hearing loss No Ototoxic medications given to baby No Was the child born with craniofacial abnormalilties? Other Factors: Infant living at the time of the report No Child admitted to a NICU for > 4 hours
No Ototoxic medications given to baby Syphilis No Was the child born with craniofacial abnormalilties? Syphilis Other Factors: Infant living at the time of the report Syphilis No Child admitted to a NICU for > 4 hours Syphilis
No Was the child born with craniofacial abnormalilties? Other Factors: Infant living at the time of the report No Child admitted to a NICU for > 4 hours
Other Factors: Infant living at the time of the report No Child admitted to a NICU for > 4 hours
Infant living at the time of the report No Child admitted to a NICU for > 4 hours
No Child admitted to a NICU for > 4 hours
Facility Name
Initial Screening
Hearing Screening: Screening Type: Date: Place of Screening: Screener Initials:
Initial (medical) Sc V
Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:
No Screening Conducted: No Screen Reason: Transferred to: Date:
Discharged without Screer
Follow Up Plan for ASAP:
Audiology / ENT Appointment g
Enter New Follow Up St Outpatient Hospital Screening There are no Follow PCP Appointment
Final Screening Results
Final Screening Result / Outcome:
Actions
Save Cancel
For questions, or help with this application, please contact vtehdi@state.vt.us or call 1-800-537-0076
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* **Initial Hearing Screening Information ***

3. Follow-Up Screening:

 When a follow-up screening has occurred you will click on the "Enter New Follow-Up Screening" and an additional data entry box will populate. Enter information into the Follow-Up data fields. Provide the date, place, screener, results and technology used for the follow-up screening.

There can be multiple follow-up screening reports under this category until a final outcome has been determined.

ဓ Patient Profile R	6 - Windows Internet Explorer	x
VERMONT	Individual Profile	~
DEPARTMENT OF HEALTH User: janet.fortune	Practice: HOP Clinic-Burlington Patient: December, Molly Logout	
Actions:	Patient Summary	
Search Patient Current Patient	Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days Residence: Burlington Practice Name: Loom Practice	
Immunization Information for Providers		
Immunization Information for Families & the Public	Birth Information	
Parmines of the Public	Birth Information: Medical Record Number: Type of Birthplace: Facility Name:	
Programs:	000112233 Hospital V Fletcher Allen Hea V	
	Estimate of Gestation: Other Type of Birthplace: Other Facility Name: Multiple Birth Order:	
Hearing 🛌	40 First V	
	High Risk Information	
Hearing Actions Newborn Hearing	Yes Family history of permanent hearing loss in Congenital Infections:	
Screening	childhood Toxoplasmosis No Active congenital infections	
Early Childhood Screening Diagnosis	No ▼ Cytomegalovirus No ▼ Ear Pits/Tags ▼ Herpes Simplex Virus	
	No Syndrome associated with hearing loss Rubella	
	No	
	No Was the child born with craniofacial abnormalilties?	
	Other Factors:	
	Infant living at the time of the report	
	No Child admitted to a NICU for > 4 hours	
	Infant transferred within 24 hours of delivery	E
	Facility Name	
	Initial Screening Hearing Screening:	
	Screening Type: Date: Place of Screening: Screener Initials:	
	Initial (medical) Sc 🔻	
	Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:	
	No Screening Conducted: Cannot edit Initial Screening if no Screen Reason is	Enter
	No Screen Reason: Transferred to: Date:	
	Discharged without Screer V	
	Follow Up Plan for ASAP: Audiology / ENT Appointment	
	Follow-Up Screening	
	Enter New Follow Up Screening Cancel New Follow Up Screening Hearing Screening:	
	Screening Type: Date: Place of Screening: Screener Initials:	
	Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:	
	There are no Follow Up test require for this shild	
	There are no Follow Up test results for this child. Final Screening Results	
	Final Screening Result / Outcome:	
	•	
	Actions Save Cancel	
For ques	tions, or help with this application, please contact vtehdi@state.vt.us or call 1-800-537-0076	
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	· 75% ·	· .

4. Final Screening Result / Outcome:

This is a view only field and is managed by VTEHDI staff and will indicate when a Newborn Hearing screening record has been closed. Choices for this may vary. When finished entering a screening or follow-up screening click on the save button and the work you provided will be loaded.

*Please note you will have only 24 hours in which to edit any entry, after that the fields become locked and you will have to contact a VTEHDI staff member to modify any loaded test results.

🥌 Patient Profile R6	5 - Windows Internet Explorer	x
VERMONT	Individual Profile	•
	Practice: HOP Clinic-Burlington Patient: December, Molly Logout	
Actions:	Patient Summary	1
Search Patient Current Patient Immunization Information for Providers	Patient: December, Molly Date of Birth: 1/1/2001 Patient Age: 12 years 9 months and 13 days Residence: Burlington Practice Name: Loom Practice	
Immunization Information for Families & the Public	Birth Information	
Programs:	Birth Information: Medical Record Number: Type of Birthplace: Facility Name: 000112233 Hospital Fletcher Allen Hea	
	Estimate of Gestation: Other Type of Birthplace: Other Facility Name: Multiple Birth Order:	
Hearing 🍋		
Hearing Actions	High Risk Information	
Newborn Hearing Screening Early Childhood Screening Diagnosis	Yes Family history of permanent hearing loss in childhood Congenital Infections: No Active congenital infections Toxoplasmosis No Ear Pits/Tags Cytomegalovirus No Syndrome associated with hearing loss Rubella No Ototoxic medications given to baby Syphilis No Was the child born with craniofacial abnormalilties? Syphilis	
	Other Factors: Infant living at the time of the report No Child admitted to a NICU for > 4 hours Infant transferred within 24 hours of delivery Facility Name Initial Screening	Ш
	Hearing Screening:	
	Screening Type: Date: Place of Screening: Screener Initials:	
	Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:	
	No Screening Conducted:	
	No Screen Reason: Transferred to: Date: Discharged without Screer V	
	Follow Up Plan for ASAP: Audiology / ENT Appointment	
	Follow-Up Screening	
	Enter New Follow Up Screening Cancel New Follow Up Screening	
	Hearing Screening: Screening Type: Date: Place of Screening: Screener Initials: Follow up screen Image: Constraint of the screening screening in the screening	
	Right Ear Results: Right Ear Technology: Left Ear Results: Left Ear Technology:	
	There are no Follow Up test results for this child.	
	Final Screening Results	
	Final Screening Result / Outcome:	
	Pass Bilaterally	
	Save Cancel Family Choice Not to Test	
For quest	tions, or help with this application, ple Relocated Out of State Referred for Diagnostic Evaluation	-
	Pass Bilaterally with Risk Factors	-

* **Initial Hearing Screening Information ***

STEP FOUR: RED FLAG

- 1. When a "Red Flag" indicator appears it can mean one of two things.
 - The patient record is being flagged due to either not passing the newborn hearing screening or,
 - The patient's record has been flagged with a high risk factor and will need continued annual follow-up.

Review the patient record to determine that a full recorded history of hearing screening is available with an outcome. Also determine which risk factors might have been identified at birth to indicate a need for annual screening.

Patient Profile R	6 - Windows Internet Explore		
VERMONT DEPARTMENT OF HEALTH	Individu	ual Profile	VERMONT DEPARTMENT OF HEALTH
Jser: janet.fortune	Practice: HOP Clinic-Burlington	Patient: Dece	mber, Molly Logout
Actions: Search Patient Current Patient Immunization Information for Providers		Patient Summary f Birth: 1/1/2001 Patient Age: ce Name: Loom Practice	12 years 9 months and 13 days
Immunization Information for		Birth Information	
Families & the Public	Birth Information: Medical Record Number: Type of Bir		
Programs:	00112233 Hospital	▼ Fletcher Allen Heal ▼	
Hearing	Estimate of Gestation: Other Type 40	of Birthplace: Other Facility Name:	Multiple Birth Order: First
		High Risk Information	
Hearing Actions	Yes Family history of per		tal Infections:
Newborn Hearing Screening Early Childhood Screening Diagnosis	childhood No Active congenital info No Ear Pits/Tags No Syndrome associated No Ototoxic medications No Was the child born wi	ections	 Toxoplasmosis Cytomegalovirus Herpes Simplex Virus Rubella Syphilis
	Facility Name		
		Initial Screening	
	Hearing Screening:		
	Screening Type: Date: Initial (medical) Sc	Place of Screening:	Screener Initials:
	Right Ear Results: Right Ear T	echnology: Left Ear Results:	Left Ear Technology:
	No Screening Conducted: No Screen Reason: Tra	nsferred to: Date:	
	Discharged without Screer	Date:	
	Follow Up Plan for ASAP: Audiology / E	NT Appointment 🔻	
		Follow-Up Screening	
	Enter New Follow Up Screening	Cancel New Follow Up Screening	
	Hearing Screening:		
	Screening Type: Date: Follow up screen 🔻	Place of Screening:	Screener Initials:
	Right Ear Results: Right Ear T	echnology: Left Ear Results:	Left Ear Technology:
	There are no Follow Up test re	sults for this child.	
		Final Screening Results	
	Final Screening Result / Outcome:	▼ n Bilthrable	
	Fai	ss Bilaterally nily Choice Not to Test Response from Family	
For ques	stions, or help with this application, ple		-800-537-0076
		s Bilaterally with Risk Factors	4 75%

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EARLY CHILDHOOD HEARING SCREENING

Hearing screening results can be entered in the Early Childhood Hearing Screening tab as early as 6 months of age through age 5. Please refer to the recommended hearing screening schedule located on page 18. The exception to this rule is if a patient does not have a Final Screening Result / Outcome from the Initial Newborn Hearing Screening section <u>and</u> are under 12 months of age then the system will not allow you to enter a Early Childhood Hearing Screening. Please contact VTEHDI staff for details.

STEP ONE: ACCESS EARLY CHILDHOOD HEARING SCREENING

On the left side of the screen there is a link to the Early Childhood Hearing Screening. Click on that tab and it will direct you to the page for data entry.

VERMONT DEPARTMENT OF HEALTH	Ir	ndividual Profile	VERMONT DEPARTMENT OF HEALTH
Jser: janet.fortune	Practice: HOP Clinic-Burlington	Patient: December, Molly	Logout
Actions:		Patient Summary	
Search Patient Current Patient	Patient: December, Molly Residence: Burlington	Date of Birth: 1/1/2001 Patient Age: 12 years 9 month Practice Name: Loom Practice	ns and 14 days
Immunization Information fo Providers	Patient Screenings		
Immunization Information for Families & the Public	Enter New Early Childho	ood Screening	
Programs:	There are no test result	ts for this child.	
Hearing Actions Hearing Actions Newborn Hearing Screening Early Childhood Screening Diagnosis		tion, please contact vtehdi@state.vt.us or call 1-800-537-0076	
roi qu	escions, or neip with this applica	don, please contact viendi@state.vi.us of call 1-000-357-007	,
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STEP TWO: ENTERING EARLY CHILDHOOD HEARING SCREENING

Entering an Early Childhood Hearing Screen

- 1. Below patient screenings is a tab for Enter New Early Childhood Hearing Screening. Click on that tab.
- 2. A new window will pop up to add a new hearing screen.
- 3. Enter a new hearing screening and click on the save tab.
- 4. Multiple hearing screenings may be added over time to this record.

🥚 Patient Profile R6 (SPH	INX-TEST / dbSphinx) - Wind	ows Internet Explorer		_ • ×	Patient Profile R6 (SF	HINX-TEST / dbSphinx) - Wind	ows Internet Explorer		_ D X
VERMONT DEPARTMENT OF HEALTH	I	ndividual Profile		VERMONT DEPARTMENT OF HEALTH	VERMONT DEPARTMENT OF HEALTH	I	ndividual Profile		VERMONT DEPARTMENT OF HEALTH
User: janet.fortune	Practice: HOP Clinic-Burlington		Patient: December, Molly	Logout	User: janet.fortune	Practice: HOP Clinic-Burlington		Patient: December, Molly	Logout
Actions: Search Patient Current Patient Immunization Information for Provides Immunization Information for Families & the Public Programs: Hearing Meaning Screening Early Childhood Screening Diagnosis	Patient Screenings	Date of Birth: 1/1/2001 Practice Name: Loom Practice Name: Name	Summary Patient Age: 12 years 9 mor	the and 14 days	Actions: Search Ratert Current Ratert Immunization Information Provide Screening Type: Early Childhood S Right Ear Results: Cancel Save	Patient Screenings Webpage Dialog ing: Date:	4 5 1 12 8 19	Patient Age: 12 years 9 mon ice Screener Initials: Left Ear Technology:	ths and 14 days
For qu	estions, or help with this applica	ition, please contact vtehdi@s	state.vt.us or call 1-800-537-00	176	For q	estions, or help with this applica	tion, please contact vtehdi@st	ate.vt.us or call 1-800-537-00	'6
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Search Patient Patient: December, Molly Residence: Burlington Date of Birth: 1/1/2001 Practice Name: Loom Practice Providers Immunization Information for Families & the Public Patient Screenings Programs: Enter New Early Childhood Screening Hearing Screening Type: Early Childhood Scr Date: Programs: Hearing Actions Mearing Screening:		VERMONT DEPARTMENT OF HEALTH , Molly Logout
Actions: Patient Search Patient Patient: December, Molly Date of Birth: 1/1/2001 Current Patient Immunization Information for Practice Survivers Immunization Information for Patient Screenings Patient Screening: Programs: Early Childhood Scr ♥ I2/11/2005 Cort Hearing Refer Right Ear Results: Right Ear Technology: Le Hearing Actions Hearing Screening: Screening: Screening:	t Summary Patient Age: 12 y	
Search Patient Patient: December, Molly Residence: Burlington Date of Birth: 1/1/2001 Practice Name: Loom Practice Name: Loom	Patient Age: 12 y	vears 9 months and 14 days
Search Patient Patient: December, Molly Residence: Burlington Date of Birth: 1/1/2001 Practice Name: Loom Practice Name: Loom	Patient Age: 12 y	years 9 months and 14 days
Current Patient Residence: Burlington Practice Name: Loom Practic		vears 9 months and 14 days
Providers Patient Screenings Immunization Information for Enter New Early Childhood Screening Programs: Hearing Screening: Screening Type: Date: Platent Screening: Screening: Right Ear Results: Right Ear Technology: Learing Actions Hearing Screening:		
Families & the Public Enter New Early Childhood Screening Programs: Hearing Screening Type: Date: Plaining Screening Type: Date: Right Ear Results: Right Ear Technology: Le Refer DPOAE Product Hearing Actions Hearing Screening:		
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Hearing Actions Hearing Screening:	ft Ear Results:	Left Ear Technology:
Hearing Actions Hearing Screening:	ass 🔻	AABR
Newborn Hearing Screening Screening Type: Date: Pla	ace of Screening:	Screener Initials:
Early Childhood Scr 10/1/2004 C	arls Practice 🔻	Carlo
Diagnosis Right Ear Results: Right Ear Technology: Le	ft Ear Results:	Left Ear Technology:
Pass	ass 🔻	DPOAE -
Edit		
	O - t- t	-
For questions, or help with this application, please contact vtehdi	@state.vt.us or call 1-1	800-537-0076
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DIAGNOSTIC HEARING TEST RESULTS

STEP ONE: ACCESSING DIAGNOSTIC HEARING TEST

Accessing Diagnostic Hearing Testing Results by clicking on the Diagnosis tab on the left side of the page.

👌 Patient Profile R6 (SPHIN	IX-TEST / dbSphinx) - Windows Internet Explorer		X
VERMONT		RMONT	*
DEPARTMENT OF HEALTH User: janet.fortune P	Practice: HOP Clinic-Burlington Patient: December, Molly	NT OF HEALTH	
	·		-
Actions:	Patient Summary		
Search Patient Current Patient	Patient: December, MollyDate of Birth: 1/1/2001Patient Age: 12 years 9 months and 14 daysResidence: BurlingtonPractice Name: Loom Practice		
Immunization Information for Providers Immunization Information for	Patient Diagnosis		
Families & the Public	Enter New Diagnosis		
Drograme	There are no test results for this child.		
Programs:			
Hearing 🛌			
Hearing Actions			
Newborn Hearing Screening			
Early Childhood Screening			
Diagnosis For quest	ions, or help with this application, please contact vtehdi@state.vt.us or call 1-800-537-0076		
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STEP TWO: ENTERING DIAGNOSTIC TEST RESULTS

Entering a New Diagnosis

- 1. Click on the Enter New Diagnosis tab. You will see a data entry pop up box.
- 2. Enter all testing information into the drop down boxes.
- 3. Click on the save button to save and load your testing information.
- 4. Multiple diagnostic testing results can be listed here with the most recent test on top and in date order

*Please note you will have only 24 hours in which to edit any entry, after that the fields become locked and you will have to contact a VTEHDI staff member to modify any loaded test results.

ဓ Patient Profile R6 (SPHI	NX-TEST / dbSphinx) - Winde	ows Internet Explorer		👌 Patient Profile R6 (SPH	INX-TEST / dbSphinx) - Windo	ows Internet Explorer			X
VERMONT DEPARTMENT OF HEALTH	Iı	ndividual Profile	VERMONT DEPARTMENT OF HEALTH	VERMONT DEPARTMENT OF HEALTH	Ir	ndividual Profile		VERMONT DEPARTMENT OF HEALT	
User: janet.fortune	Practice: HOP Clinic-Burlington	Patient: Decem	er, Molly Logout	User: janet.fortune	Practice: HOP Clinic-Burlington		Patient: December, Molly	Logou	t
Actions: Search Patient Current Patient Immunization Information for Providers Immunization Information for Programs: Hearing Hearing Hearing Actions Readom Hearing Screening Early Childhood Screening Diagnostis For quee	Patient Diagnosis Enter New Diagnosis There are no test resul	Practice Name: Loom Practice	2 years 9 months and 14 days	Actions: Search Palent Curret Palent Immunication Information for Profess Edit Diagnostis V Test Results and Dia Diagnostic Test Res Date: October 2013 Su No Tu We The F 6 7 d 9 10 1 3 44 15 66 12 1 20 24 22 23 24 2 27 28 29 30 34 Cancel Save	Patient Diagnosis Webpage Dialog gnosis Uits: Diagnostic Audiologist Right Ear Type: Sala Sala Sala Sala Sala Sala Sala Sal	Left Ear Degree: Diagnosis Date: Date Enrolled in EI:	Patient Age: 12 years 9 mc		
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DEPARTMENT OF HEALTH ser: janet.fortune F	Practice: HOP Clinic-Burlingtor	Individual Profil	Patient: Decembe	er, Molly	DEPARTMENT OF HEALTH		
Actions: Search Patient Current Patient	Patient: December, Molly Residence: Burlington	Pa Date of Birth: 1/1/2 Practice Name: Car		years 9 months an	d 14 days		
Immunization Information for Providers	Patient Diagnosis						
Immunization Information for Families & the Public	Enter New Diagnosis						
Programs:	Test Results and Diagno Diagnostic Test Results Date: 11/20/2007 Right Ear Degree: Normal		Left Ear Degree:	Left Ear Type:			
Hearing Actions Newborn Hearing Screening Early Childhood Screening	Diagnostic Results / Ou Results: Normal hearing bilateral	utcomes:	Diagnosis Date:]			
Diagnosis	Referred to EI?:	Enrolled in EI?:	Date Enrolled in EI:				
	Edit						
	Test Results and Diagno Diagnostic Test Results						
	Date:	Diagnostic Audiologist: Diagnosticaudiologi 👻					
	Right Ear Degree:	Right Ear Type: Sensori-neural	Left Ear Degree:	Left Ear Type: Sensori-neural	*		
	Diagnostic Results / Ou		borderinie	Denson neuron			
	Results:		Diagnosis Date:	7			
	Hearing Loss Undetermi		10/15/2006				
	Referred to EI?:	Enrolled in EI?:	Date Enrolled in EI:				
	Edit		,				
	tions, or help with this appli						



DEPARTMENT OF HEALTH

High risk factors for late on-set hearing loss Recommended Hearing Screening Schedule Birth thru 5 years FOR PROVIDERS ONLY

RISK FACTOR	REPEAT HEARING SCREENING
Family history of <u>permanent</u> hearing loss from birth or starting in childhood; this does <i>not</i> include hearing loss due to old age, injury, noise exposure, or ear infections	6 months, 1 year, yearly
Infections in the mother during pregnancy or delivery (i.e. Toxoplasmosis, Syphilis, HIV, Hepatitis B, Rubella, Cytomegalovirus (CMV), Herpes simplex, and others)	6 months, 1 year, yearly
Problems of the head, face, ears, or neck (such as: cleft lip or palate; abnormal shaped head, neck, or ear)	3 months, 6 months, 1 year, yearly 1 year & yearly for ear pits or tags
Medications given to baby at birth (i.e. ampicillin, gentamicin, vancomycin, loop diuretics; lasix)	1 year (sooner follow-up may be recommended if medications were continued after hospital discharge); yearly
Syndromes that include hearing loss (i.e. Down Syndrome, Usher's Syndrome, neurofibromatosis type 2, Waardenburg Syndrome, Alport Syndrome)	3 months, 6 months, 1 year, yearly
Neonatal Intensive Care Unit (NICU) admission > 4 hours	1 year, yearly
Prematurity (< 37 weeks gestation)	1 year, yearly
Jaundice (after therapy/treatment is complete; even if baby passed previously)	1 year, yearly
Parental concern of changes in hearing	Immediate

Questions:

Vermont Early Hearing Detection and Intervention program (VTEHDI) 1-800-537-0076 or <u>VTEHDI@vermont.gov</u> Updated 7.2013

HOW DO I LOG OUT?

Click on *Logout* in the upper right corner of the screen.

WHAT IF I NEED MORE HELP?

Email the VTEHDI Team anytime at <u>vtehdi@vermont.gov</u> or call 1-800-537-0076 or for local calls 1-802-651-1872.

TROUBLESHOOTING:

If you have forgotten your password -

 Use Password Central for automatic password reset! Simply click on the link for directions, password reset, etc. <u>https://apps.health.vermont.gov/aims/PS/Default.aspx</u>

If you receive a message saying Internet Explorer v5.0 or higher is the only supported browser for the Vermont Immunization Registry –

• Open Internet Explorer or Firefox as your browser and try logging in again. Some computers have another browser, like Safari or Chrome, set up to open by default.

If you find more than one record for a patient --

- Please call VTEHDI at 1-800-537-0076 or for local calls 1-802-651-1872.
- Enter information into either record VTEHDI will merge them together.

If you log in and you do not have access to data enter hearing screening information

- You may not have editing permissions.
- If you feel you should have editing permissions please contact VTEHDI at 1-800-537-0076 or for local calls 1-802-651-1872.

If you try to login but when you click <u>OK</u> with your username and password, the whole page disappears --

- You most likely have a pop-up blocker in place. Open Internet Explorer. Go to tools → pop-up blocker → pop-up blocker settings. Add our program address: <u>https://webmail.state.vt.us/imr3</u>
- Or, call VTEHDI toll free for help at 1-800-537-0076 or for local calls 1-802-651-1872.

If the window asking for your username and password keeps coming back even though you have double checked that you are entering it correctly --

- If a user name or password is entered incorrectly 3 times the account will lock up. You will not be allowed to login even if you enter the correct information. We recommend waiting for 15-20 minutes and then trying again with the correct password.
- If you are unsure of the correct password or it still does not work please Use Password Central for automatic password reset! Simply click on the link for directions, password reset, etc. <u>https://apps.health.vermont.gov/aims/PS/Default.aspx</u>