



Maryland Department of Health
Vital Statistics Administration

Maryland Electronic Death Registration Medical Certifier Training Guide

Version 7.0

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Getting Started with MD-EDRS

MD-EDRS functions similarly to typical online web applications. To use MD-EDRS, you will need:

- Internet connectivity
- A web browser (Mozilla Firefox is the recommended web browser)
- Adobe reader (which may be downloaded at no charge from <http://www.adobe.com>)
- A laser printer
- A scanner (certain users only).

You will also need to configure your web browser to enable:

- Pop-ups; and
- JavaScript©

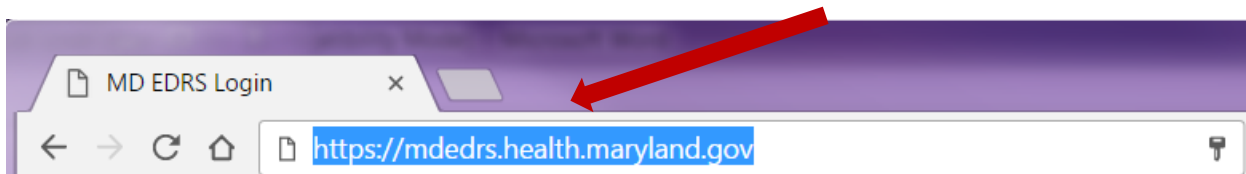
Configuring your website to allow for pop-ups will depend on which web browser you are using. If you are not able to see or print certificates after following the instructions, you should check whether your web browser is allowing pop-ups.



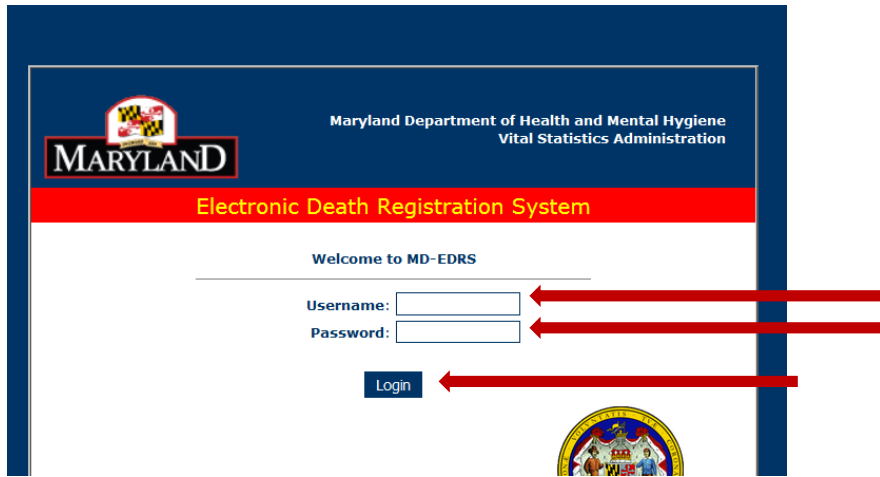
For information on enabling JavaScript© please go to <http://www.activatejavascript.org> for step-by-step instructions.

Logging onto MD-EDRS

1. To get started with the EDRS system, you will need to open your web browser and key in the following URL address: <https://mdedrs.health.maryland.gov>



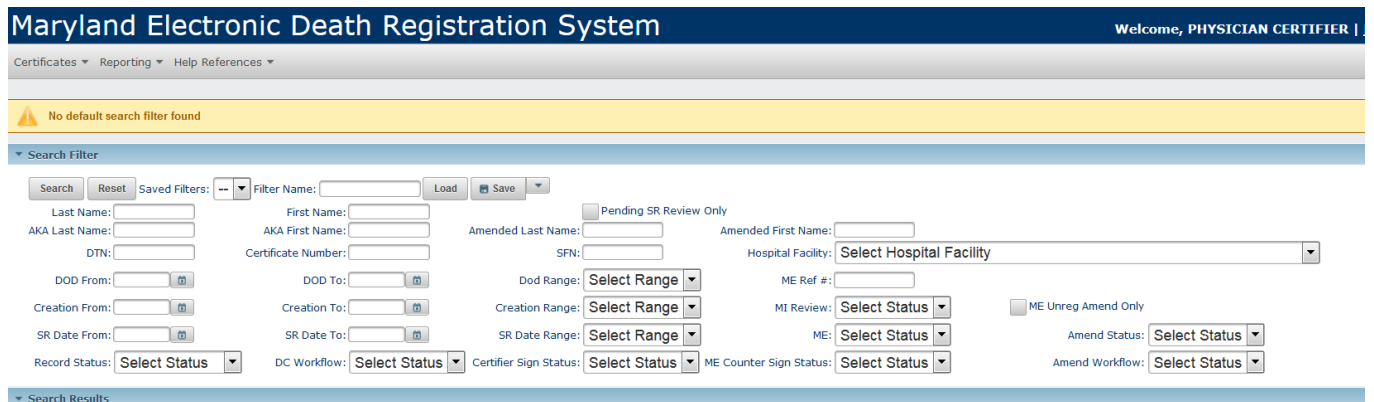
2. Enter the username and password which has been assigned to you by the MD-EDRS Medical Facility Administrator. Then click “Login.”



**NOTE: First time users will be prompted to change the password that was assigned. If prompted by your browser to save your password, please click “NO”.

Please make a note of your username and password and store the information in a secure location. **After 3 unsuccessful login attempts, click on “Forgot password” and a link to reset your password will be sent to your email address of record.** If you have more than 3 unsuccessful login attempts you will be locked out of the system and will need to contact your EDRS Medical Facility Administrator or the Help Desk to have your password reset.

Once you are logged in, the screen below will appear:



Editing Your User Profile

1. Users may edit their personal contact information at any time by selecting 'Profile' at the top of the menu bar.



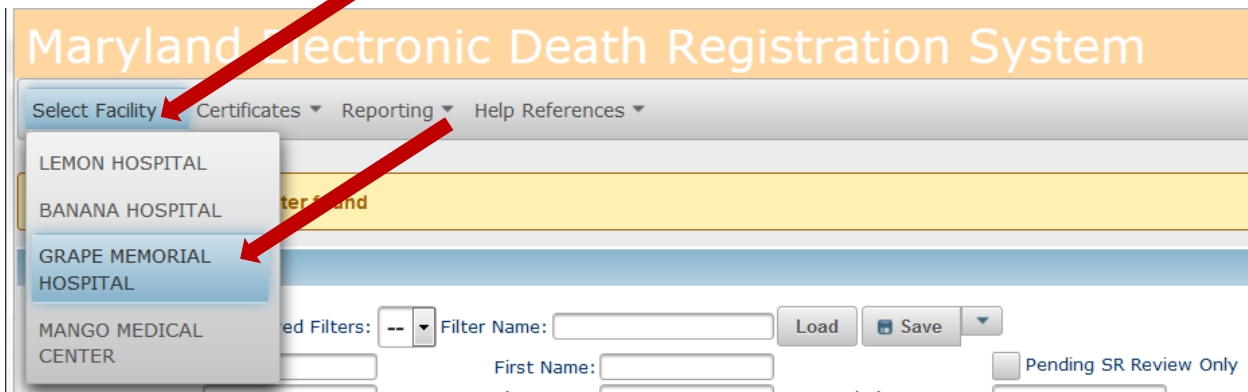
1. At the 'Update Personal Profile' window, users may update their password, contact information, or primary medical facility, if applicable. Users working at multiple facilities can change their primary organization by clicking on the down arrow at the right of the organization field and selecting the appropriate facility:

*Information that appears in the Personal Details section can only be changed by a Medical Facility Administrator. If any information is updated, users **must** change their password.

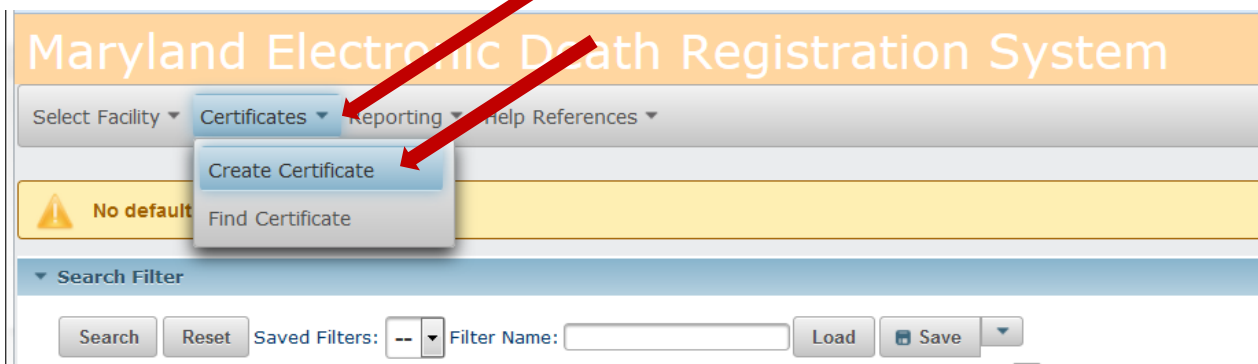
3. Next, click on 'Save' and then on 'Return to Certificate Browser' to go back to the search screen.

Creating a New Record - Users Working at Multiple Medical Facilities

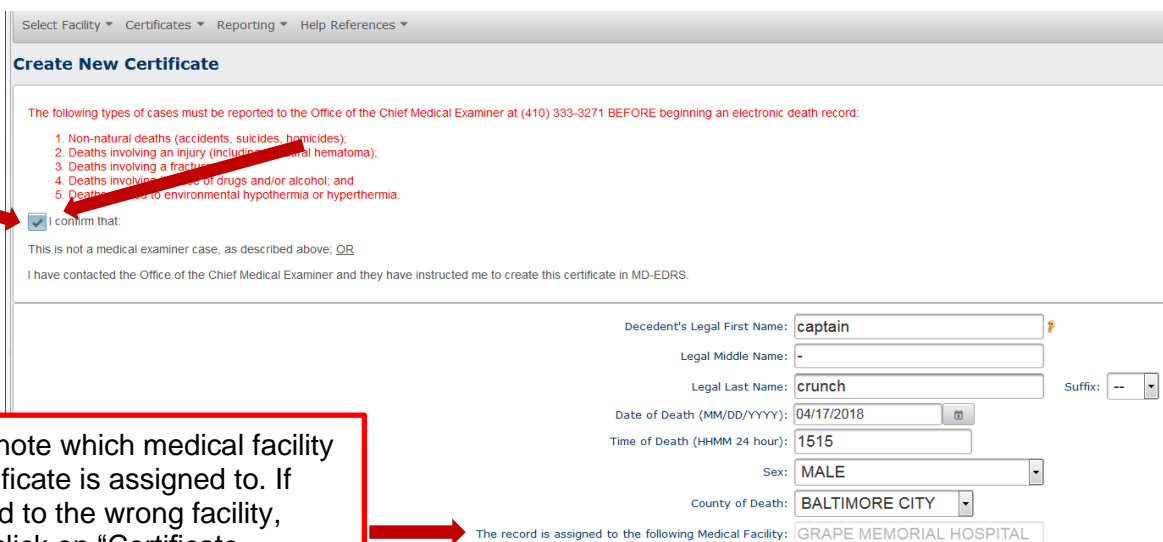
1. Once logged in, click on the Select Facility tab and then select the appropriate facility



2. Click on the Certificates tab and then “Create Certificate”:

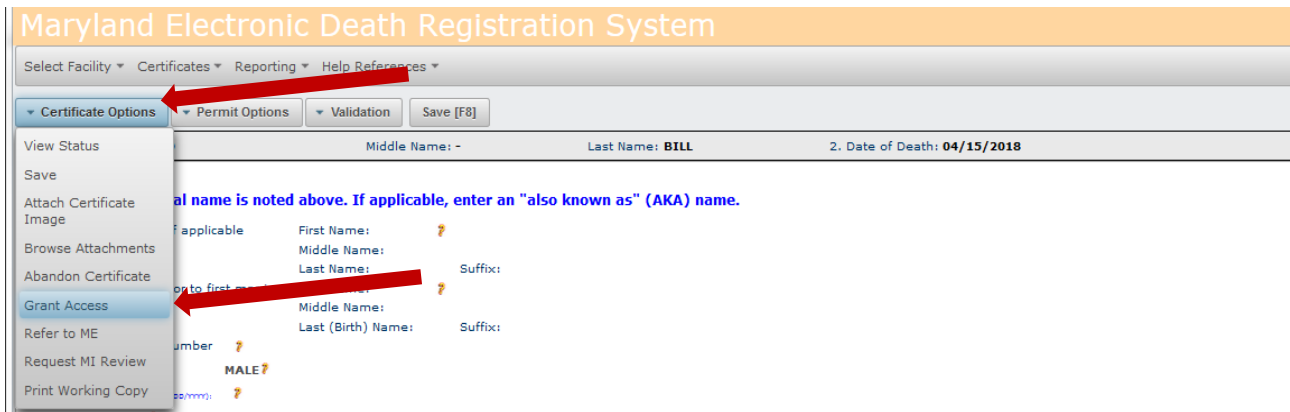


3. Confirm that the death is not a Medical Examiner case or that you have contacted the Office of the Chief Medical Examiner and have been instructed to create the certificate in MD-EDRS. Enter the decedent’s information and click “Continue.”

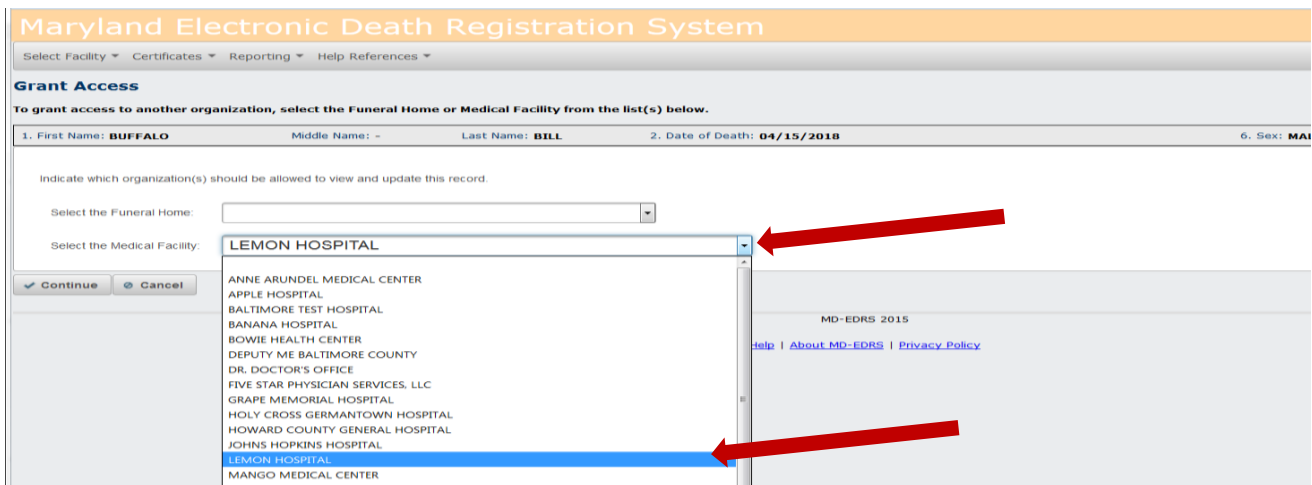


Please note which medical facility the certificate is assigned to. If assigned to the wrong facility, please click on “Certificate Options” and then “Grant Access”

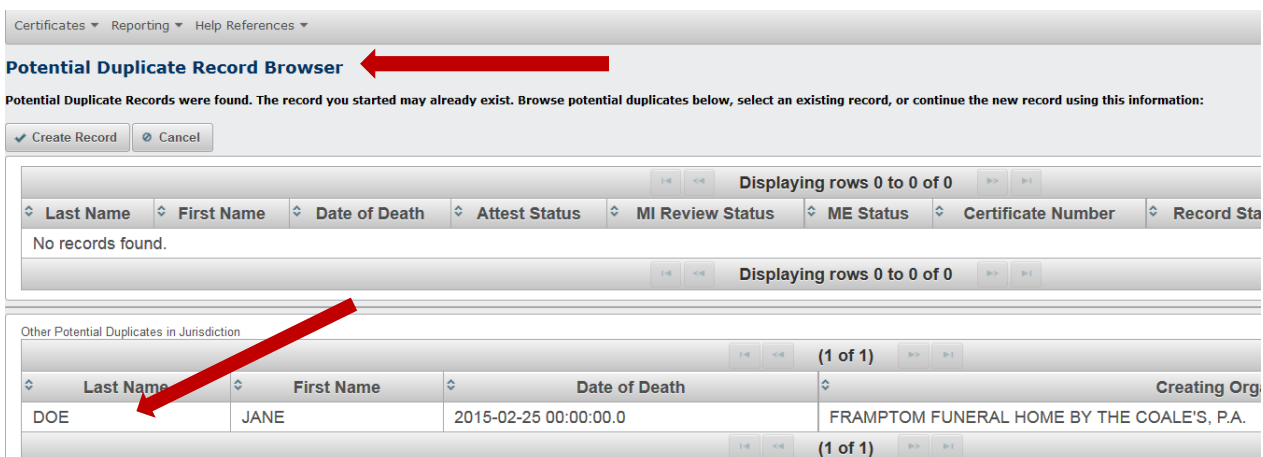
4. To grant access to another medical facility, click on “Certificate Options” and then “Grant Access”.



Under the Medical Facility drop down list, select the correct medical facility and click on “Continue”.

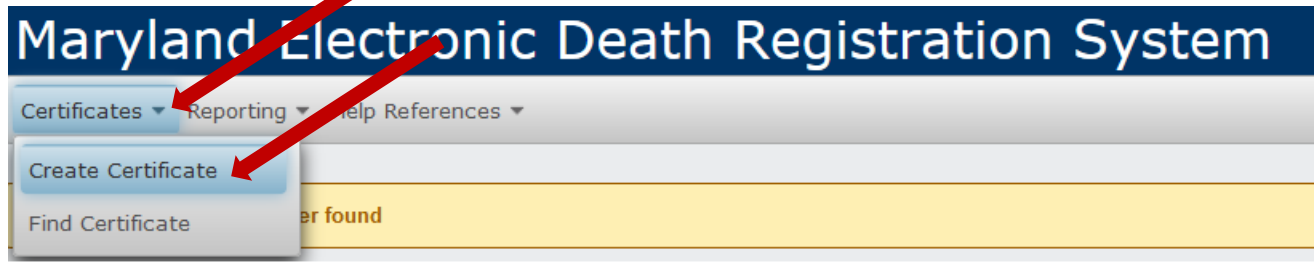


****NOTE:** If there are any records that have been started by other users for the same decedent in the system, they will show up in the “Potential Duplicate Record Browser”. If you find a match, click on the decedent’s last name and complete the Medical Information section of the record.

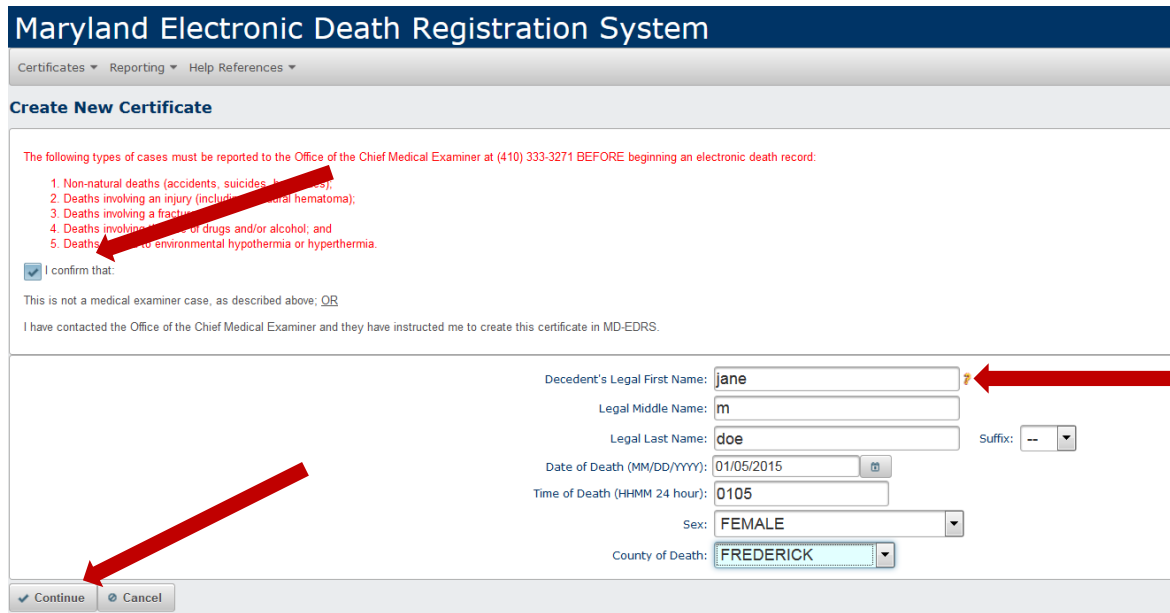


Creating a New Record - Users Working at a Single Medical Facility

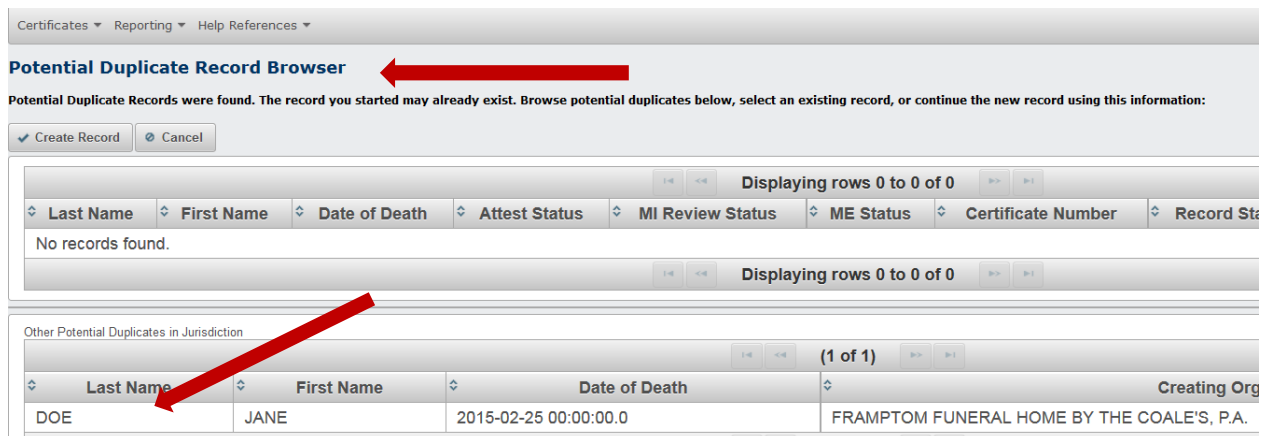
1. Once logged in, click on the Certificate tab and then “Create Certificate”:



2. Confirm that the death is not a Medical Examiner case or that you have contacted the Office of the Chief Medical Examiner and have been instructed to create the certificate in MD-EDRS. Enter the decedent’s information and click “Continue.”



****NOTE:** Any records that have been started by other users for the same decedent in the system will show up in the “Potential Duplicate Record Browser”. If you find a match, click on the decedent’s last name and complete the Medical Information section of the record



Entering the Medical Information

1. Once the following screen appears, Click on the Medical Information tab on the bottom of the page.

The screenshot shows the 'Maryland Electronic Death Registration System' interface. At the top, there are navigation menus for 'Certificates', 'Reporting', and 'Help References'. Below these are tabs for 'Certificate Options', 'Permit Options', 'Validation', and a 'Save [F8]' button. The header displays '1. First Name: JANE', 'Middle Name: M', 'Last Name: DOE', and '2. Date of Death: 01/05/2015'. A blue instruction box states: 'The decedent's legal name is noted above. If applicable, enter an "also known as" (AKA) name.' The form contains fields for: 1. Decedents AKA if applicable (First, Middle, Last Name, Suffix); 5. Social Security Number; 6. Sex: FEMALE; 8. Date of Birth; 7. Age Type; 9. Place of Birth, Address Type: US STATE, State; 10a. Usual Residence of Decedent, Address Type: US STATE, State; 10b. County; 10c. City, Town, or Location; 10d. Inside City Limits; 10e. Street Number, Street Name, Apt/Suite/Unit; 10f. Zip Code; 11. Marital Status; 12. Was Decedent Ever in U.S. Armed Forces; 13. Was Decedent of Hispanic Origin; 14. Race (with a list of options including White, Black or African American, American Indian / Alaska Native, Filipino, Japanese, Korean, Vietnamese, Other Asian, Native Hawaiian, Guamanian or Chamorro, Samoan, Other Pacific Islander, Other); 15. Decedent's Education; 16a. Decedent's Usual Occupation (Give kind of work done during most of working life, DO NOT use retired). At the bottom, there are four tabs: 'Personal Information', 'Medical Information', 'Funeral Director', and 'Certificate View'. A red arrow points from the 'Medical Information' tab towards the 'Race' field.

2. The following screen will appear. You should complete the items on this page as you currently do on the triplicate paper copy of the Death Certificate.

The screenshot shows the 'Maryland Electronic Death Registration System' interface with the 'Medical Information' tab selected. The header displays 'Welcome, LETA WATSON | Profile | Log Out'. The navigation menus are the same as in the previous screenshot. The header displays '1. First Name: ROGER', 'Middle Name: RURURU', 'Last Name: RURURU', '2. Date of Death: 08/06/2020', '6. Sex: MALE', 'Certifier Sign Status: UN ATT', 'PH Transfer: NOT TRANS', 'Certificate: 2220', 'Record Status: INC', and 'Amend Status: C'. The form contains fields for: 1. Decedent's Legal (First Name: ROGER, Middle Name: -, Last Name: RURURU, Suffix: --); 2. Date of Death (MM/DD/YYYY): 08/06/2020; 3. Time of Death: 1456; 8. Date of Birth; 7. Age Type; 4c. County of Death: BALTIMORE CITY; 26. Place of Death; Medical Facility; 4a. Facility Name (if not an institution, enter the street number and name below); Street Number, Street Name, Apt/Suite/Unit; 4b. City or Town; Zip Code; 23a. Part I: ***REPORTING COVID-19: ENTER 'COVID-19' FOR CONFIRMED CASES OR 'PROBABLE COVID-19' IF AWAITING TEST RESULTS***. Enter the chain of events - disease, injuries, or complications - that directly caused the death, DO NOT enter terminal events (mode of dying), such as cardiac arrest, respiratory arrest, or ventricular fibrillation, without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary. Immediate Cause (Final disease or condition resulting in death) a. Due to (or as a consequence of); b. Due to (or as a consequence of); Approximate Interval Between Onset and Death. At the bottom, there are four tabs: 'Personal Information', 'Medical Information', 'Funeral Director', and 'Certificate View'. Below the tabs, there are two document icons for 'Medical Certifier Tr...docx' with 'Open file' links and a 'Show all' button.

****NOTE:** Any records that have been started by other users for the same decedent in the system will show up in the "Potential Duplicate Record Browser". If you find a match, click on the decedent's last name and complete the Medical Information section of the record

The decedent's date of birth field is located in the 'Medical Information' tab. If the date of birth is known and the decedent is 1 year old or older, simply enter the date. It is not necessary to select the age type since the age in years will auto-calculate upon saving.


2. Date of Death (MM/DD/YYYY): 08/06/2020 ?
3. Time of Death: 1456 ?
8. Date of Birth:(MM/DD/YYYY): 08/05/1980 [calendar icon] ? ←

If the decedent's date of birth is not known, simply enter UNK in the date of birth field and select UNKNOWN as the age type from the drop-down list.

2. Date of Death (MM/DD/YYYY): 08/06/2020 ?
3. Time of Death: 1456 ?
8. Date of Birth:(MM/DD/YYYY): UNK [calendar icon] ? ←
7. Age Type: UNKNOWN ▾ ? ←

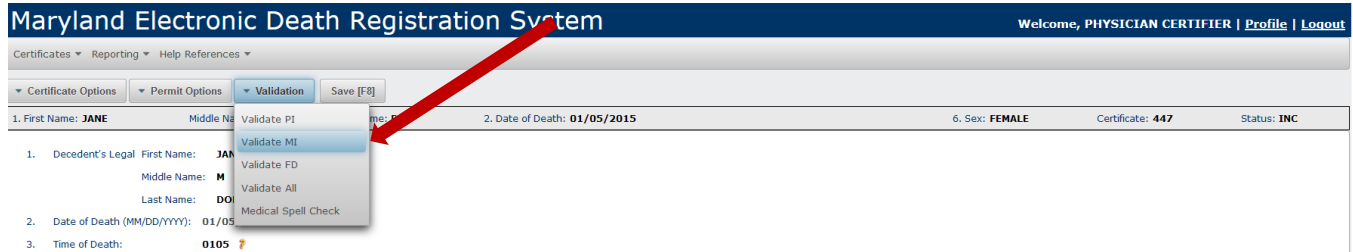
If the decedent is under one year of age, enter the date of birth and select the age type (months, days, hours or minutes) from the drop-down list.

****PLEASE NOTE****

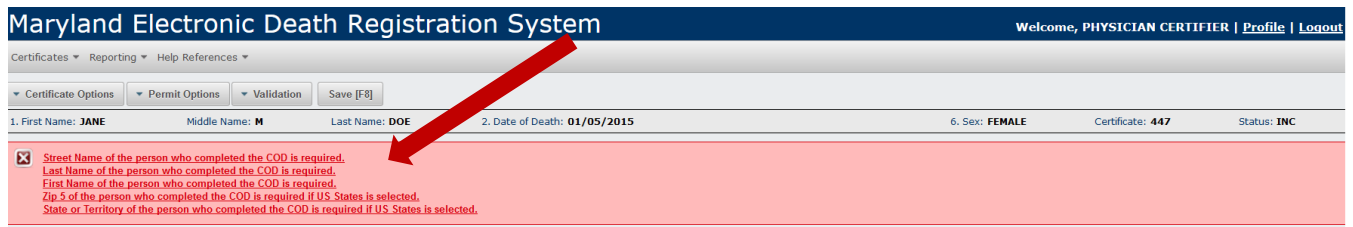
- A number of fields on the page will auto-populate.
- If Place of Death is inpatient, ER/Outpatient, DOA, Hospice, or Nursing home/long term care facility, items 4a and 4b will be automatically populated. Items 4a and 4b are only completed if place of death is “Decedent’s Home” or “Other.”
- If the Manner of Death is “Natural,” items 28a-28g should be skipped.
- Clicking on the  next to each item will provide explanatory information on completing the item.
- “Approximate interval between onset and death” and “Contributing Causes” are both required fields. If you have no information to report, or the information is unknown, enter a hyphen (-) or UNK.

Validating the Medical Information

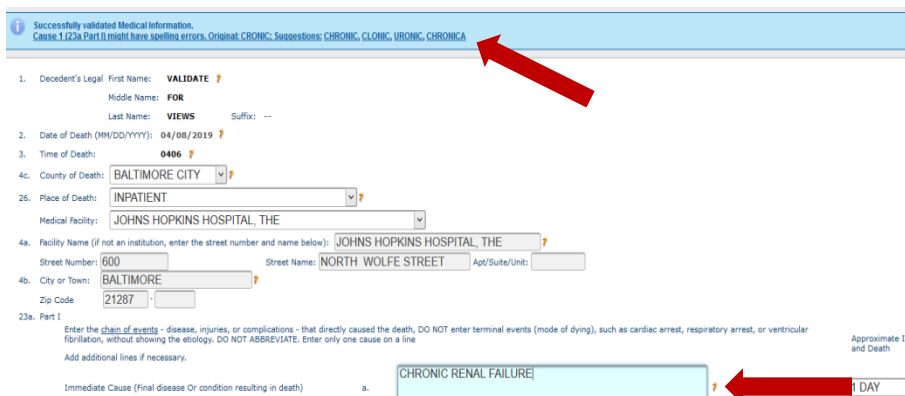
1. After the information on the Medical Information tab has been entered, click on the Validation tab near the top of the screen and then on “Validate MI” to check for any errors. It may take a moment for the information to be validated.



2. If any errors are identified, they will be listed on the screen and should be corrected in order to proceed.



3. The VIEWS II functionality: enables improved cause of death data validations during data entry. If there are any VIEWS II suggestions for corrections, they will appear in the blue bar. If applicable, click on the suggested correction and the system will automatically update the information.



4. If the VIEWS II suggestions are not applicable and the record is ready to be attested, select 'Certificate Options' and then Attest Certifier. As a data entry verification measure, the system will automatically run the VIEWS II suggestion(s) a second time. In order to proceed with attesting the record without updating the record, select 'Save and Attest'

The screenshot shows the 'Save and Attest' button highlighted with a red arrow. The form displays the following information:

- 1. Decedent's Legal First Name: CHECK ?
- Middle Name: FOR
- Last Name: NONVIEWS Suffix: --
- 2. Date of Death (MM/DD/YYYY): 04/15/2019 ?
- 3. Time of Death: 0000 ?
- 4c. County of Death: BALTIMORE CITY ?
- 26. Place of Death: INPATIENT ?
- Medical Facility: JOHNS HOPKINS HOSPITAL, THE ?
- 4a. Facility Name (if not an institution, enter the street number and name below): JOHNS HOPKINS HOSPITAL, THE ?
- Street Number: 600 Street Name: NORTH WOLFE STREET Apt/Suite/Unit:

5. When the information has been validated, a message indicating "Successfully Validated Medical Information" will appear. Click the Save[F8] tab to save the record.

The screenshot shows the 'Save [F8]' button highlighted with a red arrow. A message box at the top states: "Successfully validated Medical Information." The form displays the following information:

- 1. Decedent's Legal First Name: JANE ?
- Middle Name: M
- Last Name: DOE Suffix: --
- 2. Date of Death: 01/05/2015
- 6. Sex: FEMALE Certificate: 447 Status: INC

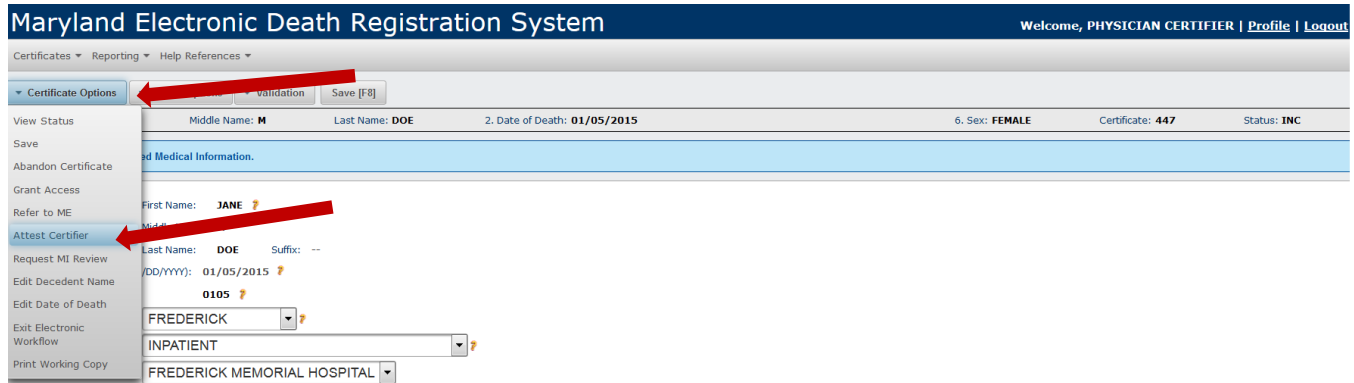
6. The certificate should be reviewed thoroughly for errors before it is attested. To review the certificate's content, click on the Certificate View tab located at the bottom of the screen. This step can be completed at any time.

The screenshot shows the 'Certificate View' tab highlighted with a red arrow. The form is titled "Certificate of Death" and contains the following information:

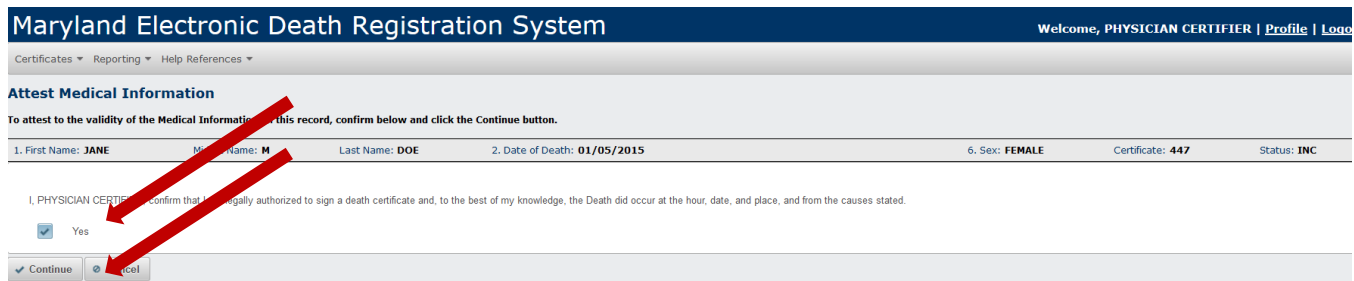
- 1. Decedent's Name, AKA Name (if any): JANE M DOE
- 2. Date of Death: 01/05/2015
- 3. Time of Death: 0105
- 4. Facility Name: FREDERICK MEMORIAL HOSPITAL
- 4b. City, Town or Location of Death: FREDERICK
- 4c. County of Death: FREDERICK
- 5. Social Security Number
- 6. Sex: F
- 7. Age
- 8. Date of Birth
- 9. Birthplace
- 10a. Address
- 10b. City, Town or Location
- 10c. Inside City Limits?
- 10d. Zip Code
- 11. Marital Status
- 12. Ever in U.S. Armed Forces?
- 13. Hispanic Origin?
- 14. Race
- 15. Decedent's Education
- 16a. Decedent's Usual Occupation
- 16b. Business/Industry
- 17. Father's Name
- 18. Mother's Name Prior to First Marriage
- 19. Surviving Spouse's Name
- 20a. Informant's Name
- 20b. Informant's Relationship
- 20c. Informant's Mailing Address
- 21a. Method of Disposition
- 21b. Place of Disposition
- 21c. Date of Disposition
- 21d. Location
- 22a. Signature of Funeral Service Licensee
- 22b. License No
- 22c. Name and Address of Funeral Facility
- 23a. Part I. Disease, injuries, or complications that directly caused the death: CAUSE
- Immediate Cause (final disease or condition resulting in death): Due to (or as a consequence of)
- Conditions, if any, leading to immediate cause: Due to (or as a consequence of)

Attesting of the Certificate

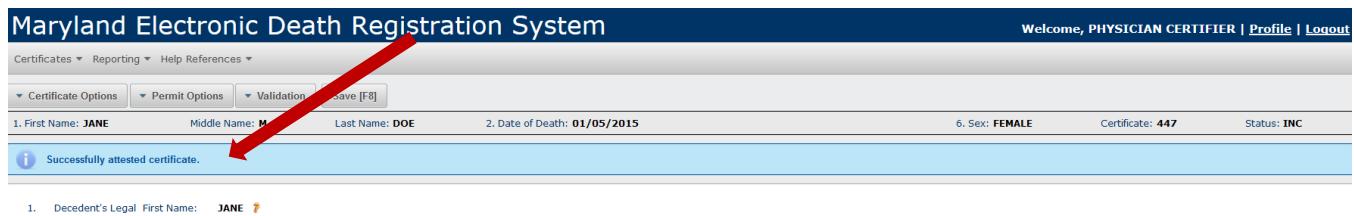
1. If the Medical Certifier (physician, certified nurse practitioner, physician assistant) has personally entered the Medical Information, he or she may immediately certify the information by clicking on the Certificate Options tab and then on “Attest Certifier.”



2. When the following page appears, the Medical Certifier should check “Yes” and then “Continue.”



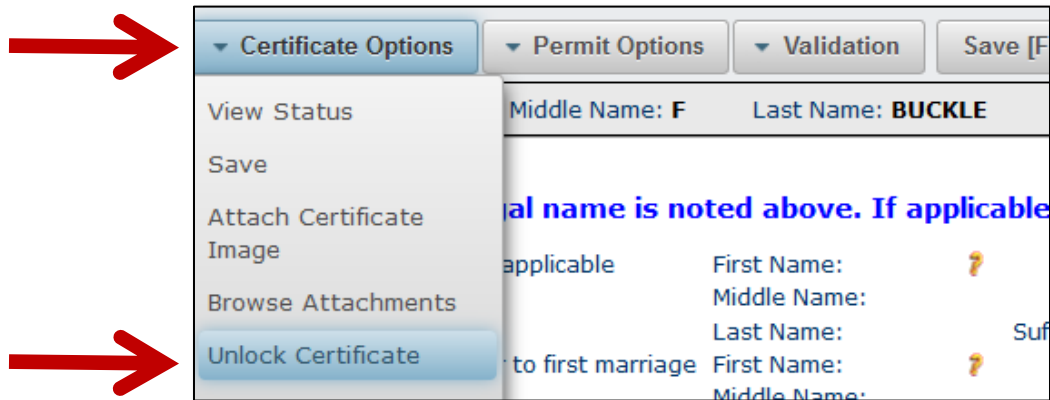
A message will appear indicating that the certificate was successfully attested. The record is **now signed and locked.**



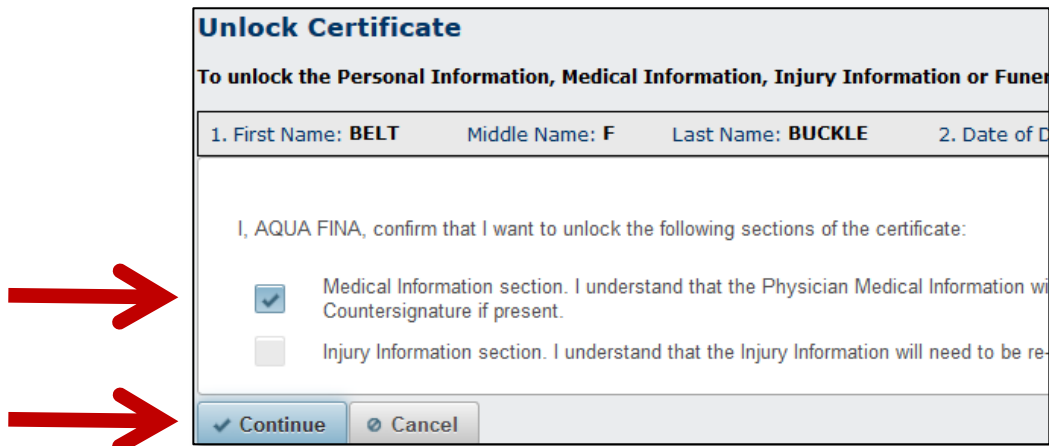
If the Medical Information was completed by a hospital/facility staff member who is NOT the Medical Certifier, the record should be saved, and the Medical Certifier must log onto the system **USING HIS OR HER OWN LOGON AND PASSWORD**, locate the record, and personally attest to the information on the certificate.

Unlocking an Attested Certificate

1. A medical certifier can unlock the medical section of a record that has been attested **but not yet registered** by going to Certificate Options and selecting “Unlock Certificate.”



2. At the pop-up window, check the first box to unlock the Medical Information section and then click on ‘Continue.’



3. After successfully unlocking the Medical Information Section, the following message will appear and the medical information can be edited



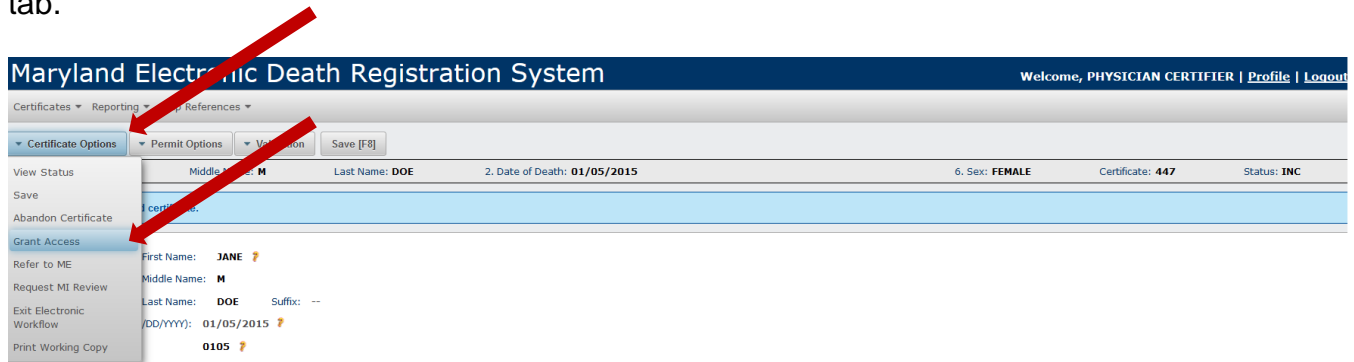
4. Once the information has been updated, the record **must be attested again.**

Transferring the Certificate to the Funeral Home

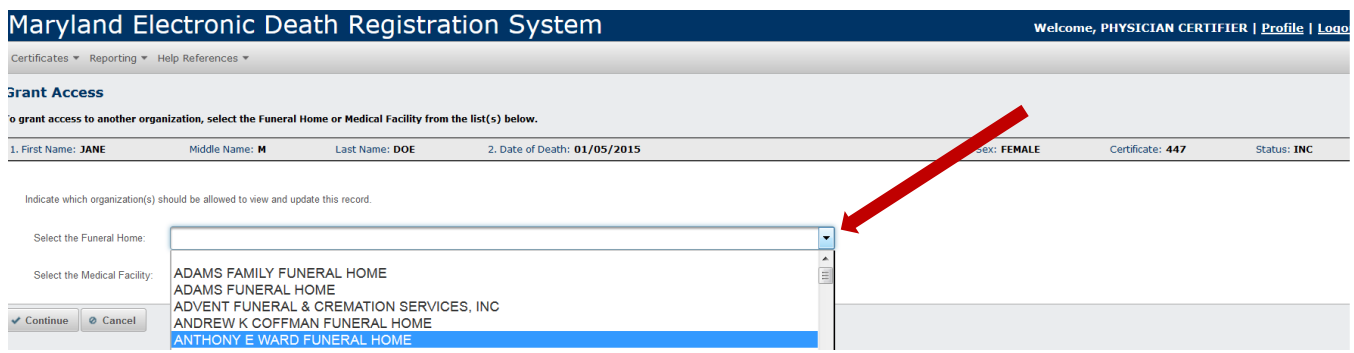
Transferring an electronic record can be done at various stages:

- The Medical Certifier and/or staff may transfer a record to a funeral home any time after the record is first created.
- It is not necessary to wait until the Medical Certifier has signed the record to make the transfer.
- The Medical Certifier and the Funeral Director may work on the record concurrently.
- The Medical Certifier and/or his or her staff may also transfer the record after it is signed by the Medical Certifier.

1. To transfer a record to a funeral home, select “Grant Access” from the Certificate Options tab.



If the funeral home is registered with MD-EDRS, the name will appear on the drop-down menu. If the name of the funeral home does not appear, please contact the help desk at EDRS.help@maryland.gov.



2. Select the funeral home and then click “Continue.”

Maryland Electronic Death Registration System Welcome, PHYSICIAN CERTIFIER | [Profile](#) | [Logout](#)

Certificates ▾ Reporting ▾ Help References ▾

Grant Access

To grant access to another organization, select the Funeral Home or Medical Facility from the list(s) below.

1. First Name: **JANE** Middle Name: **M** Last Name: **DOE** 2. Date of Death: **01/05/2015** 6. Sex: **FEMALE** Certificate: **447** Status: **INC**

Indicate which organization(s) should be allowed to view and update this record.

Select the Funeral Home:

Select the Medical Facility:

- ADAMS FAMILY FUNERAL HOME
- ADAMS FUNERAL HOME
- ADVENT FUNERAL & CREMATION SERVICES, INC
- ANDREW K COFFMAN FUNERAL HOME
- ANTHONY E WARD FUNERAL HOME**

3. You should receive a message that the record has been successfully transferred. The funeral home will now be able to access and complete the record.

Maryland Electronic Death Registration System Welcome, PHYSICIAN CERTIFIER | [Profile](#) | [Logout](#)

Certificates ▾ Reporting ▾ Help References ▾

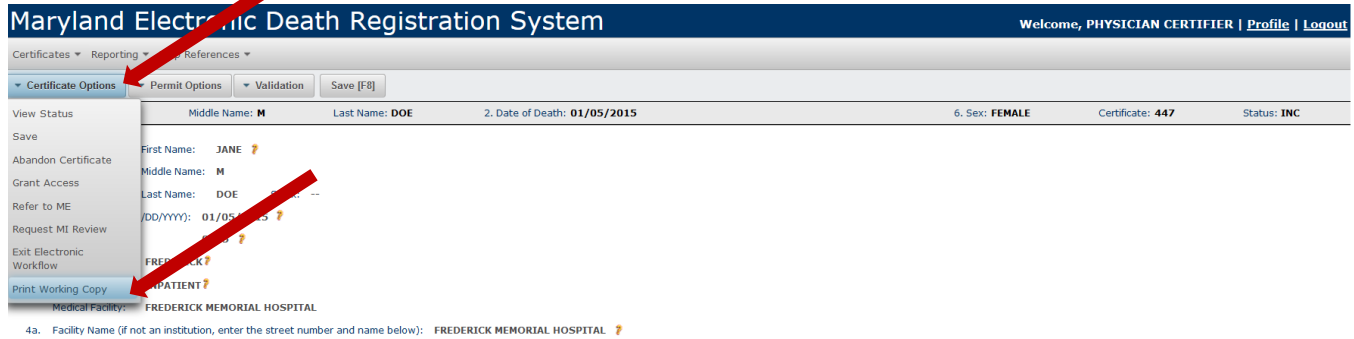
▾ Certificate Options ▾ Permit Options ▾ Validation [Search]

1. First Name: **JANE** Middle Name: **M** Last Name: **DOE** 2. Date of Death: **01/05/2015** 6. Sex: **FEMALE** Certificate: **447** Status: **INC**

Successfully transferred certificate.

Printing a Working Copy of the Certificate

1. A printed “Working Copy” of the record should accompany the remains when transported to the funeral home. To print a Working Copy of the record, click on the Certificate Options tab and select “Print Working Copy.”



The following Working Copy of the Certificate of Death will appear. It will include all of the information that has been added to the record at the time the copy is printed, and can be printed at any time.

Page: 1 of 1 Automatic Zoom

Printed on 09/15/2015 15:29:16		Certificate of Death		Printed By CERTIFIER, PHYSICIAN (PHYSICIAN)	
1. Decedent's Name, AKA Name (if any) JANE M DOE		2. Date of Death 01/05/2015		3. Time of Death 0105	
4a. Facility Name FREDERICK MEMORIAL HOSPITAL		4b. City, Town or Location of Death FREDERICK		4c. County of Death FREDERICK	
5. Social Security Number	6. Sex F	7. Age	8. Date of Birth	9. Birthplace	
10a. State	10b. County	10c. City, Town or Location		10d. Inside City Limits?	
10e. Address				10f. Zip Code	
11. Marital Status	12. Ever in U.S. Armed Forces?	13. Hispanic Origin?	14. Race		
15. Decedent's Education		16a. Decedent's Usual Occupation		16b. Business/Industry	
17. Father's Name			18. Mother's Name Prior to First Marriage		
19. Surviving Spouse's Name					
20a. Informant's Name		20b. Informant's		20c. Informant's Mailing Address	

The Working Copy should accompany the remains when the deceased is transported to the funeral home.

****NOTE:** Printing the Working Copy on legal sized paper (8 ½ x 14) will make the certificate easier to view, although letter sized paper (8 ½ x 11) may also be used. Remember to enable pop-ups on your web browser in order to view and print the Working Copy.

Referring a Case to the Medical Examiner

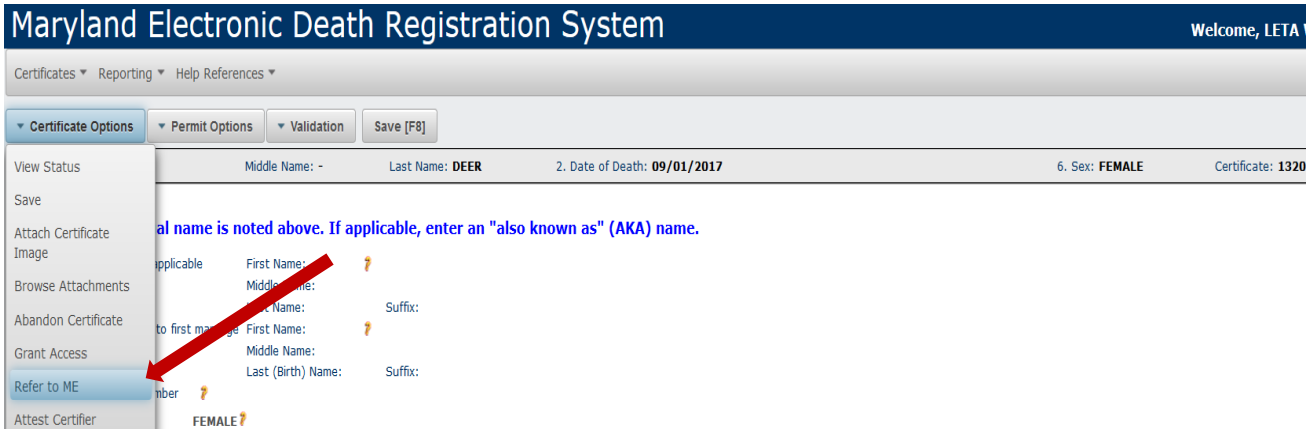
The following conditions and types of deaths might seem to be specific or natural, but when the medical history is examined further it may found to be from complications of an injury or poisoning (possibly occurring long ago). Such cases should be reported to the medical examiner/coroner.

- Asphyxia
- Epidural hematoma
- Bolus
- Exsanguination
- Choking
- Fall
- Drug or alcohol overdose/drug or alcohol abuse
- Fracture
- Hip fracture
- Pulmonary emboli
- Subdural hematoma
- Hyperthermia
- Seizure disorder
- Surgery
- Hypothermia
- Sepsis
- Thermal burns/chemical burns
- Open reduction of fracture
- Subarachnoid hemorrhage

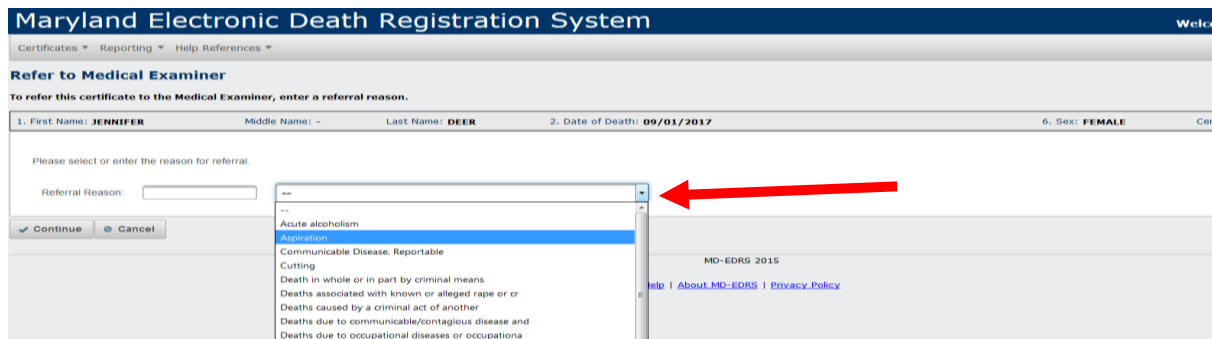
2. In order to refer the record to the ME, click on “Certificate Options”



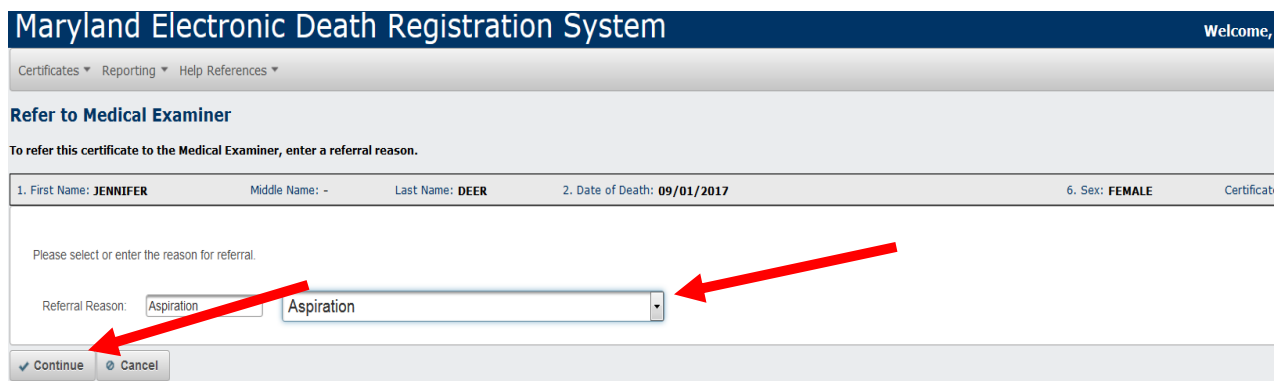
2. Click on “Refer to ME”



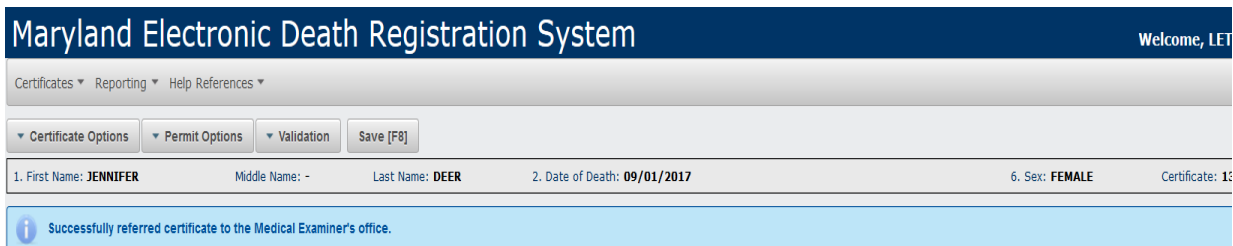
3. Select the reason for referral in the drop down list



4. Once the referral reason has been selected from the drop down menu, the referral reason will pre-populate in the first field. Click on the “Continue” button.



You will see “Successfully referred certificate to the Medical Examiner’s Office”



MD-EDRS Help Desk Information

MD-EDRS technical support is available by email: Email questions to edrs.help@maryland.gov

E-mails received between 8 am - 4 pm, Monday through Friday will be responded to within one hour. E-mails received between 7 am - 7 pm on weekends and holidays will be responded to within four hours. Any e-mails received after these times, will be responded to the following day.