



OFFICE OF VITAL RECORDS

VITAL RECORDS INFORMATION SYSTEM MANAGEMENT

Electronic Birth Registration System (EBRS) Manual

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Introduction

VRISM is an acronym for Vital Records Information System Management. This system allows electronic registration and issuance of birth, death, marriage, and divorce certificates, as well as reports of fetal death, to be registered and issued electronically across the state of Tennessee. In this training, you will learn about registering birth certificates.

The issuance module was launched in 2013 and was successfully adopted by all Tennessee health departments, allowing for certificates to be available for issue in a timelier manner. VRISM gives local health departments the ability to issue birth and death certificates throughout the state, regardless of the county of occurrence.

The fields and data rules for this system comply with both state and federal guidelines.

Statistical Elements

The Certificate of Live Birth and Report of Fetal Death provide medical and health information that is used extensively in research, planning and evaluating programs related to maternal and child health. This information is also used to estimate population growth, which is vital for planning schools, transportation, and other government agencies.

Local, state, and national vital statistics are compiled on the number and rate of births by characteristics such as place of birth, mother's age and background, prenatal care, birthweight, conditions of the labor and the baby's first health assessments. **Complete and accurate registration is an essential service to the individual named on the record, the community, and the State.**

Users are required to enter these essential statistical items on tabs 1-12. If you have any questions about how to complete any of these items, please refer to the *Guide to Completing Birth and Fetal Death Reports* available at:

<https://www.cdc.gov/nchs/data/dvs/GuidetoCompleteFacilityWks.pdf>

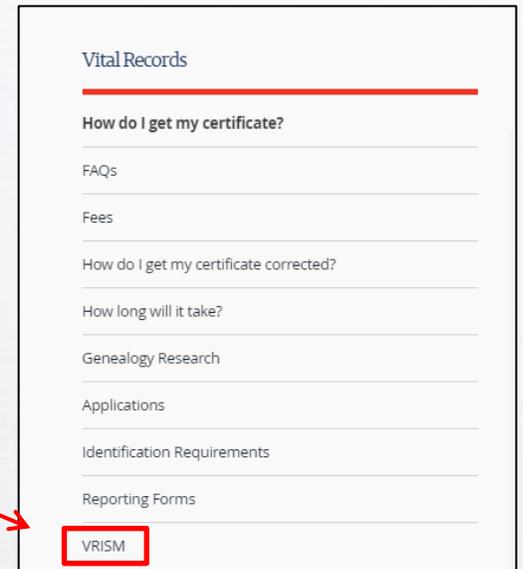
How to Register for VRISM

In order to register to use the VRISM system, please submit a VRISM User Access Request and Agreement form.



This can be found by visiting the Tennessee Department of Health website (<https://www.tn.gov/health.html>) and clicking "Birth, Death, Marriage, and Divorce Certificates."

Then click "VRISM" under the *Vital Records* heading



[Click here to register for VRISM](#)

The Tennessee Department of Health has undertaken a project to upgrade the system our state uses to maintain death, birth, marriage, and divorce records. The project, Vital Records Information System Management (VRISM), will result in a user-friendly system that allows for electronic communication between the Tennessee Office of Vital Records and those partners who help to register vital events that occur in Tennessee. The new system is a web-based, electronic system and will replace the predominantly manual, paper-based process currently in use.

Lastly, click the "Click here to register for VRISM" button and complete the registration form.

You can also follow this link:

<https://apps.health.tn.gov/VRISMUserAgreement/UserAgreement/UserAgreement>

You should receive two emails: one with your username and temporary pin and another with a single-use link to activate the account and set up your security information. Please refrain from clicking the link until you have received your username and temporary pin. Additionally, please click the link only once, as it is designed for single-use.

If you submit a User Access Request and Agreement form and do not get a response within one business day, please contact the VRISM Help Desk at 855-874-7686 or at health.vrism@tn.gov.

Online Training

We offer online training for users of the VRISM system. To access our training materials, please visit the Department of Health Website (<https://www.tn.gov/health.html>) and navigate to the VRISM page, as outlined on the previous page.

Please scroll to the **Training** heading and select training for the EBRS.

How to Activate Your Account

After your user agreement has been processed, you should receive two emails: one with your username and temporary pin and another with a single-use link to activate the account and set up your security information.

Please note your temporary pin number and username, and then click the link in the email from health.vrism@tn.gov and enter the temporary pin to set up your security information.

Thank you for registering for the Electronic Death Registration System within VRISM with the Tennessee Department of Health, Office of Vital Records. Below you will find your login information.

Link to VRISM Website after setup of security information:

<https://vrism.tn.gov/vrism/go/18>

Username: NUser (Case sensitive, please use the Shift Key, not Caps Lock)

Temporary Pin: 6424

You will receive an email from VRISM with a link to click on (you will need the above Username and Temporary pin) to complete the login credentials. Please click the link one time. (Clicking the link more than once will expire the link.) Once you login you will need to change your pin, security questions, etc. You will have 7 days to click on the link to complete your login credentials.

If you have any questions or issues, **please contact the VRISM Help Desk at 1-855-874-7686.** Please keep in mind that we occasionally receive a high volume of calls, if you receive our voice mail please leave a message and we will get back with you as soon as possible.

<https://vrism.tn.gov:443/vrism2/servlet/fpw/HE9OpBa11tpyLdcr8km6Kyxo2+w>

Click on the link to verify your e-mail address. If you can not click on the link, then copy the link and paste into your browser. You will be asked to enter the PIN number provided by the System Administrator. Once your e-mail has been verified then you will be able to create a password and set other security information to access the TN VRVWeb application.

Thank you.

Tennessee Department of Health Office of Vital Records

Please click the link only once, as it is for single-use only.

If you click the link and it shows as expired, please contact the VRISM Help Desk at (855) 874-7686.

After clicking the link, you should be prompted to enter your four-digit pin number. Then, click "Continue."

Please Note
Your e-mail has been verified
Enter your Pin below. If you have forgotten the pin then please contact the System Administrator

Pin :

You will then be directed to a screen to set up your remaining security information. This process includes setting a new password, new pin, selecting three security questions and answers, and an image and key.

Please make note of your selections to ensure you have the correct information to log into the system.

Please Note
Please Update your Security Information.

* Denotes Required Field

New Password: *

Confirm New Password: *

Current Pin: *

New Pin (Last 4 digits of SSN recommended): *

Confirm New Pin: *

Security Question 1:

Security Answer 1: *

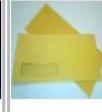
Security Question 2:

Security Answer 2: *

Security Question 3:

Security Answer 3: *

Security Image: Click on any Image below to choose
< 1 of 18 >

| | | | | |
|---|--|---|---|---|
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

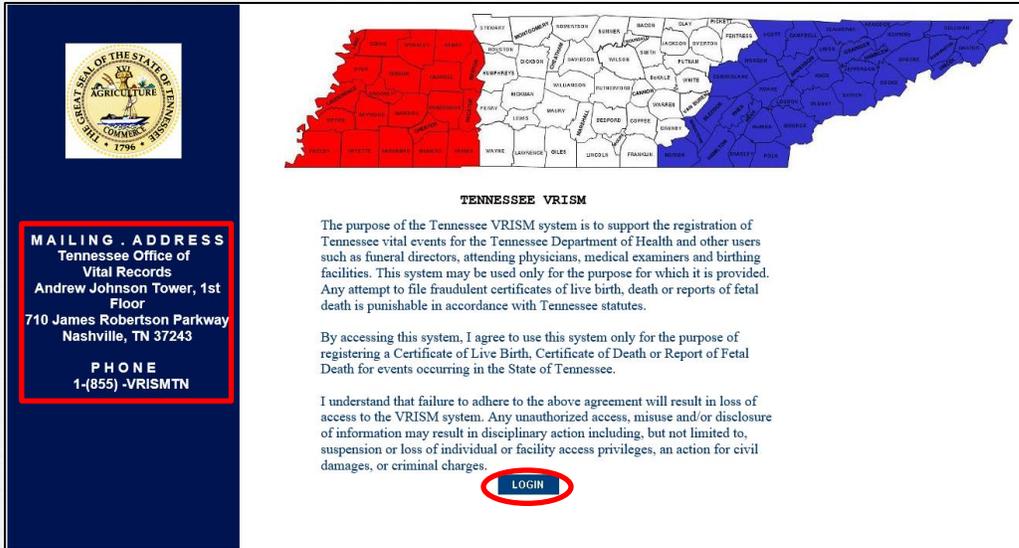
< 1 of 18 >

Key: *

Selected Image:

No Image

Logging into VRISM



MAILING ADDRESS
Tennessee Office of
Vital Records
Andrew Johnson Tower, 1st
Floor
710 James Robertson Parkway
Nashville, TN 37243

PHONE
1-(855)-VRISMTN

TENNESSEE VRISM

The purpose of the Tennessee VRISM system is to support the registration of Tennessee vital events for the Tennessee Department of Health and other users such as funeral directors, attending physicians, medical examiners and birthing facilities. This system may be used only for the purpose for which it is provided. Any attempt to file fraudulent certificates of live birth, death or reports of fetal death is punishable in accordance with Tennessee statutes.

By accessing this system, I agree to use this system only for the purpose of registering a Certificate of Live Birth, Certificate of Death or Report of Fetal Death for events occurring in the State of Tennessee.

I understand that failure to adhere to the above agreement will result in loss of access to the VRISM system. Any unauthorized access, misuse and/or disclosure of information may result in disciplinary action including, but not limited to, suspension or loss of individual or facility access privileges, an action for civil damages, or criminal charges.

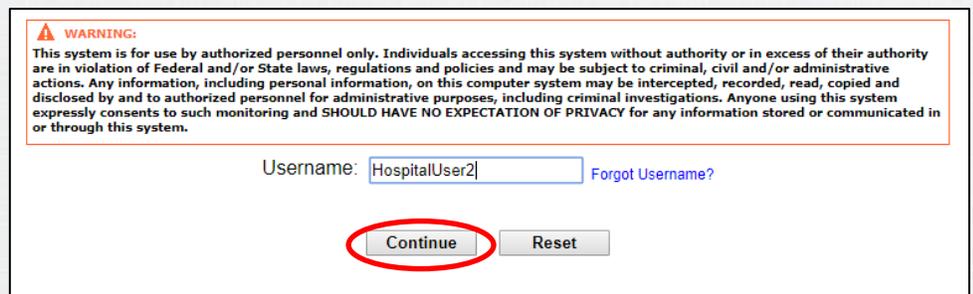
LOGIN

This is the VRISM login screen. Please note that on the left side of the screen you will see the mailing address and the VRISM Help Desk phone number. If you have any questions, you can call this number for assistance. You can start the four-step login process by clicking the blue "Login" button at the bottom of the screen.

Link to VRISM login screen: <https://vrism.tn.gov/vrism/>

Step One: Username

The first step is entering your username. This will be assigned to you after you submit a user agreement form. Please note that all fields in the login process are case-sensitive, so make sure to type in your information exactly as given to you.



WARNING:
This system is for use by authorized personnel only. Individuals accessing this system without authority or in excess of their authority are in violation of Federal and/or State laws, regulations and policies and may be subject to criminal, civil and/or administrative actions. Any information, including personal information, on this computer system may be intercepted, recorded, read, copied and disclosed by and to authorized personnel for administrative purposes, including criminal investigations. Anyone using this system expressly consents to such monitoring and SHOULD HAVE NO EXPECTATION OF PRIVACY for any information stored or communicated in or through this system.

Username: [Forgot Username?](#)

Continue

Step Two: Security Questions

WARNING:
This system is for use by authorized personnel only. Individuals accessing this system without authority or in excess of their authority are in violation of Federal and/or State laws, regulations and policies and may be subject to criminal, civil and/or administrative actions. Any information, including personal information, on this computer system may be intercepted, recorded, read, copied and disclosed by and to authorized personnel for administrative purposes, including criminal investigations. Anyone using this system expressly consents to such monitoring and SHOULD HAVE NO EXPECTATION OF PRIVACY for any information stored or communicated in or through this system.

What street did you live on in third grade?

Answer: [Forgot Answer?](#)

Next, you will answer one of your three selected security questions. Once you have received your username and a link to set up your account, you will be able to personalize these questions. Please note that all fields are case-sensitive.

Step Three: Security Image and Phrase

The third step is verifying the image and phrase on the screen. These will also be personalized in the account activation process. If you get an image and phrase that are not the ones you set, please close this page and restart the login process.

VRISM - Login Page - Internet Explorer
<https://test.vrism.tn.gov/vrism3/do/login>

WARNING:
This system is for use by authorized personnel only. Individuals accessing this system without authority or in excess of their authority are in violation of Federal and/or State laws, regulations and policies and may be subject to criminal, civil and/or administrative actions. Any information, including personal information, on this computer system may be intercepted, recorded, read, copied and disclosed by and to authorized personnel for administrative purposes, including criminal investigations. Anyone using this system expressly consents to such monitoring and SHOULD HAVE NO EXPECTATION OF PRIVACY for any information stored or communicated in or through this system.

Please Note
Identify your Image and Key. Press Cancel if they don't match.



VRISM
Forgot Image or Key?

Step Four: Password

The fourth step is entering in your password (personalized in the activation process) and pressing “Log In.” If you are taken back to the first step, the username screen, try logging in again or, if the issue persists, contact the VRISM Help Desk at (855) 874-7686. HIPAA guidelines indicate that passwords should never be shared with other users.

WARNING:
This system is for use by authorized personnel only. Individuals accessing this system without authority or in excess of their authority are in violation of Federal and/or State laws, regulations and policies and may be subject to criminal, civil and/or administrative actions. Any information, including personal information, on this computer system may be intercepted, recorded, read, copied and disclosed by and to authorized personnel for administrative purposes, including criminal investigations. Anyone using this system expressly consents to such monitoring and SHOULD HAVE NO EXPECTATION OF PRIVACY for any information stored or communicated in or through this system.

Password: [Forgot Password?](#)

Troubleshooting:

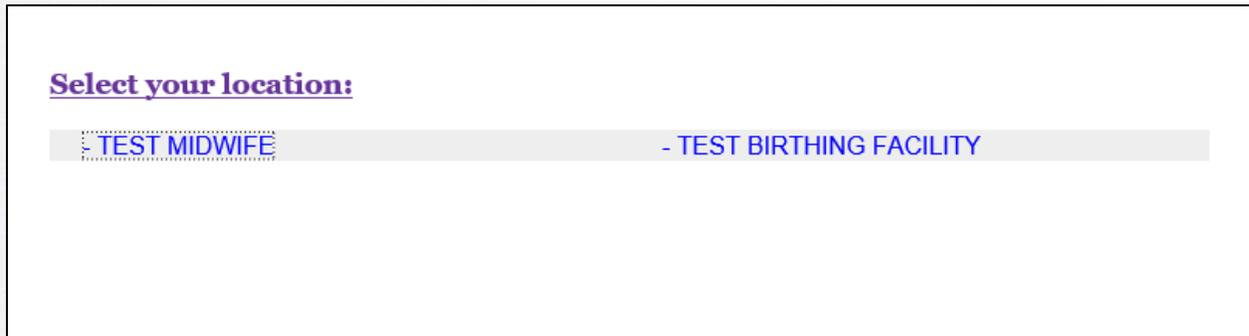
The login process works in a cascading manner; every step of the login process must be entered correctly in order to gain access to the VRISM system. Although the system will never tell you if you’ve entered something incorrectly, you will see information that you don’t recognize on the subsequent screen.

For example, you might get a security question that you would not have chosen. This would mean that you entered your username incorrectly on the previous screen. Likewise, if you see an image and phrase that are not the image and phrase you selected, this means you’ve answered your security question incorrectly.

In the event this occurs, please restart the login process. If the issue persists, please contact the VRISM Help Desk for assistance at (855) 874-7686.

Users Assigned to Multiple Locations

If a user works in multiple locations, they will need to select the location after logging in. This can be done by clicking the name of the desired location.



You can switch locations as needed by clicking “change” in the upper left corner of the screen below your name.



If a user has only one location, it will open to the main screen.

Logged in as:
Hospital Entry
at BLOUNT MEMORIAL HOSPITAL [change]
Unit: BLOUNT MEMORIAL HOSPITAL

Version: RLS-1-33
02/27/2019 03:07 PM
Logout | Help

Main
Birth | Fetal Death | System

Pending (1-2 of 2)

| Last Name | First Name | Middle Name | DOB | Mother's Maiden First | Mother's Maiden Last | County | State File Number | Certificate indicator | Status | Action |
|-----------|------------|-------------|------------|-----------------------|----------------------|--------|-------------------|-----------------------|---------------|-----------------|
| TEST | TEST | | 02/02/2019 | | TEST | BLOUNT | | | Not submitted | Details Process |
| TEST | TEST | | 02/03/2019 | TEST | TEST | BLOUNT | | | Not submitted | Details Process |

News
News Message
There is no news for Hospital Entry

VRISM Main Page and News Section

Once you have logged in (and selected location), you will see the main page.



The screenshot shows the VRISM main page. At the top left, it displays the user's login information: "Logged in as: Hospital Entry at LIVING STON REGIONAL HOSPITAL [change] Unit: LIVING STON REGIONAL HOSPITAL". At the top right, it shows the version "Version: RLS-1-33" and the date/time "02/11/2019 10:10 AM" with links for "Logout" and "Help". Below this is a "Main" navigation bar with tabs for "Birth", "Fetal Death", and "System". A red arrow points to the "News" tab, which is currently selected. Under the "News" tab, there is a "News Message" section with a "TEST MESSAGE" that says "This is a test of the news message process." Below the news message is a "Pending (1-2 of 2)" section containing a table of records.

| Last Name | First Name | Middle Name | DOB | Mother's Maiden First | Mother's Maiden Last | County | State File Number | Certificate Indicator | Status | Action |
|-----------|------------|-------------|------------|-----------------------|----------------------|---------|-------------------|-----------------------|---------------|---|
| WILLIAMS | TRINA | | 12/22/2018 | CATRINA | SMITH | OVERTON | | | Not submitted | Details Process |
| MARTIN | DAMON | | 12/24/2018 | LISA | TANNER | OVERTON | | | Not submitted | Details Process |

If there are updates from the state they will be under the news tab. VRISM is continually being improved and updated, so please check this tab when you log in.

The upper left side of the screen will show your user information. If any of this information is incorrect, please contact the VRISM Help Desk (855-874-7686).

Changing Security Information

To change any previously set security information, click "System" and then "Change Security Information." Then click "Change" next to the information you would like to change.

Logged in as:
Hospital Entry
at LIVINGSTON REGIONAL HOSPITAL [change]
Unit: LIVINGSTON REGIONAL HOSPITAL

Version: RLS-1-33
02/11/2019 11:04 AM
Logout | Help

Main – System – Change Security Information

Security Informations List

Modify an existing Security Information

| Security Information | Change |
|--------------------------|------------------------|
| Password | CHANGE |
| Security Question Answer | CHANGE |
| Image and Key Phrase | CHANGE |
| Pin | CHANGE |
| E-mail | CHANGE |

When you have selected a field to change, please fill out the prompt to change information and then press "Continue."

Main – System – Change Security Information

Modify a Password

Current Password:

New Password:

Retype New Password:

Single Births

Tab 1: Baby and Mother

Create a New Birth record by clicking:
Main → Birth → Create → New.

The screenshot shows a web-based form for creating a birth record. At the top, there is a navigation bar with tabs: 1 Baby and Mother (selected), 2 Mother, 3 Mother, 6 Household and SSN Info, 7 Birthplace, 8 Prenatal, 9 Labor, 10 Delivery, 11 Newborn, 12 Newborn, and 13 Record Actions. The main form area is divided into several sections:

- Mother's Med Record No and Newborn Specimen Control No:** Includes checkboxes for 'Foundling', 'Safe haven', and 'Surrogate'. Fields for 'Mother's medical record number' and 'Newborn screening specimen control number'.
- Special Circumstances of this Birth:** Includes checkboxes for 'Foundling', 'Safe haven', and 'Surrogate'.
- M1 Baby's Name:** Fields for 'First', 'Middle', 'Last', and 'Suffix'. A checkbox for 'First and middle names not yet chosen'.
- Affidavit to Name Child:** A dropdown menu for 'Affidavit required for naming child?'.
- F1 Date of Birth:** A date field with a calendar icon.
- F2 Time of Birth:** Fields for 'Time of birth' and 'Time indicator' (dropdown).
- F3 Sex:** A dropdown menu for 'Sex'.
- M2 Mother's Current Legal Name:** Fields for 'First', 'Middle', 'Last', and 'Suffix'.
- M5 Mother Ever Married:** A dropdown menu for 'Has the Mother ever been married?'.
- M6 Mother's Name Prior to First Marriage:** Fields for 'First', 'Middle', 'Last', and 'Suffix'. A checkbox for 'Same as current name'.

At the bottom of the form, there are four buttons: 'Previous', 'Next', 'Finish', and 'Cancel'.

This will open the record to tab 1, or the Baby and Mother tab. Enter all required information. Please note that in order to move to the next page or save the record, at minimum, you must enter the baby's last name, date of birth, and sex.

Pursuant to TCA §§ 68-3-305, the last name must follow:

- (A) The surname of the natural father
- (B) The surname of the mother
- (C) The mother's maiden surname; or
- (D) Any combination of the surnames listed in subdivisions (A)-(C)

To *move to the next* tab, click "Next" at the bottom of the screen.

In order to *save* an unfinished record, click "Finish" at the bottom of the screen. The subsequent screen will show you information missing from the record. Scroll to the bottom of the screen and click the "Save (as Pending)" button.

The record will **not save automatically** and will time out after 15 minutes of inactivity, so it's strongly suggested that you save regularly.

For more information on saving, see page 31.

Tab 2: Mother

Continue on Tab 2 with the mother's information.

The screenshot shows a multi-tabbed form titled "Tab 2: Mother". The tabs at the top are: 1 Baby and Mother, 2 Mother (selected), 3 Mother, 6 Household and SSN Info, 7 Birthplace, 8 Prenatal, 9 Labor, 10 Delivery, 11 Newborn, 12 Newborn, and 13 Record Actions. The form is divided into several sections:

- M3 Mother's Date of Birth:** Includes a date of birth field (mm/dd/yyyy) and a calculated age field.
- M4 Mother's Birthplace:** Includes dropdown menus for Country and State/province.
- M7-8 Mother's Residence Address:** Includes text fields for Street and number, Apartment number, and Zip code, along with dropdown menus for Country, State/province, County, City list, and Inside city or town limits?
- M9 Mother's Mailing Address:** Includes a checkbox for "Same as residence", text fields for Street and number, Apartment number, and Zip code, and dropdown menus for Country, State/province, and City list.
- M10 Mother's Education:** Includes a dropdown menu for Highest degree or level of school.
- M11 Mother of Hispanic Origin?:** Includes radio buttons for "No, not Spanish/Hispanic/Latina", "Yes, Mexican, Mexican American, Chicana", "Yes, Puerto Rican", "Yes, Cuban", and "Yes, other Spanish/Hispanic/Latina (e.g. Spaniard, Salvadoran, Dominican, Columbian)", a text field for "Specify other", and an "Unknown" option.

At the bottom of the form are four buttons: Previous, Next, Finish, and Cancel.

From the Mother's worksheet, enter or select dropdown information in:

- M3** Mother's Date of Birth
- M4** Mother's Birthplace
- M7-8** Mother's Residence Address
- M9** Mother's Mailing Address
- M10** Mother's Education
- M11** Mother of Hispanic Origin

Then, click "Next."

Tab 3: Mother (continued)

| | | | | | | | | | | |
|-------------------|----------|-----------------|--------------------------|--------------|------------|---------|-------------|------------|------------|-------------------|
| 1 Baby and Mother | 2 Mother | 3 Mother | 6 Household and SSN Info | 7 Birthplace | 8 Prenatal | 9 Labor | 10 Delivery | 11 Newborn | 12 Newborn | 13 Record Actions |
|-------------------|----------|-----------------|--------------------------|--------------|------------|---------|-------------|------------|------------|-------------------|

M12-13 Mother's Race

White

Black or African American

American Indian or Alaskan Native

Name of enrolled or principle tribe

Asian Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

Other Asian

Other Asian, Specify

Native Hawaiian

Guamanian or Chamorro

Samoan

Other Pacific Islander

Other Pacific Islander, Specify

Other race

Other, Specify

Unknown

Mother's primary race

M14 WIC

Did mother participate in WIC program?

M15 Mother's Height

Feet Inches

M16 Mother's Pre-pregnancy Weight

Pre-pregnancy weight (pounds)

M17 Cigarette Smoking

Did mother smoke three months before or during pregnancy?

| | | | |
|--|----------------------|-----------------|----------------------|
| Three months before pregnancy - # of cigarettes | <input type="text"/> | OR - # of packs | <input type="text"/> |
| First three months of pregnancy - # of cigarettes | <input type="text"/> | OR - # of packs | <input type="text"/> |
| Second three months of pregnancy - # of cigarettes | <input type="text"/> | OR - # of packs | <input type="text"/> |
| Last three months of pregnancy - # of cigarettes | <input type="text"/> | OR - # of packs | <input type="text"/> |

M18 Marital Status

Married at birth or conception or between?

Will Voluntary Acknowledgment of Paternity (VAOP) be completed?

Refuses to give husband's information

Clear All Father (Parent II) Information and Baby's Last Name

Enable clear of father/parent II's info

Select CLEAR to remove father/parent II's info

From the Mother's worksheet, enter or select dropdown information in:

M12-13 Mother's Race

M14 WIC

M15 Mother's Height

M16 Mother's Pre-pregnancy Weight

M17 Cigarette Smoking

M18 Marital Status

***Clear All Father (Parent II) Information and Baby's Last Name**

*This field is only used if father's information has been previously keyed and needs to be removed.

Then, click "Next."

Note: Based on your answer to "Married at birth or conception or between?" will determine whether additional questions must be answered and the need to send documentation to the state, such as a signed Voluntary Acknowledgment of Paternity (VAoP). See page 36 for instructions to print the VAoP.

Tab 4: Father (If Applicable)

| | | | | | | | | | | | |
|---|-----------------|-----------------|-----------------|-----------------|---------------------------------|---|-------------------|----------------|--------------------|-------------------|-------------------|
| 1 Baby and Mother | 2 Mother | 3 Mother | 4 Father | 5 Father | 6 Household and SSN Info | 7 Birthplace | 8 Prenatal | 9 Labor | 10 Delivery | 11 Newborn | 12 Newborn |
| 13 Record Actions | | | | | | | | | | | |
| M19a-b Father's Legal Name | | | | | | M21 Father's Birthplace | | | | | |
| First <input type="text"/> | | | | | | Country <input type="text" value="Select"/> | | | | | |
| Middle <input type="text"/> | | | | | | State/province <input type="text" value="Select"/> | | | | | |
| Last <input type="text"/> | | | | | | M22 Father's Education | | | | | |
| Suffix <input type="text"/> | | | | | | Highest degree or level of school <input type="text" value="Select"/> | | | | | |
| M20 Father's Date of Birth | | | | | | M23 Father's of Hispanic Origin? | | | | | |
| Date of birth (mm/dd/yyyy) <input type="text"/> | | | | | | <input type="checkbox"/> No, not Spanish/Hispanic/Latino | | | | | |
| Calculated age <input type="text" value=""/> | | | | | | <input type="checkbox"/> Yes, Mexican, Mexican American, Chicano | | | | | |
| | | | | | | <input type="checkbox"/> Yes, Puerto Rican | | | | | |
| | | | | | | <input type="checkbox"/> Yes, Cuban | | | | | |
| | | | | | | <input type="checkbox"/> Yes, other Spanish/Hispanic/Latino (e.g. Spaniard, Salvadoran, Dominican, Colombian) | | | | | |
| | | | | | |Specify other <input type="text" value=""/> | | | | | |
| | | | | | | <input type="checkbox"/> Unknown | | | | | |
| Previous | | | Next | | | Finish | | | Cancel | | |

From the Mother's worksheet, enter or select dropdown information in:

M19 Father's Legal Name

M20 Father's Date of Birth

M21 Father's Birthplace

M22 Father's Education

M23 Father of Hispanic Origin

Then, click "Next."

Note: The Father tabs will only be necessary if the mother is married at the time of either conception or birth, or anytime between conception and birth, or if a VAoP will be completed.

Tab 5: Father (continued)

1 Baby and Mother | 2 Mother | 3 Mother | 4 Father | **5 Father** | 6 Household and SSN Info | 7 Birthplace | 8 Prenatal | 9 Labor | 10 Delivery | 11 Newborn | 12 Newborn | 13 Record Actions

M24-25 Father's Race

White
 Black or African American
 American Indian or Alaskan Native
Name of enrolled or principle tribe
 Asian Indian
 Chinese
 Filipino
 Japanese
 Korean
 Vietnamese
 Other Asian
Other Asian, Specify
 Native Hawaiian
 Guamanian or Chamorro
 Samoan
 Other Pacific Islander
Other Pacific Islander, Specify
 Other race
Other, Specify
 Unknown
Father's primary race

30 Father's Residence Address

Same as mother's residence
Street and number
Apartment number
Country
State/Province
County
City list
City or town
Zip code

From the Mother's worksheet, enter or select dropdown information in:

M24-25 Father's Race

30 Father's Residence Address

Then, click "Next."

Tab 6: Household and SSN Info

1 Baby and Mother | 2 Mother | 3 Mother | 4 Father | 5 Father | 6 Household and SSN Info | 7 Birthplace | 8 Prenatal | 9 Labor | 10 Delivery | 11 Newborn | 12 Newborn | 13 Record Actions

M26-27 Language and Income
Primary language spoken in the household: Select
Specify other language: [Yellow highlighted field]
Household income range: Select

M28 Permission Given to Request Social Security Number
Permission given to request issue of SSN for child?: Select

M29a Mother's Social Security Number
SSN: [Input field]
 Unknown
 None

M29b Father's Social Security Number
SSN: [Input field]
 Unknown
 None

Previous Next Finish Cancel

From the Mother's worksheet, enter or select dropdown information in:

M26-27 Language and Income

M28 Permission Given to Request Social Security Number

M29a Mother's Social Security Number

M29b Father's Social Security Number

Then, click "Next."

If either of the parents do not have a Social Security number, please check the "None" box or enter all 8's. This registers as "none" in the VRISM system.

If either parent's Social Security number is unknown, please check the "Unknown" box or enter all 9's.

Info | 7 Birthplace | 8 Prenatal | 9 Labor | 10 Delivery

M29a Mother's Social Security Number
SSN: 888-88-8888
 Unknown
 None

M29b Father's Social Security Number
SSN: [Yellow highlighted field]
 Unknown
 None

Finish Cancel

Tab 7: Birthplace

1 Baby and Mother | 2 Mother | 3 Mother | 4 Father | 5 Father | 6 Household and SSN Info | 7 Birthplace | 8 Prenatal | 9 Labor | 10 Delivery | 11 Newborn | 12 Newborn | 13 Record Actions

F7 & F10 Place where Birth Occurred

Place of birth

Specify location

Occurred en route

Registering Facility

Registering facility

Birth occurred at another facility

F8-9 Birthplace Name and Address

Facility list

Facility not in list

Facility name

Facility I.D.

Address

Apartment or suite number

Country list

Country

State/province list

State/province

County list

County

City list

City or town

Zip code

From the Facility worksheet, enter or select dropdown information in:

F7 & F10 Place where Birth Occurred and Registering Facility (if needed)

F8-9 Birthplace Name and Address (if needed)

Then, click "Next."

Note: If you're a birthing facility or midwife that is entering the birth record, the facility name and address information may already be populated for you since the system assumes the birth occurred at your facility location. Your facility name will also be shown as the Registering Facility.

Please be sure the information in F8-9 is correct if prepopulated. If not, please call the VRISM Help Desk (855-874-7686).

Tab 8: Prenatal

1 Baby and Mother | 2 Mother | 3 Mother | 4 Father | 5 Father | 6 Household and SSN Info | 7 Birthplace | **8 Prenatal** | 9 Labor | 10 Delivery | 11 Newborn | 12 Newborn | 13 Record Actions

F11-13 Prenatal Care

Prenatal care?

Number of prenatal care visits

Date of first prenatal care visit (mm/dd/yyyy)

Date of last prenatal care visit (mm/dd/yyyy)

F14 Date of Last Menses

Date last normal menses began (mm/dd/yyyy)

F15-17 Pregnancy History (Previous Live Births)

Number now living Number now dead

Date of last live birth (mm/dd/yyyy)

F18-19 Pregnancy History (Other Pregnancy Outcomes)

Number of other outcomes Date of last other pregnancy outcome (mm/dd/yyyy)

F20 Risk Factors in this Pregnancy (Check all that apply)

Diabetes

-Prepregnancy diabetes
-Gestational diabetes

Hypertension

-Prepregnancy hypertension
-Gestational hypertension
- Eclampsia
- Previous preterm birth
- Other previous poor outcome (SGA, perinatal death, etc.)
- Vaginal bleeding during pregnancy prior to labor
- Pregnancy resulted from infertility treatment
-Fertility-enhancing drugs, artificial insemination or intrauterine insemination
-Assisted reproductive technology (e. g., in vitro fertilization (IVF), gamete intrafallopian transfer (GIFT))
- Mother had a previous cesarean delivery

.....If yes, how many?

None of the above

F21 Infections Present and/or Treated (Check all that apply)

- Gonorrhea
- Syphilis
- Herpes simplex virus (HSV)
- Chlamydia
- Hepatitis B
- Hepatitis C
- None of the above

F22 Obstetric Procedures (Check all that apply)

- Cervical cerclage
- Tocolysis

External cephalic version:

-Successful
-Failed
- None of the above

From the Facility worksheet, enter or select dropdown information in:

F11-13 Prenatal Care

F14 Date of Last Menses

F15-17 Pregnancy History (Previous Live Births)

F18-19 Pregnancy History (Other Pregnancy Outcomes)

F20 Risk Factors in This Pregnancy

F21 Infections Present and/or Treated

F22 Obstetric Procedures

Then, click "Next."

Note: If the answer to any of the fields in sections F15-19 is none, zero (0) must be keyed in the applicable boxes.

Tab 9: Labor

1 Baby and Mother | **2 Mother** | **3 Mother** | **4 Father** | **5 Father** | **6 Household and SSN Info** | **7 Birthplace** | **8 Prenatal** | **9 Labor** | **10 Delivery** | **11 Newborn** | **12 Newborn**

13 Record Actions

F23 Onset of Labor (Check all that apply)

Premature rupture of membranes (≥ 12 hrs)

Precipitous labor (< 3 hrs)

Prolonged labor (≥ 20 hrs)

None of the above

F24 Principle Source of Payment for this Delivery

Principal source of payment

Other source (specify)

F25 Attendant

Name list

First

Middle

Last

Suffix

Title

Other title

National provider ID

F26 Infant Medical Record Number

Newborn's medical record number

F27 Mother Transfer Info

Mother transferred in for delivery?

Transferred from this facility

Transferred from name

From the Facility worksheet, enter or select dropdown information in:

F23 Onset of Labor

F24 Principle Source of Payment for this Delivery

F25 Attendant

F26 Infant Medical Record Number

F27 Mother Transfer Info

Then, click "Next."

Note: In section F25, enter the attendant's information manually or select from the list. In section F27, if mother was transferred in for delivery, select the name of facility from which she was transferred. If the facility is not in the list, you must enter the information manually.

Tab 10: Delivery

| | | | | | | | | | | | | | | | |
|---|--------------------------|--------------------------|--------------------------|-------------------------------------|--|--|----------------------------|---------------------------------------|------------------------------------|----------------------------|----------------------------|---------------------------------------|--|--|--|
| 1 Baby and Mother | 2 Mother | 3 Mother | 4 Father | 5 Father | 6 Household and SSN Info | 7 Birthplace | 8 Prenatal | 9 Labor | 10 Delivery | 11 Newborn | 12 Newborn | | | | |
| 13 Record Actions | | | | | | | | | | | | | | | |
| F28 Mother's Weight at Delivery Weight at delivery (pounds) <input type="text"/> | | | | | | F30 Method of Delivery Was delivery with forceps attempted but unsuccessful? <input type="text" value="Select"/> | | | | | | | | | |
| F29 Characteristics of Labor and Delivery (Check all that apply) <input type="checkbox"/> Induction of labor <input type="checkbox"/> Augmentation of labor <input type="checkbox"/> Non-vertex presentation <input type="checkbox"/> Steroids (glucocorticoids) for fetal lung maturation received by the mother prior to delivery <input type="checkbox"/> Antibiotics received by the mother during labor <input type="checkbox"/> Clinical chorioamnionitis/maternal temp. >= 38C (100.4F) <input type="checkbox"/> Moderate/heavy meconium staining of amniotic fluid <input type="checkbox"/> Fetal intolerance of labor (e.g., in-utero resuscitative measures, further fetal assessment, or operative delivery) <input type="checkbox"/> Epidural or spinal anesthesia during labor <input type="checkbox"/> None of the above | | | | | | Was delivery with vacuum extraction attempted but unsuccessful? <input type="text" value="Select"/> Fetal presentation at delivery <input type="text" value="Select"/> Final route and method <input type="text" value="Select"/>If cesarean, was a trial of labor attempted? <input type="text" value="Select"/> | | | | | | | | | |
| | | | | | | F31 Maternal Morbidity (Check all that apply) <input type="checkbox"/> Maternal transfusion <input type="checkbox"/> Third or fourth degree perineal laceration <input type="checkbox"/> Ruptured uterus <input type="checkbox"/> Unplanned hysterectomy <input type="checkbox"/> Admission to intensive care unit <input type="checkbox"/> Unplanned operating room procedure following delivery <input type="checkbox"/> None of the above | | | | | | | | | |
| <input type="button" value="Previous"/> | | | | <input type="button" value="Next"/> | | | | <input type="button" value="Finish"/> | | | | <input type="button" value="Cancel"/> | | | |

From the Facility worksheet, enter or select dropdown information in:

F28 Mother's Weight at Delivery

F29 Characteristics of Labor and Delivery

F30 Method of Delivery

F31 Maternal Morbidity

Then, click "Next."

Tabs 11-12: Newborn

The screenshot shows a medical record form with the following sections:

- Navigation Tabs:** 1 Baby and Mother, 2 Mother, 3 Mother, 6 Household and SSN Info, 7 Birthplace, 8 Prenatal, 9 Labor, 10 Delivery, 11 Newborn (highlighted), 12 Newborn, 13 Record Actions
- F32 Plurality:** Plurality (Select dropdown), Deliveries from Pregnancy Incomplete (checkbox), Total live births from this pregnancy (text input), Total stillbirths from this pregnancy (text input)
- F33 If Not Single Birth:** Birth order (Select dropdown)
- F35 Birthweight:** Weight units (Select dropdown), Grams (text input), Pounds (text input), Ounces (text input)
- F36 Obstetric Estimate of Gestation:** Gestation (completed weeks) (text input)
- F37 APGAR Score:** APGAR at 5 minutes (text input), APGAR at 10 minutes (text input)
- F38 Abnormal Conditions (Check all that apply):**
 - Assisted ventilation required immediately following delivery
 - Assisted ventilation required for more than six hours
 - NICU admission
 - Newborn given surfactant replacement therapy
 - Antibiotics received by newborn for suspected neonatal sepsis
 - Seizure or serious neurologic dysfunction
 - Significant birth injury
 - None of the above
- F39 Congenital Anomalies (Check all that apply):**
 - Anencephaly
 - Meningomyelocele/Spinabifida
 - Cyanotic congenital heart disease
 - Congenital diaphragmatic hernia
 - Omphalocele
 - Gastroschisis
 - Limb reduction defect (excluding congenital amputation and dwarfing syndrome)
 - Cleft lip with or without cleft palate
 - Cleft palate alone
 - Down syndrome
 -Karyotype confirmed (Down)
 -Karyotype pending (Down)
 - Suspected chromosomal disorder
 -Karyotype confirmed
 -Karyotype pending
 - Hypospadias
 - None of the anomalies listed above
- Buttons:** Previous, Next, Finish, Cancel

From the Facility worksheet, enter or select dropdown information in:

- F32** Plurality
- F33** If Not a Single Birth
- F35** Birthweight
- F36** Obstetric Estimate of Gestation
- F37** Apgar Score
- F38** Abnormal Conditions
- F39** Congenital Abnormalities

Then, click "Next."

The screenshot shows a medical record form with the following sections:

- Navigation Tabs:** 1 Baby and Mother, 2 Mother, 3 Mother, 6 Household and SSN Info, 7 Birthplace, 8 Prenatal, 9 Labor, 10 Delivery, 11 Newborn, 12 Newborn (highlighted), 13 Record Actions
- F40 Infant Transferred Within 24 Hours of Delivery:** Was infant transferred? (Select dropdown), Transferred to this facility (Select dropdown), Transferred to name (text input)
- F41 Infant Living at Time of Report:** Is infant living at time of report? (Select dropdown), If not living, give date of death (mm/dd/yyyy) (text input)
- F42 Breastfed:** Is infant being breastfed at time of discharge? (Select dropdown)
- Buttons:** Previous, Next, Finish, Cancel

From the Facility worksheet, enter or select dropdown information in:

- F40** Infant Transferred Within 24 Hours of Delivery
- F41** Infant Living at Time of Report
- F42** Breastfed

Then, click "Next."

Tab 13: Record Actions

1 Baby and Mother | 2 Mother | 3 Mother | 6 Household and SSN Info | 7 Birthplace | 8 Prenatal | 9 Labor | 10 Delivery | 11 Newborn | 12 Newborn | 13 Record Actions

Comments Among Users About Record

Comments

F43-44 Certifier

Certifier is attendant

Certifier list

First

Middle

Last

Suffix

National provider ID

Title

Other title

Date certified (mm/dd/yyyy)

Filing Information

Registrar name

State Review

Accept record

Reject/return record

Affidavit Sign date missing/incorrect

Father's affidavit signature missing

Minor parent - consent signature missing

Notary seal missing

VAoP missing

Other - See comment section

Rejection Date

Child's surname

Mother's affidavit signature missing

Notary signature missing

VAoP reprint needed

Whiteout/Crossout

Tennessee State File Number

SFN Certificate indicator

Release for registration

Record History

Record created by 205 on 02/12/2019

From the Facility worksheet, enter or select dropdown information in:

F43-44 Certifier

National provider ID, Title, and Date Certified are required.

Then, click "Finish."

If any required fields haven't been completed they will appear on the screen as links that you can follow to correct the record. If you'd like to continue saving an unfinished record, please click "Save (as Pending)" at the bottom of the screen.

VRISM Warning

The record you are trying to save is UNFINISHED. All of the following fields are required for a FINISHED record.

These fields must be completed before releasing record to the state. Fix all the following:

[Mother's Race - Mother's primary race](#)
Field Group Description: Mother's primary race is required.

[Pregnancy History \(Previous Live Births\) - Last live birth date](#)
Field Group Description: Date of the last live birth is required.

[Obstetric procedures](#)
Field Group Description: At least one item in Obstetric Procedures section must be selected. If none, select none.

If all required fields have been entered, you will see a *Successful Transaction* screen.

Successful Transaction

Your transaction has been saved successfully.

Record Details

| | |
|-----------------------|------------|
| Child's first name | BABY |
| Child's last name | LIL |
| State file number | |
| Child's date of birth | 10/30/2018 |

Print Confirmation

Your actions have triggered the following documents to be printed.
Please select all documents you wish to print.

| |
|--|
| Mother Copy / Application for Certified Copy: <input checked="" type="radio"/> |
| Skip this print option: <input type="radio"/> |
| Certificate of Live Birth - Draft: <input checked="" type="radio"/> |
| Skip this print option: <input type="radio"/> |

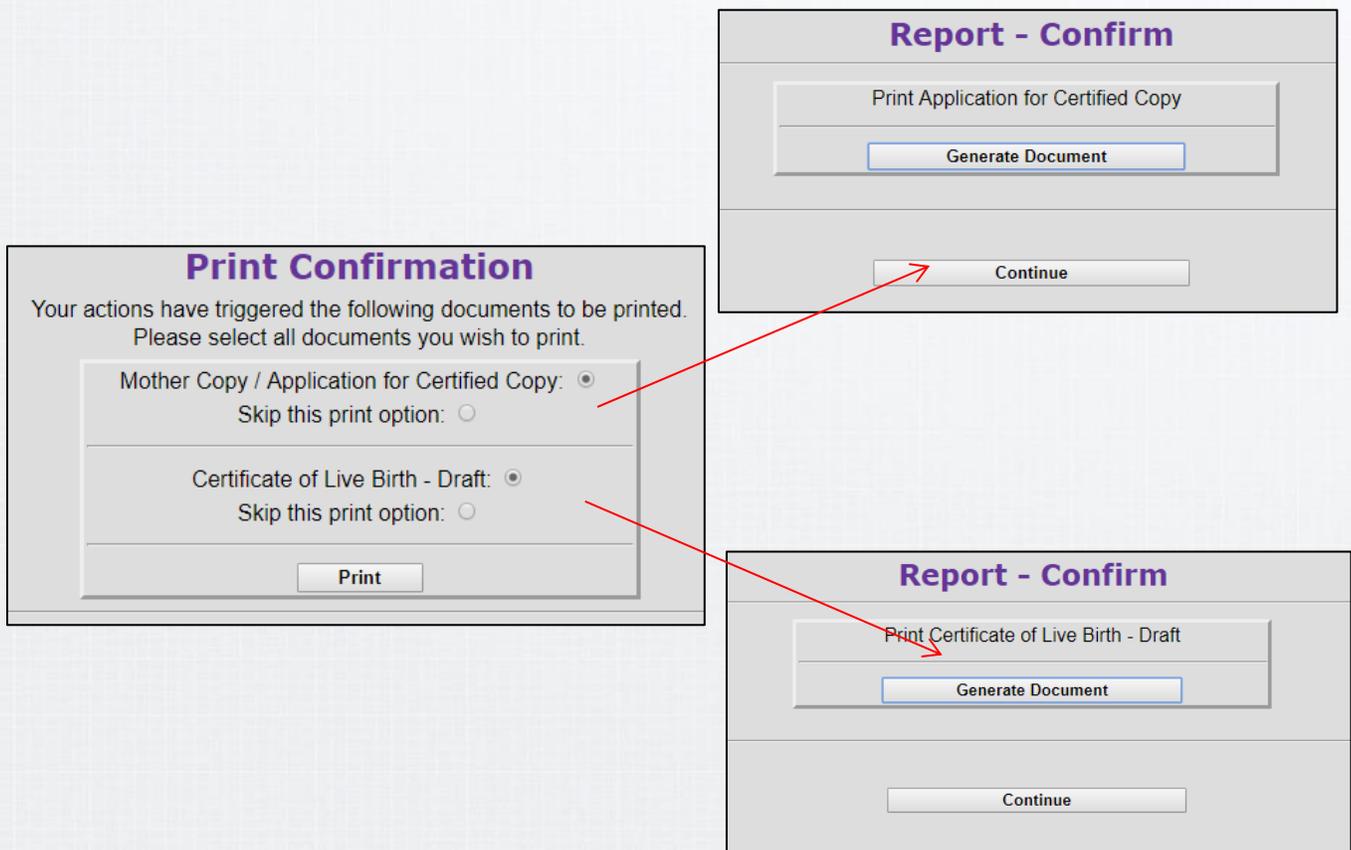
Other Options

Following options are available:

| |
|---|
| <input type="button" value="Return to Record"/> |
| <input type="button" value="File Record"/> |

All documents listed are defaulted to print. If you don't want to print, select "Skip this print option." Otherwise, click "Print" when all desired documents have been selected. Then select "Generate Document" on the following screen. This will generate a printable PDF.

Next, select "Continue" to move to the next document or return to the *Successful Transaction* screen to file the record with the State.



It is **strongly advised** to print the draft copy of the birth certificate to show the family and verify information.

Successful Transaction
Your transaction has been saved successfully.

Record Details

| | |
|-----------------------|------------|
| Child's first name | BABY |
| Child's last name | LIL |
| State file number | |
| Child's date of birth | 10/30/2018 |

Other Options

Following options are available:

To file a record, start by clicking the "File Record" button under the "Other Options" tab on the *Successful Transaction* screen.

You will then be reminded to mail any additional documentation (such as a VAO or an AoS) to the State. If you are ready to file the record, click "Continue." From this point forward, you will not be able to make changes to the record.

Warning - Confirm

Are you sure you want to File Record?
Remember to mail any required documentation to state.

OR

When a record has successfully been filed, you will see an updated *Successful Transaction* screen with a State File Number (SFN).

If documentation must be received by the State before the record is filed, an SFN will not be assigned.

Successful Transaction
Your transaction has been saved successfully.

Record Details

| | |
|-----------------------|------------|
| Child's first name | AMY |
| Child's last name | WINEHOME |
| State file number | 000043 |
| Child's date of birth | 04/12/2019 |

Successful Transaction
Your transaction has been saved successfully.

Record Details

| | |
|-----------------------|------------|
| Child's first name | LOTSA |
| Child's last name | BABIES |
| State file number | |
| Child's date of birth | 02/21/2019 |

Please note that if a VAO is being processed and the father of the child has not signed the form at the time of the infant's discharge, the father's information must be removed and the birth certificate must be filed. (Father's information can be cleared with checking a box on Tab 3.)

If the parents choose to add the father by VAO, they will need to contact a local health department or the State Office of Vital Records (OVR).

All documentation must be mailed within five days of the birth in order to complete the registration in accordance with TCA §§ 63-3-301.

Multiple Births

The first step to file a record for a multiple birth event is to enter a single birth record, as outlined in the previous section. The Plurality field (F32) on tab 11 must reflect the multiple births in order to link the second record to the first keyed record.

Continuing Multiple Records from the Successful Transaction Page

After filing the first record, click “Continue Multiple.” This allows you to start the next birth record for an event with multiple births.

The screenshot shows a dialog box with two main sections. The top section, titled "Other Options", contains the text "Following options are available:" and two buttons: "Return to Record" and "File Record". The bottom section, titled "Multiple Events Option", contains the text "Saved record indicated there are multiple records to enter. Would you like to process the remaining records?" and a "Check to start New Birth Record:" checkbox (which is checked) and a "Continue Multiple" button. At the bottom of the dialog are "Main Menu" and "Repeat Task" buttons.

Enter or select information on all pages, starting with the Baby and Mother tab. Please note that information that is the same for each baby will be copied to the new record. (Ex: Mother’s Current Legal Name.)

The screenshot shows a software interface for entering birth records. The title bar reads "Birth -- Date of birth (mm/dd/yyyy): 11/07/2018". The interface is divided into several tabs: "1 Baby and Mother", "2 Mother", "3 Mother", "4 Father", "5 Father", "6 Household and SSN Info", "7 Birthplace", "8 Prenatal", "9 Labor", "10 Delivery", "11 Newborn", "12 Newborn", and "13 Record Actions". The "1 Baby and Mother" tab is active. The form contains several sections: "Mother's Med Record No and Newborn Specimen Control No" with fields for "Mother's medical record number" (value: 21) and "Newborn screening specimen control number"; "Special Circumstances of this Birth" with checkboxes for "Foundling", "Safe haven", and "Surrogate"; "M1 Baby's Name" with fields for "First", "Middle", "Last", and "Suffix", and a checkbox for "First and middle names not yet chosen"; "Affidavit to Name Child" with a dropdown for "Affidavit required for naming child?"; "F1 Date of Birth" with a date field (value: 11/07/2018) and a calendar icon; "F2 Time of Birth" with fields for "Time of birth" and "Time indicator"; "F3 Sex" with a dropdown menu; "M2 Mother's Current Legal Name" with fields for "First", "Middle", "Last", and "Suffix"; "M5 Mother Ever Married" with a dropdown for "Has the Mother ever been married?"; and "M6 Mother's Name Prior to First Marriage" with fields for "First", "Middle", "Last", and "Suffix". At the bottom are "Previous", "Next", "Finish", and "Cancel" buttons.

Adding Multiple Records from the Main Menu

If you are not ready to start the next record from the *Successful Transaction* page, you have the option to start the next multiple birth record through a menu option. Following these steps will tie all multiples together and prevent additional entry of information that is the same for each multiple record.

Step 1: From the Main menu, click Birth → Create → Multiple → From Live Birth

Main – Birth – Create – Multiple – From Live Birth

Birth Record Search Criteria

Record Identifiers

Event year

State file number

Certificate indicator

Date of Birth

Date of birth (mm/dd/yyyy)

From

To

Child's Name

First

Middle

Last

Soundex on last name

Child's Gender

Sex

Mother's Name Prior to First Marriage

First

Last

Father's Name

First

Last

Step 2: Enter information to locate the record that was already entered into the system and click “Search.” (Not all fields are required to search. Suggested search parameters are Last Name and Date of Birth.)

Main – Birth – Create – Multiple – From Live Birth

Records List (Showing 1 - 1 of 1 records)

| Last Name | First Name | Middle Name | DOB | Mother's Maiden First | Mother's Maiden Last | County | State File Number | Certificate indicator | Status |
|-----------|------------|-------------|------------|-----------------------|----------------------|----------|-------------------|-----------------------|---------------------------------------|
| TWIN | ONE | | 11/07/2018 | MOM | MAIDEN | ANDERSON | | | Not submitted Details |

Step 3: Click “Details” when record is located.

Step 4: Confirm that you have the correct record from the *Record Details* page and click “Continue” at the bottom of the page.

Step 5: If all multiple events **have not** been entered, you will be given the “Multiple Events Option.” In this case, you should click on the “Continue Multiple” button to start the next record.



Multiple Events Option

Saved record indicated there are multiple records to enter.
Would you like to process the remaining records?

Check to start New Birth Record:

Continue Multiple

Main Menu Repeat Task

Step 6: Once you click on “Continue Multiple,” the Baby and Mother tab will open. Please enter or select information on all pages. Please note that information that is the same for each baby will be copied to the new record.

Step 7: Complete this process by printing and filing the records accordingly. For further instructions on filing and printing records, please see page 32 (printing) and page 33 (filing).

Saving a Record

If any required fields haven't been completed they will appear on the screen as links that you can follow to correct the record. If you'd like to continue saving an unfinished record, please click "Save (as Pending)" at the bottom of the screen.

VRISM Warning

The record you are trying to save is UNFINISHED. All of the following fields are required for a FINISHED record.

These fields must be completed before releasing record to the state. Fix all the following:

[Mother's Race - Mother's primary race](#)
Field Group Description: Mother's primary race is required.

[Pregnancy History \(Previous Live Births\) - Last live birth date](#)
Field Group Description: Date of the last live birth is required.

[Obstetric procedures](#)
Field Group Description: At least one item in Obstetric Procedures section must be selected. If none, select none.

If all required fields have been entered, you will see a *Successful Transaction* screen.

Successful Transaction

Your transaction has been saved successfully.

Record Details

| | |
|-----------------------|------------|
| Child's first name | BABY |
| Child's last name | LIL |
| State file number | |
| Child's date of birth | 10/30/2018 |

Print Confirmation

Your actions have triggered the following documents to be printed.
Please select all documents you wish to print.

| |
|--|
| Mother Copy / Application for Certified Copy: <input checked="" type="radio"/> |
| Skip this print option: <input type="radio"/> |
| Certificate of Live Birth - Draft: <input checked="" type="radio"/> |
| Skip this print option: <input type="radio"/> |

Other Options

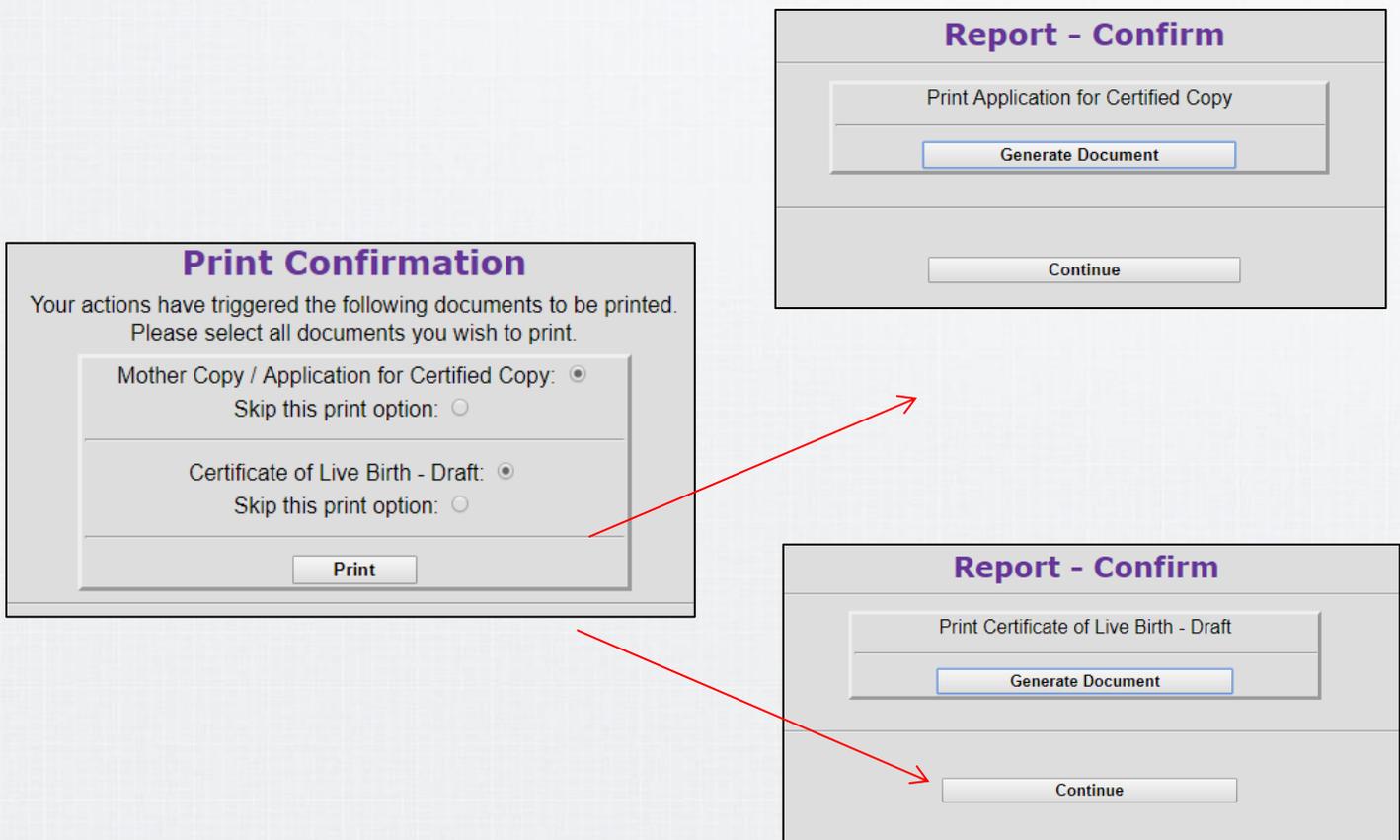
Following options are available:

| |
|---|
| <input type="button" value="Return to Record"/> |
| <input type="button" value="File Record"/> |

Printing a Record

All documents listed are defaulted to print. If you don't want to print, select "Skip this print option." Otherwise, click "Print" when all desired documents have been selected. Then select "Generate Document" on the following screen. This will generate a printable PDF.

Next, select "Continue" to move to the next document or return to the *Successful Transaction* screen to file the record with the State.



It is **strongly advised** to print the draft copy of the birth certificate to show the family and verify information.

Filing a Record

Successful Transaction
Your transaction has been saved successfully.

Record Details

| | |
|-----------------------|------------|
| Child's first name | BABY |
| Child's last name | LIL |
| State file number | |
| Child's date of birth | 10/30/2018 |

Other Options

Following options are available:

To file a record, start by clicking the “File Record” button under the “Other Options” tab on the *Successful Transaction* screen.

You will then be reminded to mail any additional documentation (such as a VAO or an AoS) to the State. If you are ready to file the record, click “Continue.” From this point forward, you will not be able to make changes to the record.

Warning - Confirm

Are you sure you want to File Record?
Remember to mail any required documentation to state.

OR

When a record has successfully been filed, you will see an updated *Successful Transaction* screen with a State File Number (SFN).

If documentation must be received by the State before the record is filed, an SFN will not be assigned.

Successful Transaction
Your transaction has been saved successfully.

Record Details

| | |
|-----------------------|------------|
| Child's first name | AMY |
| Child's last name | WINEHOME |
| State file number | 000043 |
| Child's date of birth | 04/12/2019 |

Successful Transaction
Your transaction has been saved successfully.

Record Details

| | |
|-----------------------|------------|
| Child's first name | LOTSA |
| Child's last name | BABIES |
| State file number | |
| Child's date of birth | 02/21/2019 |

Please note that if a VAO is being processed and the father of the child has not signed the form at the time of the infant’s discharge, the father’s information must be removed and the birth certificate must be filed. (Father’s information can be cleared with checking a box on Tab 3.)

If the parents choose to add the father by VAO, they will need to contact a local health department or the State Office of Vital Records (OVR).

All documentation must be mailed within five days of the birth in order to complete the registration in accordance with TCA §§ 63-3-301.

Foundling/Safe Haven Births

The first field on tab 1 is for *Mother's medical record number*. Since this is most likely unknown, please press Tab to navigate past it, and then click "OK" to move to the next field.

Only check one of the boxes in the "Special Circumstances of this Birth" section if it applies to the baby's record; otherwise, leave the checkboxes unchecked.

Limited data will be required on the record if a box is checked in this section.

The county of birth will be entered as the baby's last name; you will then enter the date found as the date of birth and four 9's (99:99) for an unknown time of birth. Click next and you will be taken to Tab 7, Birthplace.

Select the place of birth as "other" from the list and enter the specified location. For fields F8-F9 *Birthplace Name and Address* fields, enter the facility name and address, select county and city from the list, and enter zip code. Then, click "Next."

On the Foundling/Safe Haven tab, fill in all information under *Infant*, *Place Found or Place of Birth*, and *Person or Institution Place for Care*.

Then, click “Next.”

The screenshot shows a web application interface with a tabbed menu at the top. The tabs are: 1 Baby and Mother, 7 Birthplace, Foundling/Safe Haven (highlighted), 9 Labor, 11 Newborn, 12 Newborn, and 13 Record Actions. Below the tabs, the form is organized into three main sections:

- Infant:** Contains a text field for "Race" and a date picker for "Approximate Date of Birth (mm/dd/yyyy)".
- Place Found or Place of Birth:** Contains a dropdown menu labeled "Place found or place of birth inside city limits?" with "Select" as the current option.
- Person or Institution Placed for Care:** Contains several text fields: "Facility or Person Name", "Address (Street number and name)", "State" (with a dropdown menu showing "Select"), "City", and "Zip".

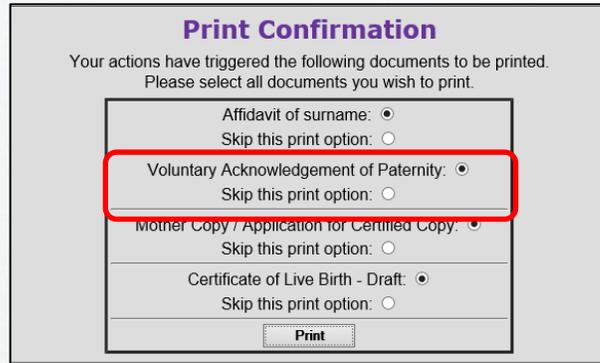
At the bottom right of the form, there are four buttons: "Previous", "Next", "Finish", and "Cancel".

Continue on additional tabs as you would for a birth without special circumstances. Please enter information in all open fields.

Printing a Pre-Populated VAoP

If the parents are not married or have not been married within 300 days prior to birth and they would like the father's name to appear on the birth certificate, it is necessary to complete a Voluntary Acknowledgment of Paternity (VAoP).

The VAoP can be printed from the *Successful Transaction* screen after saving a record.



Print Confirmation

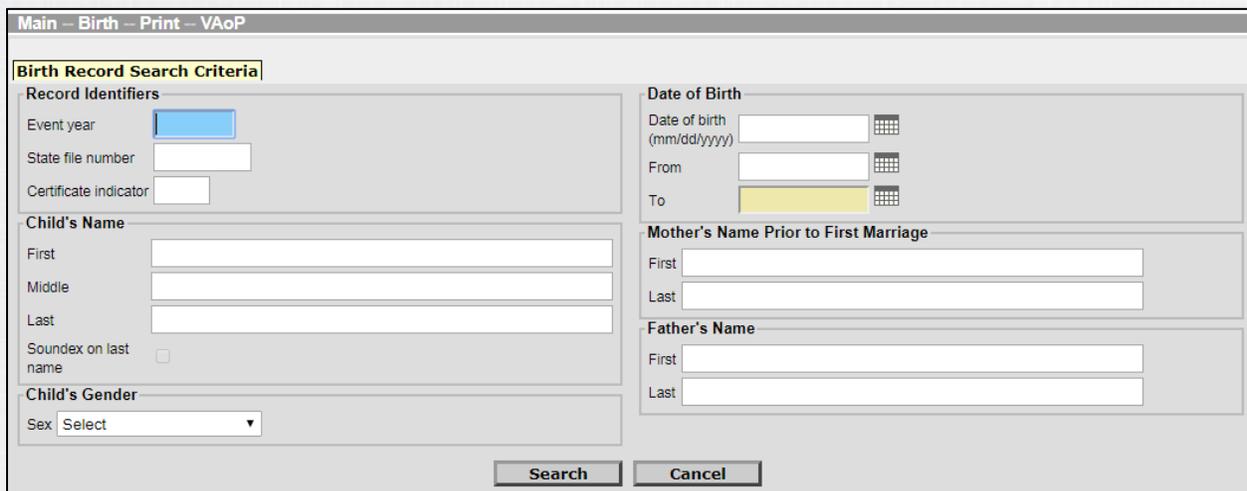
Your actions have triggered the following documents to be printed.
Please select all documents you wish to print.

| |
|---|
| Affidavit of surname: <input checked="" type="radio"/> |
| Skip this print option: <input type="radio"/> |
| Voluntary Acknowledgement of Paternity: <input checked="" type="radio"/> |
| Skip this print option: <input type="radio"/> |
| Mother Copy / Application for Certified Copy: <input checked="" type="radio"/> |
| Skip this print option: <input type="radio"/> |
| Certificate of Live Birth - Draft: <input checked="" type="radio"/> |
| Skip this print option: <input type="radio"/> |

The pre-populated VAoP can also be printed from the Main menu screen.

Follow these steps to access a VAoP with the pre-populated information from the electronic birth record.

Step 1: From the Main menu, click Birth → Print → VAoP



Main – Birth – Print – VAoP

Birth Record Search Criteria

| | |
|---|---|
| Record Identifiers | Date of Birth |
| Event year <input type="text"/> | Date of birth (mm/dd/yyyy) <input type="text"/> |
| State file number <input type="text"/> | From <input type="text"/> |
| Certificate indicator <input type="text"/> | To <input type="text"/> |
| Child's Name | Mother's Name Prior to First Marriage |
| First <input type="text"/> | First <input type="text"/> |
| Middle <input type="text"/> | Last <input type="text"/> |
| Last <input type="text"/> | Father's Name |
| Soundex on last name <input type="checkbox"/> | First <input type="text"/> |
| Child's Gender | Last <input type="text"/> |
| Sex <input type="text" value="Select"/> | |

Step 2: Enter information to locate the record that was already entered into the system and click "Search." (Not all fields are required to search. DOB and last name are suggested search parameters.)

Step 3: Click "Details" when record is located.

| Last Name | First Name | Middle Name | DOB | Mother's Maiden First | Mother's Maiden Last | County | State File Number | Certificate indicator | Status |
|-----------|------------|-------------|------------|-----------------------|----------------------|----------|-------------------|-----------------------|---------------|
| KILO | VICTOR | | 05/07/2018 | MARGIE | VANCE | ANDERSON | | | Not submitted |

Cancel

Step 4: Confirm that you have the correct record from the *Record Details* page and click "Continue" at the bottom of the page.

Method used for filing: 0
Child Adoption Flag: 0
Use delayed stamp flag: Y
Use modify flag: N
Flag for foundling and safe haven: N

Continue Cancel

Step 5: Click "Generate Document" to produce the printable PDF file with pre-populated information from the birth certificate. If you have any questions about completing the VAoP process, please call the TN VAoP Hotline at: 1-800-457-2165.

Print - VAoP

Main Menu Generate Document Repeat Task

Step 6: The completed VAoP must be mailed to:

Office of Vital Records.
710 James Robertson Parkway
Andrew Johnson Tower, 1st Floor
Nashville, TN 37243

All documentation must be mailed within five days of the birth in order to complete the registration in accordance with TCA §§ 63-3-301.

Duplicate Records

Whenever you start a record, VRISM uses the information entered to determine if the record may already exist. After the information has been completed on the first page and another page is opened, the system will inform you if any potentially matching records have already been started and saved.

| VRISM Warning | | |
|--|--------|---|
| Please verify this is not a duplicate record. | | |
| Criteria by which record was matched: | Module | Click a link to see existing record's details |
| Birth Duplicate Check (by name) (Record #1): | Birth | (Details) |
| <input type="button" value="IGNORE AND CONTINUE ENTRY"/> | | <input type="button" value="ABORT ENTRY OF RECORD"/> |

Click “(Details)” to view additional information for each listed record.

If you are **sure** that none of the listed records are the same as the one you are entering, click the “Ignore and Continue Entry” button to return to where you were on the birth form.

OR

If you are **not sure** if you want to continue to work on a listed record or create a new one, click the “Abort Entry of Record” button to return to the Main menu.

Rejected Records

Viewing a Rejected Record

Step 1: Click on the Rejected tab from the main menu.

Step 2: Click on "Process" to access the record.

| Last Name | First Name | Middle Name | DOB | Mother's Maiden First | Mother's Maiden Last | County | State File Number | Certificate indicator | Status | Action |
|-----------|------------|-------------|------------|-----------------------|----------------------|--------|-------------------|-----------------------|---------------|-----------------------|
| NOVEMBER | AUGUST | | 03/04/2019 | LACEY | NOVEMBER | ROANE | | | Not submitted | Detail Process |
| NOVEMBER | MARCH | | 03/04/2019 | LACEY | NOVEMBER | ROANE | | | Not submitted | Details Process |

Step 3: Open tab 13, Record Actions, and check the reason selected in the *State Review* section.

13 Record Actions

Filing Information
Registrar name: EDWARD G BISHOP III

State Review

Accept record

Reject/return record

Affidavit Sign date missing/incorrect

Father's affidavit signature missing

Minor parent - consent signature missing

Notary seal missing

VAoP missing

Other - See comment section

Rejection Date: 10/16/2018

Child's surname

Mother's affidavit signature missing

Notary signature missing

VAoP reprint needed

Whiteout/Crossout

Note: If *Other* is checked, another reason should be specified in the comments box on the same tab.

1 Baby and Mother | **2 Mother** | **3 Mother** | **6 Household and SSN Info** | **7 Birthplace** | **8 Pre**

Comments Among Users About Record

Comments: REJECTED FOR OTHER REASON, SHOWN IN THIS BOX

Re-filing Rejected Records

Add or modify the information as needed and click "Finish." Then click "File Record" on the *Successful Transaction* page and continue with the filing process.

If documentation needs to be adjusted, it will be mailed back to you and should be mailed back to the OVR within two days.

The screenshot displays a web interface for a 'Successful Transaction'. At the top, it states 'Your transaction has been saved successfully.' Below this is a 'Record Details' section with a table of information:

| | |
|-----------------------|------------|
| Child's first name | BABY |
| Child's last name | LIL |
| State file number | |
| Child's date of birth | 10/30/2018 |

Underneath the details is an 'Other Options' section with the text 'Following options are available:'. Two buttons are present: 'Return to Record' and 'File Record'. The 'File Record' button is circled in red. At the bottom of the page, there are two buttons: 'Main Menu' on the left and 'Repeat Task' on the right.

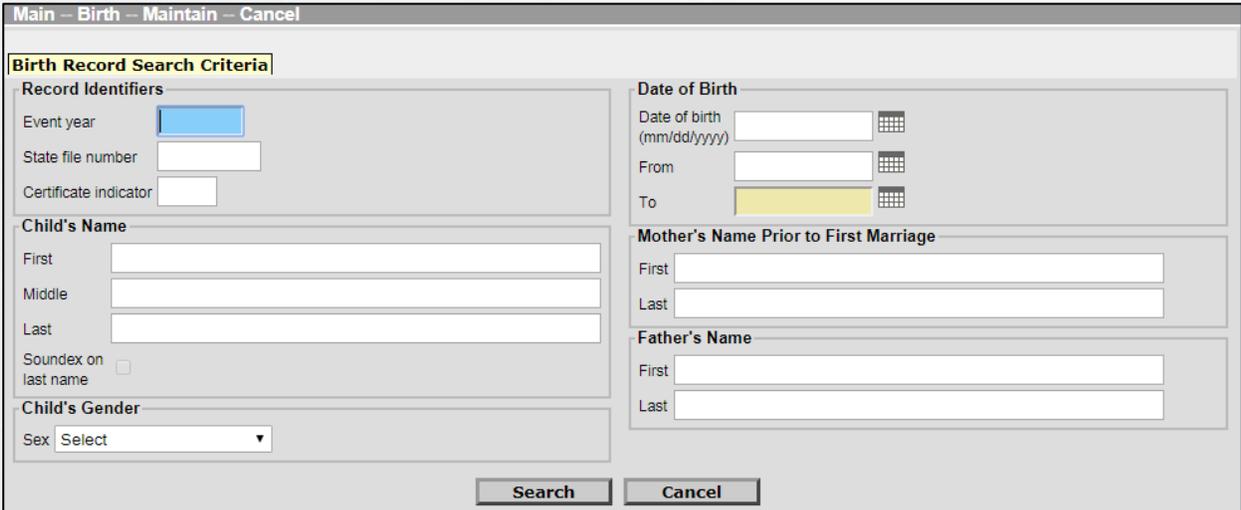
Note: Depending on why a record was rejected, you may not have to make any changes to the record. You may only need to re-print a VAoP of AoS, complete the form with all required information, and return it to the State within **two days**.

The time frame is a legal requirement, and is not extended based on records needing to be refiled. Your compliance with this time frame is both **mandatory** and **greatly appreciated**.

Cancelling an Unregistered Record

Records may need to be removed from the database before they are registered. This might be due to a duplicate entry of the same record. This can be done by cancelling the record.

From the Main menu, click Birth → Maintain → Cancel. Enter information to locate the desired record. (Not all fields are required to search.)

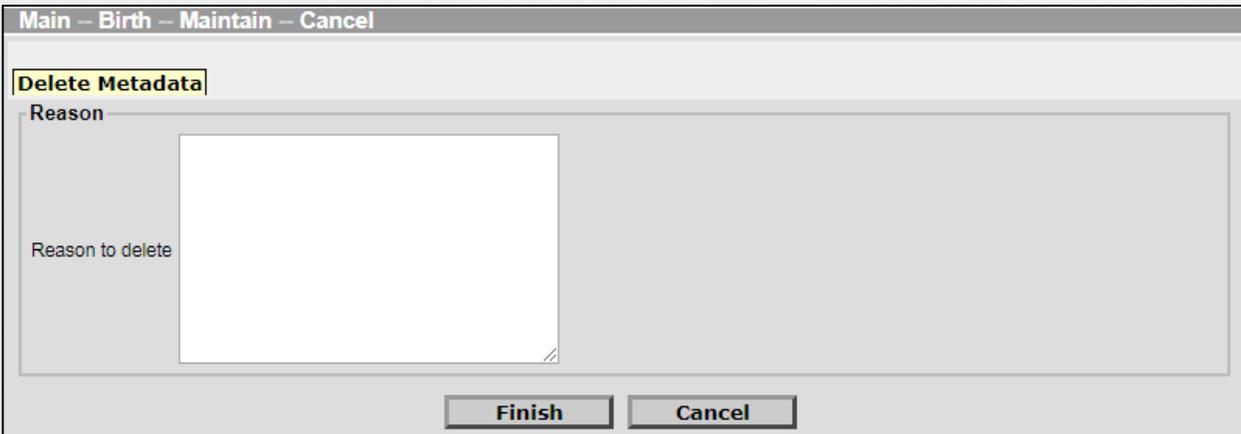


The screenshot shows a web application window titled "Main – Birth – Maintain – Cancel". The main content area is titled "Birth Record Search Criteria". It contains several sections for data entry:

- Record Identifiers:** Includes fields for "Event year" (with a blue highlight), "State file number", and "Certificate indicator".
- Child's Name:** Includes fields for "First", "Middle", and "Last" names, and a checkbox for "Soundex on last name".
- Child's Gender:** A dropdown menu for "Sex" with "Select" as the current value.
- Date of Birth:** Includes a "Date of birth (mm/dd/yyyy)" field with a calendar icon, and "From" and "To" date range fields, both with calendar icons.
- Mother's Name Prior to First Marriage:** Includes fields for "First" and "Last" names.
- Father's Name:** Includes fields for "First" and "Last" names.

At the bottom of the form are two buttons: "Search" and "Cancel".

Click "Details" to the far right of the name on the selected record.



The screenshot shows a web application window titled "Main – Birth – Maintain – Cancel". The main content area is titled "Delete Metadata". It contains a section for "Reason" with a large text area labeled "Reason to delete". At the bottom of the form are two buttons: "Finish" and "Cancel".

Enter a brief description as to why you are removing the record from the database in the *Reason to delete* field. Then click the "Finish" to confirm.

Frequently Asked Questions

- **“We have a new employee in our office. Can I just let them use my account to log into the system?”**

No, please have them complete a VRISM Access User Request & Agreement here: <https://apps.health.tn.gov/VRISMUserAgreement/UserAgreement/UserAgreement>. Once they have been registered, an email will be sent to their email address with their login information.
- **“When I’m logging in, I get a question I never set up. How do I answer the question?”**

Do not answer the question if you do not recognize it. Simply close the login window and click Login again on the VRISM Main Page. If this problem persists, ensure that you are entering your login information correctly; it is case sensitive (use shift key, not caps lock). You may also click the reset button when prompted to enter your username. If you have difficulty, please contact the help desk.
- **“How can I save my work?”**

It is important to keep in mind that clicking “Finish” takes you to a screen to save the record. The record should still be in your queue (it may be in another tab on your screen). If it is not in your queue, it is because it was completed/registered with the State. You may search for the record through the search menu option, but you will no longer be able to make changes to the record.
- **“Can I use VRISM in Google Chrome, Edge or Mozilla?”**

The VRISM system works best with Internet Explorer, which is the preferred choice. It also works well with Safari.
- **“How long do I have to file the record with the State?”**

All documentation must be mailed within five days of the birth in order to complete the registration in accordance with TCA §§ 63-3-301. If documentation needs to be adjusted, it will be mailed back to you and should be returned to the OVR within two days.
- **“How should the VAoP process be completed if the father is incarcerated?”**

The mother will have two days to have the father sign the document, have it notarized, and returned to the hospital. This will give the State the appropriate time needed to process the application and file the birth in accordance with the timeframe allotted in TCA §§ 63-3-301.

VRISM Assistance

For questions regarding the registration of birth records, such as VAoPs, legal name requirements, rejected records, and more, contact:

Registration Unit
(615) 645-1117

For questions regarding VRISM technical support, such as signing in or resetting security information, contact:

VRISM Help Desk
855.874.7686 · health.vrism@tn.gov

The Help Desk is open from 8:00 am-4:30 pm CST, Monday-Friday, and other times can be arranged with prior notice.

For further information, our online training can be viewed here:
<https://tnhealthdept.github.io/VRISM-EBRS-Training/>



**Thank you for your
service to the
citizens of TN.**