



Quick Guide—Physician

Password and ID Management



Visit the [SVRIS logon page](#) for instructions to create or update your SVRIS ID.

Contact the WI Help Desk for Password Reset or Recovery



1-866-335-2180



helpdesk@wi.gov

Logging Into SVRIS

1. Open your web browser and go to the [SVRIS logon page](#).
2. Select the green **SVRIS** button.
3. Enter your **Username** (Logon ID) and **Password**.
4. Select the **Logon** button.
5. Select on the **VRS_PROD icon** to load SVRIS.
6. Choose your location if applicable.
7. Select **OK** when the message about unauthorized access appears.

Completing the medical certification

1. From the SVRIS home screen, select the **Work Queue** menu and choose **Death MC In Progress**. This will display all the records that are assigned to you.
2. Double click the record to display. If you are in a physician group, to view only a specific physician's records, sort the list on the column for Certifier Name.
3. Select the **Cause of Death Tab** and complete the applicable fields.
4. Select the **Signatures tab** and enter a **Y** in the **Medical Information Complete?** and **Certifier Signed?** Fields.
5. Select **Save**.

Searching

1. From the SVRIS home screen, select the **Search** menu and choose **Death**.
2. Enter the search criteria. Multiple criteria can be used to search for the desired death record. In general, most searches are successful using the decedent's last name and date pronounced. Select the **Search button**.
3. On the **results tab**, SVRIS will retrieve all records that meet the indicated search criteria.
4. Highlight the desired record and then click the **Display button**.

Requesting amendments

1. In the record, select **File menu** then **New Death Amendment**. SVRIS will then create an amendment record that is linked to the death record. Maximize the screen.
2. In the amendment record, choose **Physician Amendment** in the Amendment Type field.
3. Go to the **Cause of Death tab**.
4. Enter the **new information** in the field that corresponds to the field with the incorrect information.
5. Go to the **Completion tab** and enter a **Y** in the **Amendment Request Complete** field and save.

Responding to queries

1. From the SVRIS home screen, select the **Work Queue menu** and choose **Query Amendment Request**.
2. **Select Display** and SVRIS will display the query record.
3. Read the message in the **Query Message field**.
4. Type your response in the Notes From Funeral Home/Medical Certifier OR go to the Cause of Death Tab and provide the requested information.
5. Go to the **Completion tab** and enter a **Y** in the **Amendment Request Complete** field and save.

Need more detailed instructions? See the [SVRIS - Physician User Training](#), a self-paced online tutorial.



Date of death

Enter the month, day and year of death. This is the medical certifier's approximation of the date when all vital signs of life ceased and is not necessarily the same as the date the decedent was legally pronounced dead. This date cannot be after the date pronounced dead. The date should be the same date, or at the most, one day before the date pronounced. If the exact date is unknown, give whatever information is available, and then use 9's for the unknown values. For example, if the day is unknown but the month and year are known, enter the month and year but indicate "99" for the day (11/99/1985).

Date of death (A=ACTUAL or E=ESTIMATED)

If the date of death indicated is the actual date enter A for actual. If the date of death indicated is an estimated date, enter E for estimated.

Time of death

Enter the time of death using the 24-hour clock. This is the medical certifier's approximation of the time when all vital signs of life ceased. This time cannot be after the time pronounced if the date pronounced is the same as the date of death. If the time is unknown enter 9999 for the unknown value.

Time of death (A=ACTUAL or E=ESTIMATED)

If the time of death indicated is the actual time, enter A for actual. If the time of death indicated is estimated, enter E for estimated.

Autopsy?

Please indicate "yes" if an autopsy was performed or indicate "no" if an autopsy was not performed. For the purposes of this item, an external evaluation does not constitute an autopsy. Partial autopsies are included in the "yes autopsy performed" category.

Did tobacco use contribute to death?

Valid responses for this item are "yes", "no", "probably" or "unknown". Check "Yes" if, in your opinion, the use of tobacco contributed to death. Tobacco use may contribute to deaths due to a wide variety of diseases; for example, tobacco use contributes to many deaths due to emphysema or lung cancer and some heart disease and cancers of the head and neck. Check "No" if, in your clinical judgment, tobacco use did not contribute to this particular death.

Did alcohol use contribute to death?

Valid responses for this item are "yes", "no", "probably" or "unknown". Check "Yes" if, in your opinion, the use of alcohol contributed to death.

Pregnancy status (If female)

Complete this item if the decedent is a female and between the ages of 5-75. If the decedent is male or female with an age of less than 5 or more than 75 years, the field will be defaulted to 'NOT APPLICABLE'. This information is important in determining pregnancy-related mortality.



Manner of death

Please select either natural or pending. If you are waiting to consult with the attending physician before completing the cause of death or waiting for the results of an autopsy or other tests, please indicate pending. If you believe the manner is accident, suicide, homicide or undetermined or this death involves any injury or trauma, contact your county's coroner or medical examiner immediately. Wisconsin state law does not allow physicians to certify these types of deaths.

Cause of death

The cause-of-death section consists of two parts. Part I is for reporting a chain of morbid events leading directly to death, with the immediate cause of death (the final disease, injury, or complication directly causing death) on Line A and the underlying cause of death (the disease or injury that initiated the chain of events that led directly and inevitably to death) on the lowest used line. Part II is for reporting all other significant diseases, conditions, or injuries that contributed to death but which did not result in the underlying cause of death given in Part I. The cause-of-death information should be YOUR best medical OPINION. A condition can be listed as "probable" even if it has not been definitively diagnosed.

Part I (Chain of events leading directly to death)

- Only one cause should be entered on each line. Line a MUST ALWAYS have an entry. DO NOT leave blank.
- If the condition on Line A resulted from an underlying condition, put the underlying condition on Line B, and so on, until the full sequence is reported. ALWAYS enter the underlying cause of death on the lowest used line in Part I.
- For each cause indicate the best estimate of the interval between the presumed onset and the date of death. The terms "unknown" or "approximately" may be used. General terms, such as minutes, hours, or days, are acceptable, if necessary. DO NOT leave blank.
- The terminal event (e.g., cardiac arrest or respiratory arrest) should not be used. If a mechanism of death seems most appropriate to you for Line a, then you must always list its cause(s) on the line(s) below it (e.g., cardiac arrest due to coronary artery atherosclerosis or cardiac arrest due to aortic valve disease).

Part II (Other significant conditions)

- Enter all diseases or conditions contributing to death that were not reported in the chain of events in Part I and that did not result in the underlying cause of death.
- If two or more possible sequences resulted in death, or if two conditions simultaneously resulted in death, report in Part I the one that, in your opinion, most directly caused death. Report in Part II the other conditions or diseases.

Changes to cause of death

If additional medical information or autopsy findings become available that would change the cause of death originally reported, the original death certificate should be amended by the medical certifier by immediately requesting an amendment in SVRIS. Follow the instructions on "Requesting Amendments."



Unacceptable medical certifications

Medical certifications with the following condition(s) may result in rejection by the funeral home, local vital records offices, or State Vital Records Office:

- Manner of death is not Natural or Pending
- Mention of trauma, injuries, poisoning, or external events that occurred at any time, in any part of the cause of death. By law, physicians cannot certify death records where trauma, injuries, poisonings, or external events (e.g., falls) contributed to the cause of death.
- Unacceptable Causes of Death- The following types of causes of death (and any synonyms of these conditions) are not acceptable when they appear as the sole cause(s) of death or in combination with each other (these terminal events have little value for public health or medical research):

Respiratory Arrest	Heart Failure (CHF is acceptable)	Natural Causes	Shock	Senility	Cardiac Failure
Cardiac Arrest	Cardiorespiratory Arrest	Age / Old Age	Cardiogenic Shock	Undetermined	Brain Death
Cardiopulmonary Arrest	Cardiopulmonary Failure	Senescence	Hemorrhagic Shock	Unknown	Asystole
Respiratory Failure	Cardiorespiratory Failure	Sudden Death			

Medical certification queries

Medical certifications containing any of the conditions listed below may generate a medical certification query. This is not an exhaustive list.

ABBREVIATIONS

Use of uncommon or ambiguous abbreviations may result in a query. Examples:

- Ambiguous: CRF - commonly used to indicate Chronic Renal Failure OR Cardiorespiratory Failure
- Uncommon: NRSTS - Non-Rhabdomyosarcoma Soft Tissue Sarcoma

ASPIRATION

Cause of death statements that report aspiration without specifying the underlying cause may result in a query. Without mention of an underlying cause, the mortality ICD10 coding will assign an ICD10 code that falls in an accidental choking category.

INCONSISTENT DATE/TIME OF DEATH

Dates and times that are hours and/or days before the pronouncement may result in a query. Typically, deaths occurring in a facility have dates and times near each other. (**Note:** The date and time of death must be before or equal to the date/time pronounced.) **Contact the funeral home if pronouncement date or time are incorrect.**

NEOPLASMS

Neoplasms not specifying malignant, benign, in-Situ, uncertain behavior, or unknown may result in a query.

POSSIBLE TRAUMATIC CONDITIONS

Possible traumatic conditions reported in the cause of death that do not specify the etiology, if not rejected, may result in a query to clarify traumatic or non-traumatic. ICD10 mortality coding assumes trauma unless stated otherwise.

SURGERIES, PROCEDURES, DRUG THERAPY

Surgeries, procedures, and drug therapy reported without specifying the reason for the surgery, procedure, or drug therapy may result in a query.

Surgery without reporting the date of the surgery may result in a query.

WOUNDS

Use of wound without specifying the type of wound (e.g., abscess, sore, ulcer, incision, etc.) may result in a query. If surgical wound, also specify the reason for surgery.

ICD10 mortality coding assumes wounds are traumatic unless stated otherwise.

PENDING

Ruling the manner and cause of death as pending will result in a query. Complete the query once the cause of death is known.

ILL-DEFINED CAUSE

Cause of death statements that report conditions considered to be symptoms, signs, trivial, and/or abnormal findings **without an underlying disease condition specified** may result in a query. (See Unacceptable Medical Certifications chart above).