

Appendix A - Alerts Glossary

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
1	If tracking events 41, 62, 84, 85, 87, 88, 91, 93, 94, 95, and 96 are entered, then an alert will be sent to the PDC.	We have taken this case off of your inventory. Please notify the genetic counselor.	20		Follow-up Center - PDC - Appt. Scheduler
2	The user can then add a new special payment and authorize/deny it.	Service authorized. Please notify the genetic counselor.	62		Follow-up Center - PDC - PSR Contact
3	The user can then add a new special payment and authorize/deny it.	Service denied. Please notify the genetic counselor.	62		Follow-up Center - PDC - PSR Contact
4	An entry of "No Show " will trigger an alert to the CCC.	Patient appointment no show. Please follow up.	64		All CCC Security Groups for PNS
5	An entry of "Cancelled" will trigger an alert to the CCC.	Patient appointment cancelled. Please follow up.	64		All CCC Security Groups for PNS
6	Every 6 days after the case is first referred (using tracking events 42 or 46), all appointments that have been referred to the PDCs, but have not yet been scheduled on Screen 64 will be sent as an alert to the CCC in order to monitor.	Appointment has not been scheduled. Please follow-up.	64		Coordinator Center - PNS - Administrator and Clinical
7	Every 5 days (using tracking events 42 or 46), an alert will be sent to the PDC if an appointment has not been scheduled.	Appointment has not been scheduled. Please follow-up with coordinator.	64		Follow-up Center - PDC - Appt. Scheduler
8	When a tracking event is invoked (numbers 41, 84, 85, 87, 88, 91, 93, and 94) and a case has been taken off of Screen 78, this alert is sent to the PDC.	We have taken this case off of your inventory.	78	This is a duplicate of alert 1.	Follow-up Center - PDC - Appt. Scheduler
9	the 15 day period of stagnation for NBS (i.e.-the case has not been scheduled more than 15 days after the accession date), an alert will be sent to the case	This case is over 15 days old. Please investigate.	78		All Coordinator Center - NBS Security Groups and NBS - Monitor
10	When coordinator changes the interpretation for a case after it has been referred, an alert is sent to the follow-up center.	Please note that one or more interpretation factors have changed for this case since first referred. Please notify the genetic counselor.	6		Follow-up Center - PDC - Appt. Scheduler

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
11	When PDC attempts to change interpretation factors on a case, and they have not entered an appointment	Please enter appointment information in the "Enter and View Appointment Information Screen" before sending for review.	6	Actually a warning. Now warning 64.	N/A
12	When an appointment is scheduled earlier than referral. This is an attempt to mitigate AMA (advanced maternal age) clients.	The date of the appointment must be at least one day past the accession date to ensure that the referral is appropriate.	64	This alert will not be necessary due to the PDCs not being able to schedule AMA patients	N/A
13	When there is no choice but to schedule a non-XAFP patient and to alert the coordinators of this fact.	This is a non-XAFP patient. Please call.	64	This alert will not be necessary due to the PDCs not being able to schedule AMA patients	N/A
14	This is triggered to the GDB Monitor when a case with an inadequate status gets test results.	Inadequate specimen with value	161		PNS - Administrator/ Monitor
15	This is invoked when one or more inconsistencies are flagged for a given PSR on a Monitor alert screen.	Inconsistencies related to PSR	72, 162		QA - Monitor
16	After PDC changes and sends interpretation factors for review to the CCC, this message is invoked on the CCC screen	Changes sent from PDC for review	6		Coordinator Center - PNS - Administrator and Clinical
17	After CCC has accepted/declined the changes from the PDC upon reviewing the PDC entry, this is sent as an alert to the PDC	Coordinator review of the changes completed	6		Follow-up Center - PDC - Genetic Counselor
18	For NBS, when the posted Hb value is "A" only, the CCC receives this alert.	Hb "A" only. Please investigate.	225		All Coordinator Center - NBS Security Groups
19	Situations in which the coordinator has not triggered a mailer after having changed interpretation factors.	This case has changed interpretation factors, but a mailer has not been triggered. Would you like to send a mailer or enter tracking events?	20		Coordinator Center - PNS - Administrator and Clinical
20	When an outcome of pregnancy form comes in and it is a duplicate	Resolve duplicate outcome form	115		PDES - Staff - Outcome

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
21	When an outcome of pregnancy form comes in and it is incomplete. Specifically, if cytogenetic specimen number and lab number are missing and a chromosomal abnormality checkbox is invoked.	Resolve incomplete information on outcome form	115		PDES - Staff - Outcome
22	When an outcome of pregnancy form comes in and there is missing information. See business rules on s. 115.	Resolve missing information on outcome form	115		PDES - Staff - Outcome
23	When an outcome of pregnancy form comes in and there is inconsistent information	Resolve inconsistent outcome information	115	Only in situations where there are more fetuses than results reported on the outcome.	PDES - Staff - Outcome
24	When an outcome of pregnancy form comes in and an alternate provider has been entered	Send outcome form to alternate provider	115		PDES - Staff - Outcome
25	When an expected redraw comes in, this alert is sent to the coordinator to close the previous case.	Redraw obtained. Close case.	6		Coordinator Center - PNS - Administrator and Clinical
26	When an expected redraw comes in, and the 2nd case is screen positive, send this to the 1st case	Redraw received is screen positive. See linked case.	6		Coordinator Center - PNS - Administrator and Clinical
27	When an expected redraw comes in, and the 2nd case is screen positive, send this to the 2nd case	This screen positive result is linked to a previous case See related case.	6		Coordinator Center - PNS - Administrator and Clinical
28	If second NBS recall case is a "headline" case, this alert is written to the first case.	Recall obtained and is an interesting case. See related case.	225		All Coordinator Center - NBS Security Groups
29	If the first case is a headline case and an unexpected redraw is linked to it subsequently, write this alert to the first case.	Unexpected redraw received. See linked case.	6		Coordinator Center - PNS - Administrator and Clinical

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
30	When an outcome of pregnancy survey comes in and the number of fetuses is discrepant from that of the PNS TRF or linked NBS case (if applicable)	Resolve discrepant number of fetuses on outcome	115		PDES - Staff - Outcome
31	When an abnormal outcome has come in on the outcome of pregnancy form	Abnormal outcome reported on outcome form. Please indicate specific abnormality.	115	Specific abnormality already included on new outcome form.	PDES - Staff - Outcome
32	Alert to the GDB monitor when new information comes in for a registry. A "nice to have" feature is for the user to be directed to Screen 17 if it is a DC form, Screen 10 if duplicates need to be resolved, or Screen 199 to consolidate. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	New PKU registry information received	162		PDES - Staff - Registry - PKU
33	Alert to the GDB monitor when a new case comes in from an outcome survey. A "nice to have" is a redirect to Screen 199. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	New chromosome registry case from outcome survey	162		PDES - Staff - Registry - Chromosome
34	Alert to the GDB monitor when a new registry case comes in from a PSR. A "nice to have" is a redirect to Screen 199. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	New chromosome registry case from a PSR	162		PDES - Staff - Registry - Chromosome
35	Alert to the GDB monitor when a second registry case comes in from a PSR. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	Chromosome registry case from a second PSR	162		PDES - Staff - Registry - Chromosome

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
36	When a phe monitoring case comes in, the metabolic center receives this alert	View phe monitoring results	162		Follow-up Center MC, All Security Groups
37	If an appointment is scheduled, and the appointed date and time passes, and a predefined time period goes by without a change in appointment status (2 days), this alert is invoked for the follow-up center.	Appointment date and time has passed. Please update appointment status.	64		Follow-up Center - PDC - Appt. Scheduler
38	If a case has achieved 21 weeks' gestation and is awaiting a redraw.	21 weeks' gestation achieved and case is awaiting redraw.	161		Coordinator Center - PNS - Administrator and Clinical
39	If a site visit is scheduled in 30 days' time, an alert should be sent to the QA Monitor.	Site visit is scheduled in 30 days at a PDC. Please notify the PDC Director.	94		QA - Monitor, Follow-up Center - PDC - PDC Appointment Scheduler
40	After hemoglobin results are confirmed by the consulting hematologist, SCCC will get this alert for the case	Hemoglobin results are posted.	70		Follow-up Center - SCCC - All Security Groups
41	If a phe monitoring case comes in, the appropriate MC will get this alert	Phe monitoring case has arrived	162		Follow-up Center - MC - All Security Groups
42	If a potential match found for previously existing clients, this alert will be generated to the ccc with the following alert text	Potential Matching for Client. Please follow up	161, 225		Coordinator Center - PNS - Administrator and Clinical, All Coordinator Center - NBS Security Groups
43	If a mailer has not been generated for a headline PNS case by the 2nd day of its being downloaded onto the coordinator inventory, this alert will be generated.	Mailer not yet generated on 2nd day of headline case.	161		Coordinator Center - PNS - Administrator and Clinical
44	10 - When a user tries to merge two clients. 211 - When a user tries to link two accession numbers that are belong to two separate clients, the system will first have to merge the clients and then link the accession numbers.	Once clients have been merged they can not be unmerged, please confirm that you want to continue with the merge	10,211	This is actually a warning; now warning 65.	
45	98a tracking event invoked and alert sent to PDES-Staff-Registry-NTD. Same user alerted for alerts 45-60.	Anencephaly case detected by a coordinator	20		PDES - Registry - NTD

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
46	98b tracking event invoked	Open spina bifida case detected by a coordinator	20		PDES - Registry - NTD
47	98c tracking event invoked	Closed spina bifida case detected by a coordinator	20		PDES - Registry - NTD
48	98d tracking event invoked	Encephalocele case detected by a coordinator	20		PDES - Registry - NTD
49	98e tracking event invoked	Craniorachischisis case detected by a coordinator	20		PDES - Registry - NTD
50	98f tracking event invoked	Inencephaly case detected by a coordinator	20		PDES - Registry - NTD
51	98g tracking event invoked	Rachischisis case detected by a coordinator	20		PDES - Registry - NTD
52	98h tracking event invoked	Other NTD case detected by a coordinator	20		PDES - Registry - NTD
53	98i tracking event invoked	Gastroschisis case detected by a coordinator	20		PDES - Registry - NTD
54	98j tracking event invoked	Omphalocele case detected by a coordinator	20		PDES - Registry - NTD
55	98k tracking event invoked	AWD non-specified case detected by a coordinator	20		PDES - Registry - NTD
56	98l tracking event invoked	Trisomy 21 case detected by a coordinator	20		PDES - Registry - Chromosome
57	98m tracking event invoked	Trisomy 18 case detected by a coordinator	20		PDES - Registry - Chromosome
58	98n tracking event invoked	Other chromosomal defect case detected by a coordinator	20		PDES - Registry - Chromosome
59	98o tracking event invoked	SLOS case detected by a coordinator	20		PDES - Registry - Chromosome
60	98p tracking event invoked	Other major defect case detected by a coordinator	20		PDES - Registry - Chromosome, NTD
61	If number of fetuses on an outcome form do not equal the number of fetuses received in a single batch.	Fetuses on an outcome form different than forms received	115	If the forms are redesigned to be fetus-specific, this may not be necessary	PDES - Staff - Outcome
62	When a case has reached 21 weeks' gestation and tracking event/status (invoked by tracking event 62) indicates that it is awaiting a redraw. The alert goes to the CCC	Case reached 21 weeks' gestation and no expected redraw has been linked	161	Delete. Same as 38.	N/A
63	When confirmatory positive comes in for PKU, galactosemia, or hypothyroidism, the alert is sent to the NBS CCC pertaining to the case	Recall result is positive	225		Coordinator Center - NBS - All Security Groups
64	When an early mailer is sent out regarding a case, the CCC receives this alert.	Early collection mailer sent			Coordinator Center - NBS - All Security Groups

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
65	If 30 days after an NBS-OH has been referred to a CCC, it is still on headline case listing (Screen 225), the CCC receives this alert	NBS-OH referral is 30 days old			Coordinator Center - NBS - All Security Groups
66	When the days difference between headline case date/time and date/time called to MD/Hospital (tracking events 1-16) > 2 days (or >1 day for galactosemia and CAH), the NBS follow-up monitor sees this alert	Delay in reporting for this case			NBS - Monitor
67	When a CCC receives >10 NBS-MR referrals from the same NBS collection facility in a single day the CCC and the NBS follow-up monitor receive this alert.	Excess NBS-MR requests from one facility. Please investigate and report to liaison.			NBS Staff - Form Monitor, Coordinator Center - NBS - All Security Groups
68	When a CCC receives a NBS-MR referral > 30 days old (difference between the newborn's DOB and the NBS-MR referral date), the CCC and the NBS follow-up monitor receive this alert.	Delayed NBS-MR request. Please investigate and report to liaison			NBS Staff - Form Monitor, Coordinator Center - NBS - All Security Groups
69	When no Hb recall specimen has been entered 30 days after lab kit sent (tracking event), SCCC receives this alert.	No specimen received.			Coordinator Center - NBS - All Security Groups
70	When a final Hb trait follow-up lab report has not been approved by the reviewing MD 27 days after the blood was received (based on recall accession number julian day), the SCCC receives this alert. Tracking event 156 represents approval by the MD.	Lab report not received.			Follow-up Center - SCCC - All Security Groups
71	When there is insufficient provider information on a PNS screen negative case such that the result mailer becomes "unmailable", this alert is generated to PNS - Staff - LTR Clerk	Clinician or patient address is invalid from TRF entry.	162		PNS - Staff - LTR Clerk

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
72	When a redraw of an initial early or inadequate comes in and is linked to the initial, this alert is sent to the CCC	Repeat linked	225		Coordinator Center - NBS - All Security Groups
73	When a recall of positive comes in, this alert is sent to the CCC	Recall entered	225		Coordinator Center - NBS - All Security Groups
74	When a recall result(s) post to the record, this alert is sent to the CCC	Recall results posted	225		Coordinator Center - NBS - All Security Groups
75	When a case is placed on the NBS coordinator inventory as a headline case through the entry on Screen 15, and the case is later found to be screen negative (usually due to the lab's making an initial mistake in identifying the positive TRF), the alert is invoked for that accession number that resides on the coordinator inventory.	Lab result is now negative and contrary to CofC. Please confirm call out of initial result with NAPS lab	225		Coordinator Center - NBS - All Security Groups
76	This alert will be sent to the GDB Monitor responsible for each of these upload functions. This will be invoked if there are any errors within the data for the upload file.	Errors found in uploaded quarterly reports file. Please check error log.	76, 119, 117, 110		PDES - Staff - Quarterly Reports (S. 76)
77	Alert invoked when incomplete information on Outcome Survey is returned	Outcome with incomplete information. Please Review	115	Delete. Same as 21.	N/A
78	Alert invoked when karyotype is changed on screen 228	Karyotype changed. Please Review	228		PDES - Staff - Registry - Chromosome
79	When the case is approaching 24 weeks gestational age. This alert will be invoked at 23 weeks 0 days.	Case approaching 24 weeks gestational age	161		Coordinator Center - PNS - Administrator and Clinical; Follow-up Center - PDC - Appt. Scheduler
80	When a user fills out the NBS -DC form an alert goes out to the monitor to review it before adding it to the registry.	An NBS-DC form has been filled out for the following client : Client ID	17	Superseded by Alert 32. Not needed.	?
81	When a new case has been referred to a given follow-up center, this alert is sent to the follow-up center	New case referred	78		Follow-up Center - PDC - Appt. Scheduler

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
82	The DDL choices for Screen 208 are Resolved - No Identified Disorder, Resolved - Disorder - Please Indicate, Pending. The alert will be generated for the assigned CCC the first time the metabolic center resolves a case as Resolved - No Identified Disorder or Resolved - Disorder - Please Indicate.	New Resolved Status on Metabolic Center Services Reporting Form	208		Coordinator Center - NBS - All Security Groups
83	This alert is to the new CCC when the case is reassigned to a given CCC.	Case reassigned to new CCC.	228		Coordinator Center - NBS - All Security Groups for NBS type cases; Coordinator Center - PNS - All Security Groups for PNS type cases
84	This alert is invoked when the "Save Audit List and Send to Follow Up Center" button is invoked.	A site visit has been scheduled. You may view the list of cases that will be examined for this audit. Please give the list to the PDC Director.	94		Follow-up Center - PDC - Appt. Scheduler
85	This alert has been invoked when a second outcome survey has come in and one "active" outcome record needs to be identified.	Second outcome of pregnancy survey has been received. Please determine which record is the "active" record.	115		PDES - Staff - Outcome
86	This alert will be invoked when the form number is inconsistent with the hospital legacy code.	"I" number on the TRF differs from the hospital code on the TRF.	NBS Determination Batch		NBS - Monitor
87	This alert will be invoked by the PNS gestational age calculator every time gestational age is calculated.	Partial panel, 21 weeks, and redraw not obtained. Change adequacy status and interpret case."	PNS Workflow		Coordinator Center - PNS - Administrator and Clinical
88	The abnormalities on the outcome form that will trigger entry into the NTD registry are as follows: anencephaly, craniorachischisis, encephalocele, inencephaly, rachischisis, or spina bifida (open, closed, and unspecified).	New NTD registry case from outcome survey	Outcome Batch		PDES - Staff - Registry - NTD

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
89	Alert to the GDB monitor when new information comes in for a registry. A "nice to have" feature is for the user to be directed to Screen 17 if it is a DC form, Screen 10 if duplicates need to be resolved, or Screen 199 to consolidate. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	New endocrine registry information received	162		PDES - Staff - Registry - Endocrine
90	Alert to the GDB monitor when new information comes in for a registry. A "nice to have" feature is for the user to be directed to Screen 17 if it is a DC form, Screen 10 if duplicates need to be resolved, or Screen 199 to consolidate. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	New galactosemia registry information received	162		PDES - Staff - Registry - Galactosemia
91	Alert to the GDB monitor when new information comes in for a registry. A "nice to have" feature is for the user to be directed to Screen 17 if it is a DC form, Screen 10 if duplicates need to be resolved, or Screen 199 to consolidate. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	New hemoglobin registry information received	162		PDES - Staff - Registry - Hemoglobin
92	Alert to the GDB monitor when new information comes in for a registry. A "nice to have" feature is for the user to be directed to Screen 17 if it is a DC form, Screen 10 if duplicates need to be resolved, or Screen 199 to consolidate. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	New MS/MS registry information received	162		PDES - Staff - Registry - MS/MS

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
93	Alert to the GDB monitor when a new registry case comes in from a PSR. A "nice to have" is a redirect to Screen 199. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	New NTD registry case from a PSR	162		PDES - Staff - Registry - NTD
94	Alert to the GDB monitor when a second registry case comes in from a PSR. The user will be able to inspect if there is any missing data when they navigate to the appropriate screen.	New NTD registry case from a 2nd PSR	162		PDES - Staff - Registry - NTD
95	This alert will be sent to the GDB Monitor responsible for each of these upload functions. This will be invoked if there are any errors within the data for the upload file.	Errors found in uploaded HIPAA information file. Please check error log.	76, 119, 117, 110		PDES - Staff - Extended Surveys (S. 119)
96	This alert will be sent to the GDB Monitor responsible for each of these upload functions. This will be invoked if there are any errors within the data for the upload file.	Errors found in uploaded outcome survey file. Please check error log.	76, 119, 117, 110		PDES - Staff - Outcome (S. 117)
97	This alert will be sent to the GDB Monitor responsible for each of these upload functions. This will be invoked if there are any errors within the data for the upload file.	Errors found in uploaded cytogenetic lab file. Please check error log.	76, 119, 117, 110		PDES - Registries - Chromosome, NTD (S. 110)
98	Alert to the GDB monitor when a new chromosomal registry case comes in from a CCR. .	New chromosome registry case from a CCR	162		PDES - Staff - Registry - Chromosome
99	When a NBS headline case is not a headline case, and the initial address validation of the clinician or patient address fails.	Clinician or patient address is invalid from TRF entry.	162		NBS - Staff - LTR Clerk
100	When a NBS headline case is a headline case, and the initial address validation of the clinician or patient address fails.	Clinician or patient address is invalid from TRF entry.	225		Coordinator Center - NBS - All Security Groups

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
101	When a PNS headline case is a headline case, and the initial address validation of the clinician or patient address fails.	Clinician or patient address is invalid from TRF entry.	161		Coordinator Center - PNS - All Security Groups
102	SIS will create an alert for all cases where a comparison between the interpretation transmitted by the lab and interpretation calculated by SIS differs. This alert will be sent to the GDB and GDL monitor.	Difference between lab and SIS interpretation. Please investigate and resolve.	162		NBS Monitor and GDL - QA Chemist and GDL - Senior Staff
103	SIS will create an alert for all headline cases where a lab CofC was expected but was not received. This alert will be sent to the CCC once test results are posted to the record.	Lab confirmation of contact not entered.	225		Coordinator Center - NBS - All Security Groups
104	SIS will send an alert to the registry monitor if a metabolic center services report is entered or modified for a case with a registry status of "certain", "probable", or "tentative."	New metabolic services information entered.	208		PDES - Staff - Registry - MS/MS, Galactosemia, and PKU
105	SIS will alert the CCC when the interpretation of the case is changed from "review."	Interpretation of the case changed from "review."	?		Coordinator Center - NBS - All Security Groups
106	SIS will alert the MSMS Reviewer, NBS Monitor, and PDES Administrator of cases where "review" is overdue based on a time-based parameter.	Resolution of MSMS review past due. Needs immediate attention.	162		NBS Monitor, MSMS Reviewer, and PDES Administrator.
107	SIS will provide an alert and a report to notify to GDL when the second-tier CAH results for an accession number are incomplete.	Second-tier CAH results are incomplete.	162		NBS Monitor and GDL Monitor/Chemist
108	SIS will provide an alert and a report to notify to GDL when the MSMS results for an accession number are incomplete.	MSMS results are incomplete.	162		NBS Monitor and GDL Monitor/Chemist
109	SIS will generate an alert to GDL and the NBS Monitor if the second-tier test results are overdue based on a time-based parameter.	Second-tier CAH results are past due. Please investigate and resolve.	162		NBS Monitor and GDL Monitor/Chemist

Alert Tag No.	Nature of the Alert	Alert Text	Screen No.	Status	Destined Security Group
110	When tracking event #149 is fired.	Referral as an anomalous made.	20		NBS Monitor and NBS Follow up Staff
111	When NTD registry information comes in from CCR, cytogenetic upload, or birth defects monitoring program.	New NTD registry information received from CCR, cytogenetic upload, or birth defects monitoring file upload.	108		PDES - Staff - Registry - NTD
112	When hospital code on the TRF is different from the entity legacy code associated with the hospital	Hospital code on the TRF different than the hospital that received the form number.	162		NBS Monitor
113	Where the amino acid panel is early or missing information and there is a positive within the panel.	Early or missing information entered for the positive amino acid panel.	162		Coordinator Center - NBS - All Security Groups
114	This is when confirmatory test results have been entered via screen 16 and the case is an MS/MS positive.	Confirmatory test results have been entered.	162		Coordinator Center - NBS - All Security Groups and NBS Monitor
115	When an NBS form is matched to another NBS form, and that first NBS form is a headline case.	NBS Form Has Been Matched	225		Coordinator Center - NBS - All Security Groups
116	When an unexpected second-tier test result is received from the interface file.	Unexpected second-tier result sent.			NBS Monitor, GDL - Senior Staff, IT - All Security Groups
117	When multiple client matches are returned when a registry upload file is done. This should work exactly like alert 42, but destined for a different security group.	Potential client match found. Please resolve.	Cytogenetic upload		PDES - Staff - Registry - NTD and PDES - Staff - Registry - Chromosome

Appendix B - Warnings Glossary

Warning Tag No.	Nature of the Warning	Warning Text	Screen No.	Status
1	View table of tracking events and diaried events, then a warning appears.	Please select a Tracking Event unless you wish to send out a modified mailer.	20	Superseded by Warning 8
2	These are instances in which the date is in the future. Can be overridden by the user.	Cannot enter a future date.	62, 117, 115, 72	
3	When an appointment is scheduled for a gestational age that has reached the 24 week maximum, a warning will appear.	Gestational age is over 24 weeks. Special authorization required.	64	
4	When the PDC attempts to change any information for a case that is assigned to it, and no appointment has been entered as "scheduled" or "kept", a warning will appear.	Please put in appointment information in 'Schedule and View Appointment Information' before you modify case information.	64	
5	When the user attempts to enter a tracking event and it is not appropriate to the interpretation	This tracking event seems inappropriate to interpretation. If appropriate, Save. If inappropriate, Cancel.	20	
6	Instances in which a coordinator from one center is attempting to update case information assigned to another center	This case is assigned to another case coordination center. Do you want to continue?	6	
7	This is a data entry warning that will be invoked if someone attempts to enter an appointment beyond regular business hours.	The recommended appointment times are between 08:00 and 17:00. Do you wish to continue?	64	
8	This situation captures that of a coordinator changing interpretation factors and wishing to send out a mailer. The override of this warning will allow the mailer (or fax, in the case of NBS) to be sent.	You have entered no tracking events. Do you want to send a result mailer to the clinician? Yes or No.	20	
9	When a PDC prints a screen using the PDC Print button on Screen 202, and a case coordinator attempts to change interpretation factors on Screen 6, the warning appears. They will be able to override and finish entering the data on Screen 6.	PDC has already printed out the case summary. Please call PDC.	6	This warning will not be needed as the PDC Print button functionality cannot be provided.
10	This warning will appear when a user attempts to invoke "appointment kept" as a warning.	Are you sure the appointment has been kept?	64	
11	This warning will appear when a user attempts to enter a PSR and the patient is not one assigned to that given PDC. The PDC will not be able to enter the data for that patient.	This accession number does not match an accession number to your PDC. Please verify with your case coordinator center.	72	This warning will not be needed if indeed the PDC cannot access PSRs for cases that are not referred to it.

Warning Tag No.	Nature of the Warning	Warning Text	Screen No.	Status
12	This warning will appear when a date is erroneously entered in the future	The date you entered is in the future. Do you wish to continue?	62, 72	This warning has been superceded by Warning 2.
13	This warning will appear when the date search range is much too broad.	Please use search criteria of no more than 3 months' interval	197	
14	This warning is invoked when a reassignment of a case coordination center is occurring and no center is selected.	You must choose a new case coordination center to proceed.	171	
15	This warning is invoked when someone attempts to find the quarterly report submissions of greater than 5 years' time.	Please use search criteria dating back to no more than 5 years ago.	221, 88	
16	This is for screens in which a follow-up center code is required.	A valid follow-up center code is required. Please enter.	88	
17	Situations in which the user is searching by date parameters	You must enter a "from" and "to" date to complete your search. Please enter.	88	
18	In situations of submission of a quarterly report	Please ensure the PDC Director reviews the report before you submit it.	196	
19	This is used in situations where a year needs to be entered.	This year is not valid. Please reenter.	196	
20	This is used for screens in which totals added up by SIS are different when different totals are requested on the same screen and a form is attempted to be submitted.	Your "grand total", "total race/ethnicity", and "total residence" differs. Please review and re-submit.	196	
21	Used when an electronic file is uploaded and GDB does not recognize the format as one that can be integrated into the database.		76, 117	This warning is not needed as the batch program will instead run independently and generate alert 76.
22	Warning message in the event no fields are filled out on the audit results form.	No fields are filled out. If you save, no deficiencies will be reported.	210	
23	This is used for those who attempt to submit the PSR and they have not saved it for the first set of inconsistency and validation checks to be performed.	Please press "Save" before you press "Submit."	72	
24	When a validation check on an outcome of pregnancy survey reveals a different number of fetuses than the PNS TRF	Number of fetuses are different than case record. Please verify.	115	
25	When pregnancy information is left blank on an outcome form	Please complete pregnancy outcome field.	115	
26	When "unknown" is selected for whether or not any abnormalities are present and the alternate provider information is not present	Please complete the alternate provider field, if available.	115	

Warning Tag No.	Nature of the Warning	Warning Text	Screen No.	Status
27	When a fetus from an outcome form has any significant abnormalities	You have selected "yes" for abnormalities. Are you sure?	115	
28	When chromosomal abnormality is checked, but there is no data in cytogenetic lab number or specimen number fields	You have selected a chromosomal abnormality. Please enter the lab number and specimen number.	115	
29	When a "date of discharge" is not entered on the NBS-NO form	Please enter a date of transfer or discharge	129	
30	Instances in which a data entry operator attempts to check more than one box when options are mutually exclusive	You may only check one box	129	
31	When the last name is not entered	Please enter last name.	136	
32	This is for a situation when either of the two options should be selected on a form.	You must check either "Was this a home birth?" or enter the hospital name of birth.	136	
33	This is the field where name of signee may be entered.	Last name of Signee is not entered. Please enter last name of signee.	136	
34	When the address is not entered	Please enter address.	135	
35	When the city is not entered	Please enter city.	135	
36	When the zip code is not entered	Please enter zip code.	135	
37	When the date of birth is not entered	Please enter date of birth	135	
38	When birth weight is nonsensical	Birth weight should not be more than 5000 grams.	135, 132	
39	When there is an entry of a test being performed but the location of that test is not completed.	Please enter the location of the test performed.	135	
40	When no form types are selected on the NBS forms search screen.	Please enter the form type to proceed.	132	
41	When a user enters a time outside of the parameter of military time (0000-2359)	Please enter a time between 00:00 and 23:59 to proceed	132	
42	When information is entered into the HIPAA table, and one of the mandatory fields has not been entered.	Please enter all mandatory fields (those with an asterisk)	119	
43	When an upload function is unsuccessful.	Your upload was unsuccessful. Please check your file format. Alternatively, one or more accession numbers uploaded may be invalid.	119, 76	
44	When an upload function is successful.	Your upload was successful.	119	
45	When a user attempts to upload more accession numbers to a HIPAA table, and at least one is a duplicate of numbers that have already been uploaded	One or more of the accession numbers you attempted to add is a duplicate of an already-uploaded accession number. Do you wish to continue?	119	
46	When a user's search returns too many results (in this case, 50 is the cap on records retrieved)	The search has returned results over the maximum allowed. Please refine your search.	122	
47	When neither a county nor other registrar jurisdiction is entered on the NBS-OH form	Please enter a county or other registrar jurisdiction.	135	
48	When a metabolic center code needs to be added for a referral.	Please select a metabolic center.	64	

Warning Tag No.	Nature of the Warning	Warning Text	Screen No.	Status
49	This scenario is when the coordinator has changed interpretation factors. A "Yes" would take the user to Screen 20. A "No" would keep the user at Screen 6.	You have saved changes to interpretation factors. Do you want to send a mailer or enter tracking events?	6	
50	This warning would be invoked when a PDC attempts to upload two quarterly reports in the same quarter.	This PDC has already uploaded a quarterly report for this quarter. Please do not upload another report until the next quarter.	76	
51	If a user is entering information on Screen 72 where information necessitates a user-defined "Add to Grid" after tabbing beyond the fields in that section, this warning will appear.	Please press "Add to Grid" to save the information.	72	
52	When a user tries to merge to clients they will get this warning message	Once clients have been merged they can not be unmerged, please confirm that you want to continue with the merge	10	
53	If there is no "secure fax number" present as a "active" in the entity's telecom information, then the person who invokes the fax will receive the warning message. That person will not be able to send the fax until the secure fax number is completed within the Entity Screen 181.	No "secure fax number" present. Please contact provider for secure fax number and enter the number on "Add Telecom Information" Screen	202, 203	
54	This warning will be invoked when a user has entered something on the screen and attempts to navigate to another screen without having invoked a "Save" function	You have modified this screen, but your modifications have not been saved. Press "OK" to exit this page without saving. Press "Cancel" to remain on this page.	6, 20, 72, 194, 205, 206	
55	This warning will be invoked when a user enters an invalid mothers age	Mothers age should be between 13-55	108	
56	Date of procedure is before the LMP	Date of procedure is before the LMP	108	
57	Sample collection date earlier than LMP date	Sample collection date earlier than LMP date	108	
58	LMP after EDC	LMP should not be EDC	108	
59	LMP to EDC should be about 280 days. If m	LMP to EDC should be between 300 and 200	108	
60	If the Date of birth of baby is inappropriate re	Date of birth is inappropriate relative to LMP or EDC.	108	
61	If the OSS-type user attempts to invoke the case summary hyperlink on the search results.	You are not authorized to view this information.	153	
62	When coordinator attempts to modify a case that is "referrable" (I.e.--would qualify for PDC referral).	Do you want to enter a tracking event 45?	6	
63	Cord blood's date is not equal to specimen collection date	The "cord blood" date should equal the date of birth	205	

Warning Tag No.	Nature of the Warning	Warning Text	Screen No.	Status
64	When PDC attempts to change interpretation factors on a case, and they have not entered an appointment	Please enter appointment information in the "Enter and View Appointment Information Screen" before sending for review.	6	
65	10 - When a user tries to merge two clients. 211 - When a user tries to link two accession numbers that are belong to two separate clients, the system will first have to merge the clients and then link the accession numbers.	Once clients have been merged they can not be unmerged, please confirm that you want to continue with the merge	10,211	
66	When an "open" referral is already present for a case to a given PDC, and the CCC attempts to invoke a tracking event again to this PDC.	This patient already has a current referral to this PDC. You cannot refer again to this PDC.	20	
67	When the generate mailer button has been pressed and the diaried event has been invoked to denote that interp. Factor changes are as a result of PDC visit.	Do you want to send a result mailer to the PDC?	20	
68	When the interpretation factors have been changed on Screen 6.	Is this interpretation change due to a PDC visit?	6	
69	Invoked when the appointment is "kept" before "scheduled"	The appointment must be "scheduled" before it is "kept." Please invoke the status of "scheduled."	64	

Appendix C1 - Tracking Events NBS

Tracking Event Synopsis for NBS

Number	Tracking Event Description	CofC?	Closes Case?	Scenarios/Business Logic	Tracking Event Validated Against Interp.?	Tracking Status Changed to	Status
100	Clinician notified of inadequate specimen	X		CCC staff confirms inadequacy of specimen with clinician. SIS will flag these instances initially and send to CCC staff workload.	Yes - only when interpretation indicates inadequate specimen	Awaiting Repeat	
101	Hospital staff notified of inadequate specimen	X		CCC staff confirms inadequacy of specimen with hospital staff. SIS will flag these instances initially and send to CCC staff workload.	Yes - only when interpretation indicates inadequate specimen	Awaiting Repeat	
102	Clinician notified of PKU result	X		CCC staff confirms positive PKU screen with clinician. SIS will flag these instances initially and send to CCC staff workload.	No	Awaiting Recall	
103	Hospital staff notified of PKU result					Awaiting Recall	
104	Clinician notified of transferase result	X		CCC staff confirms positive galactosemia screen with clinician. SIS will flag these instances initially and send to CCC staff workload.	No	Awaiting Recall	
105	Hospital staff notified of transferase result					Awaiting Recall	
106	Clinician notified of TSH result	X		CCC staff confirms positive hypothyroid screen with clinician. SIS will flag these instances initially and send to CCC staff workload.	No	Awaiting Recall	
107	Hospital staff notified of TSH result					Awaiting Recall	
108	Clinician notified of Hb result	X		CCC staff confirms positive Hb screen with clinician. SIS will flag these instances initially and send to CCC staff workload.	Yes - only when interpretation indicates Hb+	Awaiting Recall	
109	Hospital staff notified of Hb result					Awaiting Recall	
110	Clinician notified of MS/MS result. Recall sample to be drawn	X		CCC staff confirms positive MS/MS screen with clinician. SIS will flag these instances initially and send to CCC staff workload.	Yes - only when interpretation indicates MS/MS positive	Awaiting Recall	
111	Hospital staff notified of MS/MS result. Recall sample to be drawn.					Awaiting Recall	
112	Clinician contacted regarding early collection	X		CCC staff contacts clinician to verify early collection. SIS will flag these instances initially and send to CCC staff workload.	Yes - only when interpretation indicates early collection	Awaiting Clinician Response	
113	Hospital staff contacted regarding early collection	X		CCC staff contacts hospital staff to verify early collection. SIS will flag these instances initially and send to CCC staff workload.	Yes - only when interpretation indicates early collection	Awaiting Hospital Response	
114	Clinician notified of need to redraw too early	X		CCC staff confirms early collection with clinician and requests recollection of specimen. SIS will flag these instances initially and send to CCC staff workload.	Yes - only when interpretation indicates early collection	Awaiting Repeat	
115	Hospital staff notified of need to redraw too early	X		CCC staff confirms early collection with hospital staff and requests recollection of specimen. SIS will flag these instances initially and send to CCC staff workload.	Yes - only when interpretation indicates early collection	Awaiting Repeat	
116	Clinician contacted to check on status of case	X		CCC staff contacts clinician to inquire about status of case.	No	Awaiting Further Action	
117	Hospital staff contacted to check on status of case	X		CCC staff contacts hospital staff to inquire about status of case.	No	Awaiting Further Action	
118	Case confirmed as classical disorder		X	A physician has diagnosed the newborn as having the classical form of the disorder in question. This tracking event will also remove any recall specimens from the coordinator inventory, and close the entire case.	Yes - only when interpretation indicates positive test result.	Case Closed	Removed as per SB 142
119	Case confirmed as variant disorder		X	A physician has diagnosed the newborn as having a variant form of the disorder in question. This tracking event will also remove any recall specimens from the coordinator inventory, and close the entire case.	Yes - only when interpretation indicates positive test result.	Case Closed	Removed as per SB 142

Number	Tracking Event Description	CofC?	Closes Case?	Scenarios/Business Logic	Tracking Event Validated Against Interp.?	Tracking Status Changed to	Status
120	Case closed - negative		X	The newborn has been determined by a physician not to have the disorder in question. This tracking event will also remove any recall specimens from the coordinator inventory, and close the entire case. If the case has been referred to a metabolic center, then the tracking event will remove the case from all MC inventories after 3 months.	Yes - only when interpretation indicates positive test result.	Case Closed	
121	Case closed - lost to follow-up		X	The CCC staff has exhausted all reasonable efforts to find the patient and has been unsuccessful. This tracking event will also remove any recall specimens from the coordinator inventory, and close the entire case. If the case has been referred to a metabolic center, then the tracking event will remove the case from all MC inventories after 3 months.	No	Case Closed	
122	Case closed - parent refusal		X	Parents have refused follow-up. This tracking event will also remove any recall specimens from the coordinator inventory, and close the entire case. If the case has been referred to a metabolic center, then the tracking event will remove the case from all MC inventories after 3 months.	No	Case Closed	
123	Case closed - newborn expired		X	Newborn expired. This tracking event will also remove any recall specimens from the coordinator inventory, and close the entire case. If the case has been referred to a metabolic center, then the tracking event will remove the case from all MC inventories after 3 months.	No	Case Closed	
124	Case closed - no response from parents		X	Parents have not responded one way or the other to numerous attempted contacts. This tracking event will also remove any recall specimens from the coordinator inventory, and close the entire case. If the case has been referred to a metabolic center, then the tracking event will remove the case from all MC inventories after 3 months.	No	Case Closed	
125	Case closed - other reason		X	Case closed for other reason (noted in case notes). This tracking event will also remove any recall specimens from the coordinator inventory, and close the entire case. If the case has been referred to a metabolic center, then the tracking event will remove the case from all MC inventories after 3 months.	No	Case Closed	
126	Newborn admitted to NICU before seen in follow-up center			Newborn admitted to NICU before positive reported and referral to specialty center made. This tracking event will also remove any recall specimens from the coordinator inventory, and close the entire case.	No		
127	Diagnosis made before visit to follow-up center				No		
128	Parent(s)/family contacted by phone				No		
129	Brochures Sent				No		
130	Certified letter sent				No		
131	Certified letter returned unopen				No		
132	Letter sent				No		
133	Letter returned unopen				No		
134	CPS referral made				No		
135	PHN referral made				No	Awaiting results of PHN visit	
136	Repeat/recall collected			Clinician/hospital staff report specimen collected, not yet received at lab.	No	Awaiting receipt of repeat/recall	
137	Interpreter services used				No		
138	Transportation services arranged				No		
139	Bioplerin testing completed				No	Bioplerine results posted	
140	Taking PTU or other thyroid medication				No		
141	Parents' specimens to be collected				No	Awaiting receipt of parent specimen(s)	

Number	Tracking Event Description	CofC?	Closes Case?	Scenarios/Business Logic	Tracking Event Validated Against Interp.?	Tracking Status Changed to	Status
142	Reopen case			This tracking event will ensure that the case reappears on the headline case inventory for the assigned CCC.	No	Case reopened	
143	Awaiting callback				No		
144	Signed consent form received				No		
145	Lab kit sent				No		
146	Additional consent received				No		
147	Lab result letter sent				No		
148	Previous tracking event entered in error; tracking status reverted			This occurs when a coordinator enters in a tracking event in error. The entry of this tracking event will rescind the previous entry and any business logic or tracking status changes associated with the invocation of that previous tracking event.	No		
149	Referred as an Anomalous Case.			When case is being followed up as having anomalous initial NBS results. This may occur when the baby is an initial, quite definite positive and follow-up results deem it to be negative. The converse situation may also create the tracking event.	No	Anomalous Case Referral Made.	
150	Trait follow-up intake done						
151	Referred to SCCC					Referred to SCCC	
152	Counseled by phone						
153	Counseled in person						
154	Parent counseling letter sent						
155	Physician counseling letter sent						
156	Signed lab reports received from consultative Hematologist						
157	Test results counseling done						
158	Parent result letter sent						
159	Physician result letter sent						
160	Trait follow-up completed						
161	Referred to Metabolic Center				Yes, only when cases are MS/MS positive or galactosemia positive	Referred to MC	
162	Non-English face to face counseling done						
163	Non-English phone counseling done						
164	Registry letter sent			When registry letter is sent. Will trigger diaried event #209			
165	Clinician notified of CAH result						
166	Hospital staff notified of CAH result						
167	Metabolic Center referral canceled			Canceling a referral to an MC. Not doing validation for MS/MS positive and galactosemia positive due to the possibility of infant death. This tracking event will require the CCC to select the metabolic center for which the referral will be canceled.	Must have a tracking event #161	Referral Canceled	
168	Clinician notified of MS/MS result. Patient to be referred.	X		CCC staff confirms positive MS/MS screen with clinician. SIS will flag these instances initially and send to CCC staff workload.	Yes - only when interpretation indicates MS/MS positive	Awaiting Referral	
169	Hospital staff notified of MS/MS result. Patient to be referred.					Awaiting Referral	

Appendix C2 - Tracking Events - PNS

Tracking Event Synopsis for PNS

Number	Tracking Event Description	CofC?	Closes Case?	Suppress Patient Letter?	Scenarios/Business Logic	Tracking Event Validated Against Interp. Or Other Events?	Permissible Tracking Statuses	Tracking Status Changed To
21	Clinician Told of Inadequate Specimen	X	X			Yes--only when the interp. is an inadequate specimen		Case Closed - Clinician Told of Inadequate Specimen
22	Clinician Told of Too Early	X	X		Coordinator confirms that specimen was drawn too early (less than 15 weeks) with clinician. SIS will flag these instances initially and send to coordinator workload.	Yes--only when the interp. suggests a specimen drawn too early		Case Closed - Clinician Told of Too Early
23	Clinician Told Pregnancy Not Screenable	X	X		Case has 3 or more fetuses or fetal reduction is checked. SIS should confirm 3 or more fetuses or fetal reduction.	No	10	Case Closed - Clinician Told Pregnancy Not Screenable
26	Clinician agreed to redraw	X			If no redraw by 21 weeks' gestation, SIS will turn any "P" analyte adequacy codes into "A" (except for "uE3, which remains "D"). It also triggers an initial mailer to be released. Will reopen the case if it is closed.	No	5, 9	Clinician agreed to redraw
27	Redraw obtained		X		This can be invoked automatically by SIS, or by the coordinator. The redraw is obtained and is matched to the initial specimen. This will close the initial case.	Yes-- Tracking event 26 must be entered in advance	5, 9, 18	Case Closed - Redraw Obtained
28	Clinician/patient declined redraw (CCC 40 only)	X	X			No		Case Closed - Clinician/patient declined redraw
29	Clinician told too late to redraw (CCC 40 only)	X	X			No		Case Closed - Clinician Told to Redraw
31	Unauthorized Redraw; Results Invalid	X	X		These are for situations in which a specimen comes in and it is a redraw for a patient that had not been authorized by GDB and was not matched to the first specimen by SIS.	No	5, 9	Case Closed - Unauthorized Redraw, Results Invalid
35	Clinician asked to verify specimen/pregnancy	X			This is an optional event. SIS will flag cases when the interpretation indicates that values are inconsistent with pregnancy. Will reopen the case if it is closed.	Yes		Clinician asked to verify specimen/pregnancy
42	Clinician agreed to PDC referral	X			Coordinator can enter this event when there is a referral to the PDC. Will reopen the case if it is closed.	Yes--interp. must be "Screen Positive", increased risk or referable case.	3, 5	Clinician agreed to PDC referral
43	Non state-approved F/U provided; no referral	X	X		Coordinator finds out that due to doctor's choice, obtaining services prematurely, or having left the state for services, a non-State approved center was used. This will cancel the referral to the PDC. "We have taken this case off of your inventory" is the alert text to the relevant PDC.	Yes, the interp. Must be screen positive, a too late high AFP, a too early high AFP, or a tracking event 46 has been entered.	3, 5, 29	Case Closed - Non state-approved follow-up
44	PDC appointment not kept	X			This tracking event is used when a patient does not show at her appointment and it is not rescheduled. The coordinator will have received an alert for all "no show" and "cancelled" patients at the PDC. Will reopen the case if it is closed.	Yes--only when tracking event 50 or 46 has been used.	3, 5, 42, 29	PDC appointment not kept
45	PDC appointment kept		X	X	This is the most common event to close a positive case, and should be automatically invoked when a PDC puts in the appointment kept information. It may also be entered directly by a CCC. Some things that occur are as follows: it allows PDCs to bill for services, it gives PDCs access to the PSR entry screen for that case, and it changes the tracking status of the case to "Case Closed--PDC Appointment Kept".	Yes--only when tracking event 50 or 46 has been used.	3, 5, 42, 29	Case Closed - PDC Appointment Kept
46	Override tracking status; referral authorized.	X			Coordinator can enter this event when there is a referral to the PDC which is not screen positive. In essence, this is the same as tracking event 42. This prompts a PDC code to be entered on the "Diariad Events" screen and the workflow generates the case to be placed on the PDC inventory and for the PDC to have access to that case record. Will reopen the case if it is closed.	No	any	Override tracking status; referral authorized
50	PDC Site Assigned				This prompts a PDC code to be entered on the "Diariad Events" screen and the workflow generates the case to be placed on the PDC inventory and for the PDC to have access to that case record.	Yes--only when the tracking status is Clinician agreed to PDC referral.		PDC referral to site

Number	Tracking Event Description	CofC?	Closes Case?	Suppress Patient Letter?	Scenarios/Business Logic	Tracking Event Validated Against Interp. Or Other Events?	Permissible Tracking Statuses	Tracking Status Changed To
51	Previous referral cancelled				This is to cancel a previous referral to a PDC. This will send a cancellation alert to the PDC where the referral had been previously made and place the case on the "cancelled referral" table for the PDC. Will reopen the case if it is closed.	Yes--should have a tracking event 50 or 46.	42,29	Previous referral cancelled. Awaiting new referral.
61	Clinician told "Too Late"	X	X		Coordinator tells the clinician that the specimen was "too late" for services	Yes--only when the interpretation is a "Too Late"		Case Closed - Clinician Told "Too Late"
62	Pregnancy Too Advanced for Referral ("past 24 weeks")	X	X	X	SIS will flag cases that are getting close to the 24 week cutoff for alert to coordinator. The alert will be on "Headline Cases" and the case summary record. If the case passes 24 weeks, the coordinator will inform the clinician of a "too advanced" status. This cancels any referrals to the PDC and the case is removed from headline cases and PDC inventory. "We have taken this case off of your inventory" is the alert text to the relevant PDC.	Yes--only with referable cases.	3, 5	Case Closed - Pregnancy Past 24 Weeks
84	Patient had amniocentesis; no referral	X	X	X	The case comes to the attention of the coordinator. This cancels any referrals to the PDC and the case is removed from headline cases and PDC inventory. "We have taken this case off of your inventory" is the alert text to the relevant PDC.	Yes--only with referable cases.	3, 5	Case Closed - Patient had amniocentesis
85	Fetal abnormality reported; no referral	X	X	X	The case comes to the attention of the coordinator. This cancels any referrals to the PDC and the case is removed from headline cases and PDC inventory. "We have taken this case off of your inventory" is the alert text to the relevant PDC.	Yes--only with referable cases.	3, 5	Case Closed - Abnormality Reported
87	Patient declined referral	X	X		Coordinator uses this tracking event for when patient is not interested in referral	Yes--only with referable cases.	3, 5	Case Closed - Patient Declined Referral
88	Clinician declined referral	X	X		Coordinator uses this tracking event for when clinician declines referral.	Yes--only with referable cases.	3, 5	Case Closed - Clinician Declined Referral
89	Clinician told of HX/RX policy	X			TRFs that have HX/RX affixed will come into SIS, but the program will not refer. These are screen negative cases which SIS will flag for coordinator follow-up with its own interp. The coordinator will speak to the clinician and offer to send new forms.	Yes--must only be HX/RX entered on the TRF		
91	Patient lost to follow-up	X	X		Coordinator uses event when they learn that a patient cannot be contacted from the clinician (patient disappears)..	No		Case Closed - Patient lost to follow-up
92	Unable to contact clinician or patient		X	X	SIS will flag cases that have insufficient information on the TRF. If the information is so insufficient as to render it impossible to find the patient or clinician, this event will be used.	Yes--the interpretation must be related to insufficient information		Case Closed - Unable to contact clinician or patient
93	Lost preg-SAB, FD, compic; no referral	X	X	X	The case comes to the attention of the coordinator. This cancels any referrals to the PDC and the case is removed from headline cases and PDC inventory. SAB=spontaneous abortion, FD=fetal demise, compic=pregnancy complications	Yes--only with referable cases.	3, 5	Case Closed - Lost pregnancy
94	Patient elected pregnancy termination; no referral	X	X	X	The case comes to the attention of the coordinator. This cancels any referrals to the PDC and the case is removed from headline cases and PDC inventory.	Yes--only with referable cases.	3, 5	Case Closed - Pregnancy Termination
95	Patient not pregnant	X	X	X	This comes to coordinator's attention in a conversation with the clinician when the patient is actually not pregnant. This cancels any referrals to the PDC and the case is removed from headline cases and PDC inventory. "We have taken this case off of your inventory" is the alert text to the relevant PDC.	No		Case Closed - Patient not pregnant
96	Special Circumstances		X	X	This requires GDB approval and is most common in instances where the patient delivers at 22-23 weeks. No warning is needed as coordinator discretion is sufficient for this event. This cancels any referrals to the PDC and the case is removed from headline cases and PDC inventory. "We have taken this case off of your inventory" is the alert text to the relevant PDC.	No	All	Case Closed - Special Circumstances
97	Coordinator sent special letter				Coordinator uses in the event of a response to a complaint letter or special communication with the actual clinician. It is used for information only.	No	All	
98	Fetal/newborn abnormality reported by a clinician				Clinician reports the abnormality in a fetus or newborn. The results will be used for PDES analysis; though the tracking event will come from the CCC. Tracking event 98 will have letters attached as the addendum shows.	No	All	
99	Previous tracking event entered in error; tracking status reverted				This occurs when a coordinator enters in a tracking event in error. The entry of this tracking event will rescind the previous entry and any business logic or tracking status changes associated with the invocation of that previous tracking event.	No	All	

Number	Tracking Event Description	CofC?	Closes Case?	Suppress Patient Letter?	Scenarios/Business Logic	Tracking Event Validated Against Interp. Or Other Events?	Permissible Tracking Statuses	Tracking Status Changed To
--------	----------------------------	-------	--------------	--------------------------	--------------------------	-----------------------------------------------------------	-------------------------------	----------------------------

Tracking Event 98 addendum

Number	Abnormality
98a	anencephaly
98b	open spina bifida
98c	closed spina bifida
98d	encephalocele
98e	craniorachischisis
98f	inencephaly
98g	rachischisis
98h	other NTD
98i	gastroschisis
98j	omphalocele
98k	AWD non-specified
98l	trisomy 21
98m	trisomy 18
98n	other chromosomal defect
98o	SLOS
98p	Other major defect

Appendix D - Security Matrix

Security Group/Screen Number	006	007	010	015	016	017	020	023	026	027	030	033	038	044	046	047	048	050	052	053	055	062	064	067	070	
Confirmatory Lab – Administrator					CRUD																				CRU	
Coordinator Center – NBS – Administrator/Supervisor		R	RU	R	CRUD	CRU	CRU	CRU		RU				CRU		RU	CRU	CRU	CRU	R	R		R	R	R	R
Coordinator Center – NBS – Staff – Clerical/Clinical		R	RU	R	CRUD	CRU	CRU	CRU		RU				CRU		RU	CRU	CRU	CRU	R	R		R	R	R	R
Coordinator Center – PNS – Administrator	RU	RU	RU				CRU	CRU		RU			R	CRU		RU	CRU	CRUD	CRU	CRU	R	R	CRU	R	R	R
Coordinator Center – PNS – Staff – Clerical		R	RU				CRU	CRU		RU			R	CRU		RU	CRU	CRUD	CRU	CRU	R	R	CRU	R	CRU	R
Coordinator Center – PNS – Staff – Clinical	RU	R	RU				CRU	CRU		RU			R	CRU		RU	CRU	CRUD	CRU	CRU	R	R	CRU	R	CRU	R
Follow – up Center – Metabolic Center – Administrator					CRUD																			CRU	R	R
Follow – up Center – Metabolic Center – Staff					CRUD																			CRU	R	R
Follow – up Center – SCCG – Administrator							CRU																	CRU	R	R
Follow – up Center – SCCG – Staff							CRU																	CRU	R	R
Follow – up Center –PDC – Clinical Geneticist	RU						R																	CRU	R	R
Follow – up Center –PDC – Genetic Counselor	RU						R																	CRU	R	R
Follow – up Center –PDC – Medical Geneticist	RU						R																	CRU	R	R
Follow – up Center –PDC – Consultative Sonologist							R																			
Follow – up Center –PDC – Early & standard amniocentesis practitioner							R																			
Follow – up Center –PDC – Invoice Liaison																						R		CRU		
Follow – up Center –PDC – Appt. Scheduler																										
Follow - Up Center - PDC - Cytogenetic Laboratory																										
Follow - Up Center - PDC - Quarterly Report Contact																										
Follow – up Center –PDC – PDC Director	RU						R																	CRU	R	R
Follow – up Center –PDC – PSR Contact (formerly P DPR Contact)							R																	CRU	R	R
GDL – Administrator		R			R		R				RU	RU	R	CRU	CRUD		CRUD		CRUD		R					CRU
GDL – Chemist I		R									RU			R	R		R		R		R					
GDL – Chemist II		R									RU		R	R	R		RU		R		R					
GDL – Data Clerk		R			CRU								R	R			RU		R		R					CRUD
GDL – Lab Assistant					CRU																R					RU
GDL – QA Chemist		R	R	CRU	R		R				RU	R		R			R		R		R					CRU
GDL – QA reviewer																										
GDL- QA releaser																										
GDL- Senior Staff		R	R	CRU	R		R				RU	RU	R	R	CRUD		CRUD		CRUD		R					CRU
IT – Administrator	RU	RU	RU	RU	RU	RU	CRU	RU	CRUD		RUD	CRUD	CRUD	CRUD	CRUD	R	CRU	CRU	R	RU						
IT – Analyst	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	R	RU	RU	R	RU
IT – Staff	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
NAPS Lab – Administrator					CRU						CRU	CRU	RU	CRU	RU											
NAPS Lab – Staff					CRU						CRU	CRU	RU	CRU												
NAPS Lab – Analyst					CRU						CRU	CRU	RU	CRU												
NBS – Administrator		RU	RU	CRU	CRUD	CRU	CRU	CRU	R	RU	CRU	RU	R	CRUD	CRU	RU	CRUD	CRUD	CRUD	CRUD	CRUD	R		CRU	R	CRUD
NBS – Monitor		RU	RU	CRU	CRUD	CRU	CRU	CRU	R	RU	CRU	RU	R	CRUD	CRU	RU	CRUD	CRUD	CRUD	CRUD	CRUD	R		CRU	R	CRU
NBS – Staff		R								RU				CRUD	R	R	CRU	R	RU	R	R					
NBS – Follow up staff	R	R		R	R	RU		CRU						CRUD	CRU	RU	CRU	R	RU	R	R		R	R	R	R
NBS – Staff – form monitor		R	RU					CRU						CRUD	CRU	RU	CRU	R	RU	R	R					
NBS – Staff – LTR Clerk										RU				CRUD	CRU	RU	CRU	R	RU	R	R					
NBS – Registry – MPKU						CRU					RU			CRUD	CRU	CRUD	CRUD	CRU	CRUD	CRUD	CRUD	R				
NBS – County Birth Registrar															CRU		CRU	R	RU	RU	R					
PDES – Administrator		R	RU		CRUD	CRU	R	R	R	R			R	CRUD	CRUD		CRUD	CRUD	CRUD	CRUD	CRUD	R	R	R	R	R
PDES – Analyst		R	RU		R		R	R	R	R			R	R	R		CRUD	CRUD	CRUD	CRUD	CRUD	R	R	R	R	R
PDES – Staff		R	RU				R	R	R	R			R	R	CRUD		CRUD	R	R	R	R	R	R	R	R	R
PDES – Staff – Extended Survey		R	RU				R	R	R	R			R	R	R		R	R	R	R	R	R	R	R	R	R
PDES – Staff – Outcome		R	RU				R	R	R	R			R	R	R		R	R	R	R	R	R	R	R	R	R
PDES – Staff – Quarterly Reports		R	RU				R	R	R	R			R	R	R		R	R	R	R	R	R	R	R	R	R
PDES – Staff – Registry – CF		R	RU				R	R	R	R			R	R	R		CRUD	R	R	R	R	R	R	R	R	R
PDES – Staff – Registry – Chromosome		R	RU				R	R	R	R			R	R	R		CRUD	R	R	R	R	R	R	R	R	R
PDES – Staff – Registry – Endocrine		R	RU			CRU	R	R	R	R			R	R	R		CRUD	R	R	R	R	R	R	R	R	R
PDES – Staff – Registry – Galactosemia		R	RU		R	CRU	R	R	R	R			R	R	R		CRUD	R	R	R	R	R	R	R	R	R
PDES – Staff – Registry – Hemoglobin		R	RU			CRU	R	R	R	R			R	R	R		CRUD	R	R	R	R	R	R	R	R	R
PDES – Staff – Registry – MS/MS		R	RU		R	CRU	R	R	R	R			R	R	R		CRUD	R	R	R	R	R	R	R	R	R
PDES – Staff – Registry – NTD		R	RU			CRU	R	R	R	R			R	R	R		CRUD	R	R	R	R	R	R	R	R	R
PDES – Staff – Registry – PKU		R	RU		R	CRU	R	R	R	R			R	R	R		CRUD	R	R	R	R	R	R	R	R	R
PDES – Staff – RH Disease	RU	R	RU				R	R	R	R		RU	CRU	CRUD	CRUD	RU	CRUD	CRUD	CRUD	CRUD	CRUD	R				
OSS – Entity – Administrator																		CRUD	CRUD	CRUD	CRUD	R				
OSS – Entity – User																		CRU	CRU	CRU	CRU	R				
OSS – AR																										
PNS – Administrator/Monitor	RU	RU	RU				CRU	CRU	CRU	RU	CRU	RU	CRU	CRUD	CRUD	RU	CRUD	CRUD	CRUD	CRUD	CRUD	R	R	R	R	R
PNS – Staff	RU	R	RU				CRU	CRU	R	RU			R	CRUD	CRUD	RU	CRUD	CRUD	CRUD	CRUD	CRUD	R	R	R	R	R
PNS – Staff – LTR Clerk							R	R	R	RU			R	CRUD	CRUD	RU	CRUD	CRUD	CRUD	CRUD	CRUD	R				
QA – Administrator	RU	R					R	CR		R			R	CRUD	R		CRU	CRU	R	R						
QA - Adverse Outcomes																										
QA – Cytogenetic Monitor																										
QA - Entity														CRUD	R											
QA – Monitor	RU	R					R	CR		R			R	R	R		R	R	R	R	R	R	CRU	CRU	R	R
QA – Staff		R					R																			

Appendix D - Security Matrix

Security Group\ Screen Number	072	076	078	080	087	088	091	093	094	099	106	108	110	115	117	119	122	128	129	132	133	134	135	136	
Confirmatory Lab – Administrator																									
Coordinator Center – NBS – Administrator/Supervisor			R														R	CRU	R	R	RU	R	R	R	R
Coordinator Center – NBS – Staff – Clerical/Clinical			R														R	CRU	R	R	RU	R	R	R	R
Coordinator Center – PNS – Administrator	R		R	CR										R	R			CRU							
Coordinator Center – PNS – Staff – Clerical	R		R	CR										R				CRU							
Coordinator Center – PNS – Staff – Clinical	R		R	CR										R	R			CRU							
Follow – up Center – Metabolic Center – Administrator			R				R		R																
Follow – up Center – Metabolic Center – Staff			R				R		R																
Follow – up Center – SCCC – Administrator			R				R		R																
Follow – up Center – SCCC – Staff			R				R		R																
Follow – up Center –PDC – Clinical Geneticist	CRUD		R	CR			R	R	R																
Follow – up Center –PDC – Genetic Counselor	CRUD		R	CR			R	R	R																
Follow – up Center –PDC – Medical Geneticist	CRUD		R	CR			R	R	R																
Follow – up Center –PDC – Consultative Sonologist			R																						
Follow – up Center –PDC – Early & standard amniocentesis practitioner			R																						
Follow – up Center –PDC – Invoice Liaison			R	CR	R	R																			
Follow – up Center –PDC – Appt. Scheduler			R					R	R																
Follow - Up Center - PDC - Cytogenetic Laboratory																									
Follow - Up Center - PDC - Quarterly Report Contact		CRU																							
Follow – up Center –PDC – PDC Director	CRUD		R	CR	R	R	R	R	R																
Follow – up Center –PDC – PSR Contact (formerly P DPR Contact)	CRUD		R	CR	R	R	R	R	R																
GDL – Administrator											CRU														
GDL – Chemist I												CRU													
GDL – Chemist II												CRU													
GDL – Data Clerk																									
GDL – Lab Assistant																									
GDL – QA Chemist																			R						
GDL – QA reviewer																									
GDL- QA releaser																									
GDL- Senior Staff																									
IT – Administrator	CRU	RU	R	CR	R	R	CR	CRU	CRU	RU	RU	RU	RU	CRUD	CRUD	CRUD	R	CRU	CRUD	RU	RU	RU	CRUD	CRUD	CRUD
IT – Analyst	RU	RU	R	CR	R	R	R	RU	RU	RU	RU	RU	RU	RU	RU	RU	R	RU	RU	RU	RU	RU	RU	RU	RU
IT – Staff	R	R	R	CR	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
NAPS Lab – Administrator																									
NAPS Lab – Staff																									
NAPS Lab – Analyst																									
NBS – Administrator			R				CRU	CRU	CRU	R	CRU							R	RU	CRUD	R	RU	CRUD	CRUD	CRUD
NBS – Monitor			R				CRU	CRU	CRU		CRU							R	RU	CRUD	R	RU	CRUD	CRUD	CRUD
NBS – Staff																									
NBS – Follow up staff			R				CRU	CRU	CRU										R						
NBS – Staff – form monitor																									
NBS – Staff – LTR Clerk																									
NBS- Registry – MPKU																									
NBS – County Birth Registrar																									
PDES – Administrator	R		R				R	R	R	CRU	R	CRU	CRUD	CRUD	CRUD	CRUD	CRUD								CRU
PDES – Arianalyst	R										R	CRU	CRUD	CRUD	CRUD	CRUD	CRUD								
PDES – Staff	R	CR																							
PDES – Staff – Extended Survey	R																								
PDES – Staff – Outcome	R																								
PDES – Staff – Quarterly Reports	R	RU																							
PDES – Staff – Registry – CF	R																								
PDES – Staff – Registry – Chromosome	R																								
PDES – Staff – Registry – Endocrine	R																								
PDES – Staff – Registry – Galactosemia	R																								
PDES – Staff – Registry – Hemoglobin	R																								
PDES – Staff – Registry – MS/MS	R																								
PDES – Staff – Registry – NTD	R																								
PDES – Staff – Registry – PKU	R																								
PDES – Staff – RH Disease	R							CRU																	
OSS – Entity – Administrator																									
OSS – Entity – User																									
OSS – AR																									
PNS – Administrator/Monitor	R		R	CR			CRU		CRU		CRU				R	R			CRU						
PNS – Staff	R		R	CR							CRU				R	R			CRU						
PNS – Staff – LTR Clerk																									
QA – Administrator	CRUD		R	CR	R	R	CR	CRU	CRU	R	R	R		R											
QA - Adverse Outcomes																									
QA – Cytogenetic Monitor																									
QA - Entity																									
QA – Monitor	CRUD		R	CR	R	R	CR	CRU	CRU					R											
QA – Staff	CRUD		R	CR	R	R								R											
Super User																									
PDES – Staff – Clinical Review – MS/MS																									

Appendix D - Security Matrix

Security Group\ Screen Number	139	140	141	142	144	145	147	150	151	152	153	154	155	156	160	161	162	170	175	179	181	182	186	187	
Confirmatory Lab – Administrator											R														
Coordinator Center – NBS – Administrator/Supervisor								CRU	CRU	CRU	R	CRUD	CRUD	CRU	CRU		RU		R	CRU	CRU	CRUD			
Coordinator Center – NBS – Staff – Clerical/Clinical								CRU	CRU	CRU	R	CRUD	CRUD	CRU	CRU		RU				CRU	CRU	CRUD		
Coordinator Center – PNS – Administrator	CRU							CRU	CRU	CRU	RU	CRUD	CRUD	CR	RU	R	RU	RU	R	CRUD	CRUD	CRUD			
Coordinator Center – PNS – Staff – Clerical	CRU							CRU	CRU	CRU	R	CRUD	R	R		R	RU	RU			CRUD	CRUD	CRUD		
Coordinator Center – PNS – Staff – Clinical	CRU							CRU	CRU	CRU	R	CRUD	R	R	CRU	R	RU	RU			CRUD	CRUD	CRUD		
Follow – up Center – Metabolic Center – Administrator								CRU	CRU	CRU	R	CRU	CRU	RU	CRU		RU								
Follow – up Center – Metabolic Center – Staff								CRU	CRU	CRU	R	CRU	CRU	RU	CRU		RU								
Follow – up Center – SCCG – Administrator								CRU	CRU	CRU	R	CRU	CRU	CRU	CRU		RU								
Follow – up Center – SCCG – Staff								CRU	CRU	CRU	R	CRU	CRU	CRU	CRU		RU								
Follow – up Center –PDC – Clinical Geneticist											R						RU								
Follow – up Center –PDC – Genetic Counselor											R						RU								
Follow – up Center –PDC – Medical Geneticist											R						RU								
Follow – up Center –PDC – Consultative Sonologist																	RU								
Follow – up Center –PDC – Early & standard amniocentesis practitioner																	RU								
Follow – up Center –PDC – Invoice Liaison																	RU								
Follow – up Center –PDC – Appt. Scheduler											R						RU								
Follow - Up Center - PDC - Cytogenetic Laboratory																									
Follow - Up Center - PDC - Quarterly Report Contact																									
Follow – up Center –PDC – PDC Director											R						RU								
Follow – up Center –PDC – PSR Contact (formerly P DPR Contact)											R						RU								
GDL – Administrator		R	R		R	R	R				R				R									R	
GDL – Chemist I											R														
GDL – Chemist II											R														
GDL – Data Clerk											R				R										
GDL – Lab Assistant											R														
GDL – QA Chemist											R		R	R			R								
GDL – QA reviewer											R														
GDL- QA releaser											R														
GDL- Senior Staff		R	R		R	R	R				R		R	R	R	R	R		R					R	
IT – Administrator	CRU	CRUD	CRUD	RU	CRUD	CRU	RU	CRU	RU	RU	RU	CRU	CRUD	RU	CRU	R	RU	RU	R	CRUD	CRUD	CRUD	RU	RU	RU
IT – Analyst	CRU	RU	RU	RU	RU	RU	RU	CRU	RU	RU	RU	RU	CRU	RU	CRU	R	RU	RU	R	RU	RU	RU	RU	RU	RU
IT – Staff	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	RU	R	R	R	R	R	R	R	R
NAPS Lab – Administrator											R						RU								
NAPS Lab – Staff											R						RU								
NAPS Lab – Analyst											R						RU								
NBS – Administrator		R	R		R	R	R	CRU	CRU	CRU	R	CRUD	CRUD	R	CRU		RU		R	CRUD	CRUD	CRUD	R		
NBS – Monitor								CRU	CRU	CRU	RU	CRUD	CRUD	CR	CRU		RU		R	CRUD	CRUD	CRUD	CRUD		
NBS – Staff											R						RU				CRU	CRU	R		
NBS – Follow up staff								CRU	RU	RU	R		R	R	R		RU		R	CRU	CRU	R			
NBS – Staff – form monitor								R	R	R	R	R	CRUD	R			RU			CRU	CRU	R			
NBS – Staff – LTR Clerk															CRU		RU			CRUD	CRUD	CRUD			
NBS- Registry – MPKU																				CRU	CRU	R			
NBS – County Birth Registrar																									
PDES – Administrator		R	R		RU	R	R	CRU	CRU	CRU	CRU	CRU	CRUD	CRU		R	RU	R	R	CRU	RU	CRUD	R	CRU	
PDES – Analyst		R	R		R		R	CRU	CRU	RU	CRU	CRU	CRU	CRU		R	RU			CRU	RU	R			
PDES – Staff								CRU	CRU	RU	CRU	CRU	CRU	CRU			RU			RU	RU	R			
PDES – Staff – Extended Survey								CRU	RU	RU	R		R	RU			RU					R			
PDES – Staff – Outcome								CRU	RU	RU	R		R	RU			RU					R			
PDES – Staff – Quarterly Reports								CRU	RU	RU	R		R	RU			RU					R			
PDES – Staff – Registry – CF								CRU	CRU	CRU	CRU	CRU	CRU	CRU			RU				CRU	RU	R		
PDES – Staff – Registry – Chromosome								CRU	CRU	CRU	CRU	CRU	CRU	CRU			RU				CRU	RU	R		
PDES – Staff – Registry – Endocrine								CRU	CRU	CRU	CRU	CRU	CRU	CRU			RU				CRU	RU	R		
PDES – Staff – Registry – Galactosemia								CRU	CRU	CRU	CRU	CRU	CRU	CRU			RU				CRU	RU	R		
PDES – Staff – Registry – Hemoglobin								CRU	CRU	CRU	CRU	CRU	CRU	CRU			RU				CRU	RU	R		
PDES – Staff – Registry – MS/MS								CRU	CRU	CRU	CRU	CRU	CRU	CRU			RU				CRU	RU	R		
PDES – Staff – Registry – NTD								CRU	CRU	CRU	CRU	CRU	CRU	CRU			RU				CRU	RU	R		
PDES – Staff – Registry – PKU								CRU	CRU	CRU	CRU	CRU	CRU	CRU			RU				CRU	RU	R		
PDES – Staff – RH Disease								CRU	CRU	CRU	RU				RU		RU					R			
OSS – Entity – Administrator											R										CRUD	CRUD			
OSS – Entity – User											R										CRU	CRU			
OSS – AR											R														
PNS – Administrator/Monitor	CRU	R	R		R	R		CRU	CRU	CRU	RU	CRUD	CRUD	RU	RU	R	RU	CRU	R	CRUD	CRUD	CRUD	R	R	
PNS – Staff	CRU							CRU	RU	CRU	R	CRUD	R	R	RU	R	RU	CRU	R	CRUD	CRUD	CRUD			
PNS – Staff – LTR Clerk	CRU									R							RU			CRUD	CRUD	CRUD			
QA – Administrator	CRU	R	R	R	R	R		CRU	CRU	RU	R		R	R	CRU		RU			CRUD	CRUD	CRUD	R		
QA - Adverse Outcomes																									
QA – Cytogenetic Monitor																	RU				CRUD	CRUD	CRUD		
QA - Entity																									
QA – Monitor								CRU	CRU	RU	R		R	R	CRU		RU			R	R	R			
QA – Staff									R		R				CRU		RU			R	R	R			
Super User																									
PDES – Staff – Clinical Review – MS/MS																	RU								

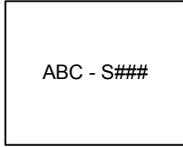
Appendix D - Security Matrix

Security Group\ Screen Number	189	191	194	196	197	199	202	203	204	205	206	208	209	210	211	212	213	215	219	220	221	223	224	225
Confirmatory Lab – Administrator								R	R										R					
Coordinator Center – NBS – Administrator/Supervisor	R	R	RU					RU	R	CRUD		RU			RU	CRU			R				CRU	R
Coordinator Center – NBS – Staff – Clerical/Clinical	R	R	RU					RU	R	RU		RU			CRU	CRU			R	R			CRU	R
Coordinator Center – PNS – Administrator	R				R		RU	R	R		CRUD				CRU	CRU		R		R			CRU	
Coordinator Center – PNS – Staff – Clerical	R						R	R	R		RU				RU	CRU				R			CRU	
Coordinator Center – PNS – Staff – Clinical	R				R		RU		R		RU				RU	CRU				R			CRU	
Follow – up Center – Metabolic Center – Administrator	R							RU	R			CRUD				CRU								
Follow – up Center – Metabolic Center – Staff	R							RU	R			CRUD				CRU								
Follow – up Center – SCCC – Administrator	R							RU	R							CRU								
Follow – up Center – SCCC – Staff	R							RU	R							CRU								
Follow – up Center –PDC – Clinical Geneticist				R	R		RU		R										R					
Follow – up Center –PDC – Genetic Counselor				R	R		RU		R										R					
Follow – up Center –PDC – Medical Geneticist				R	R		RU		R										R					
Follow – up Center –PDC – Consultative Sonologist									R															
Follow – up Center –PDC – Early & standard amniocentesis practitioner									R															
Follow – up Center –PDC – Invoice Liaison					R				R												R			
Follow – up Center –PDC – Appt. Scheduler					R		R																	
Follow - Up Center - PDC - Cytogenetic Laboratory																								
Follow - Up Center - PDC - Quarterly Report Contact				CRU																				
Follow – up Center –PDC – PDC Director				CRU	R		RU		R					R								R		
Follow – up Center –PDC – PSR Contact (formerly P DPR Contact)					R		R		R													R		
GDL – Administrator	R		R				R	R	R	CRUD	CRUD						RU		R					
GDL – Chemist I								RU	R								RU							
GDL – Chemist II		RU						RU	R	CRUD														
GDL – Data Clerk	R		R					RU	R															
GDL – Lab Assistant		RU						R	R	CRUD	CRUD				R									
GDL – QA Chemist	R	RU					R	RU	R						R		RU							R
GDL – QA reviewer									R								RU							
GDL- QA releaser									R								RU							
GDL- Senior Staff	R	RU	R				R	R	R	CRUD	CRUD				R		RU		R					R
IT – Administrator	RU	RU	RU	CRU	R	CRU	RU	R	R	CRUD	CRUD	CRUD	CRUD	CRU	CRU	CRU	RU	R	R	R	R	CRU	CRU	R
IT – Analyst	RU	RU	RU	RU	R	CRU	RU	R	R	RU	RU	RU	RU	RU	RU	CRU	RU	R	R	R	R	RU	RU	R
IT – Staff	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
NAPS Lab – Administrator		RU						R	R	CRUD	CRUD				R		CRU							
NAPS Lab – Staff		RU						R	R	CRU	CRU				R		RU							
NAPS Lab – Analyst																								
NBS – Administrator	R	RU	RU				RU	R	CRUD			CRUD	CRUD		CRU	CRU			R				CRU	R
NBS – Monitor	R	RU	RU					RU	R	CRUD		CRUD	CRUD		CRU	CRU			R				CRU	R
NBS – Staff	R							RU	R	R						R								
NBS – Follow up staff	R							RU	R	RU		CRUD	CRUD		RU	CRU							CRU	R
NBS – Staff – form monitor	R							RU	R						RU	R								R
NBS – Staff – LTR Clerk													CRUD											
NBS- Registry – MPKU								RU									R							
NBS – County Birth Registrar																								
PDES – Administrator	R	R		CRUD	R	CRU	R	R	R				CRUD	CRUD	R	RU			CRU	R	R	R	R	R
PDES – Analyst	R			R	R	R	R	R	R				CRUD	CRUD		RU			CRU	R	R	R		R
PDES – Staff							R	R	R							RU			CRU					
PDES – Staff – Extended Survey							R	R	R							RU			CRU					
PDES – Staff – Outcome							R	R	R							RU			CRU		R			
PDES – Staff – Quarterly Reports							R	R	R							RU			CRU					
PDES – Staff – Registry – CF				CRUD			R	R	R							RU			CRU			R		
PDES – Staff – Registry – Chromosome							CRU	R	R							RU			CRU					
PDES – Staff – Registry – Endocrine							R	R	R			R				RU			CRU	R				
PDES – Staff – Registry – Galactosemia							R	R	R			R				RU			CRU	R				
PDES – Staff – Registry – Hemoglobin							R	R	R			R				RU			CRU	R				
PDES – Staff – Registry – MS/MS							R	R	R			R				RU			CRU	R				
PDES – Staff – Registry – NTD							CRU	R	R	R						RU			CRU		R			
PDES – Staff – Registry – PKU							R	R	R				R			RU			CRU	R				
PDES – Staff – RH Disease							R	R	R										CRU					
OSS – Entity – Administrator									R															
OSS – Entity – User									R															
OSS – AR							R	R	R															
PNS – Administrator/Monitor	R				R		RU	R	R		CRUD		CRUD	CRU	CRU	CRU	CRU	CRU		R				CR
PNS – Staff	R				R		RU	R	R		CRU				RU	CRU	CRU			R				CR
PNS – Staff – LTR Clerk							R	R	R															
QA – Administrator	R			CRU	R		RU		R					CRUD	CRU		R			R	R	CRUD		
QA - Adverse Outcomes																								
QA – Cytogenetic Monitor																								
QA - Entity	R												CRUD									CRUD		
QA – Monitor	R			CRU	R		RU		R					R	CRU		R					R		
QA – Staff	R			R	R		R		R												R	R		
Super User																								
PDES – Staff – Clinical Review – MS/MS								R					R			CRU								R

Appendix D - Security Matrix

Security Group\ Screen Number	226	227	228	229	230	232	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	
Confirmatory Lab – Administrator		R																			R	
Coordinator Center – NBS – Administrator/Supervisor		R				R	CRU															
Coordinator Center – NBS – Staff – Clerical/Clinical		R				R	CRU															
Coordinator Center – PNS – Administrator	RU						CRU		R	R	R	R	R	R		R						
Coordinator Center – PNS – Staff – Clerical							CRU		R	R	R	R	R	R		R						
Coordinator Center – PNS – Staff – Clinical							CRU		R	R	R	R	R	R		R						
Follow – up Center – Metabolic Center – Administrator				R		CRUD		R														
Follow – up Center – Metabolic Center – Staff				R		CRUD		R														
Follow – up Center – SCCC – Administrator				R				R														
Follow – up Center – SCCC – Staff				R				R														
Follow – up Center –PDC – Clinical Geneticist					R				CRUD	CRUD	CRUD	CRUD	CRUD	CRUD								
Follow – up Center –PDC – Genetic Counselor					R				CRUD	CRUD	CRUD	CRUD	CRUD	CRUD								
Follow – up Center –PDC – Medical Geneticist					R				CRUD	CRUD	CRUD	CRUD	CRUD	CRUD								
Follow – up Center –PDC – Consultative Sonologist																						
Follow – up Center –PDC – Early & standard amniocentesis practitioner																						
Follow – up Center –PDC – Invoice Liaison																						
Follow – up Center –PDC – Appt. Scheduler																						
Follow - Up Center - PDC - Cytogenetic Laboratory																						
Follow - Up Center - PDC - Quarterly Report Contact					CRU																	
Follow – up Center –PDC – PDC Director					CRU				CRUD	CRUD	CRUD	CRUD	CRUD	CRUD								
Follow – up Center –PDC – PSR Contact (formerly P DPR Contact)									CRUD	CRUD	CRUD	CRUD	CRUD	CRUD								
GDL – Administrator		R						CRU													R	
GDL – Chemist I																						
GDL – Chemist II								R														
GDL – Data Clerk		R																				
GDL – Lab Assistant		R																				
GDL – QA Chemist		R																				
GDL – QA reviewer																						
GDL- QA releaser																						
GDL- Senior Staff		R						R									R	R	R			
IT – Administrator	RU	R	CRU	CRU	CRU	CRUD	CRUD	CRU	R	R	R	RU	R	CRUD								
IT – Analyst	RU	R	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	RU	R	R	R	RU	RU	R	
IT – Staff	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	
NAPS Lab – Administrator								CRU														
NAPS Lab – Staff								CRU														
NAPS Lab – Analyst								CRU														
NBS – Administrator		R		CRUD		CRUD	CRUD	CRUD							R		RU	RU	R	R		
NBS – Monitor		R		CRUD		R	CRUD	CRUD							R		R	R	R	R	R	
NBS – Staff		R					CRUD															
NBS – Follow up staff		R		CRU		CRUD	CRUD	CRU									R	R				
NBS – Staff – form monitor							CRUD															
NBS – Staff – LTR Clerk							CRUD															
NBS- Registry – MPKU																						
NBS – County Birth Registrar																						
PDES – Administrator			CRU	R	R	CRUD	CRUD	R	R	R	R	R	R	R	CRU	R	RU	RU	R	R		
PDES – Arianalyst						R	R		R	R	R	R	R	R		R				R		
PDES – Staff		R					R		R	R	R	R	R	R								
PDES – Staff – Extended Survey							R		R	R	R	R	R	R		R						
PDES – Staff – Outcome							R		R	R	R	R	R	R								
PDES – Staff – Quarterly Reports					CRU		R		R	R	R	R	R	R								
PDES – Staff – Registry – CF							R		R	R	R	R	R	R								
PDES – Staff – Registry – Chromosome			CRU				R		R	R	R	R	R	R		R						
PDES – Staff – Registry – Endocrine							R		R	R	R	R	R	R								
PDES – Staff – Registry – Galactosemia		R				R	R		R	R	R	R	R	R								
PDES – Staff – Registry – Hemoglobin		R					R		R	R	R	R	R	R								
PDES – Staff – Registry – MS/MS						R	R		R	R	R	R	R	R								
PDES – Staff – Registry – NTD							R		R	R	R	R	R	R		R						
PDES – Staff – Registry – PKU		R					R		R	R	R	R	R	R								
PDES – Staff – RH Disease							CRUD		R	R	R	R	R	R							CRU	
OSS – Entity – Administrator																						
OSS – Entity – User																						
OSS – AR																						
PNS – Administrator/Monitor	RU						CRUD		R	R	R	R	R	R		R				CRU		
PNS – Staff	RU						CRUD		R	R	R	R	R	R		R				R		
PNS – Staff – LTR Clerk							CRUD															
QA – Administrator	RU				CRU		CRUD		CRUD	CRUD	CRUD	CRUD	CRUD	CRUD	R	R				R		
QA - Adverse Outcomes																						
QA – Cytogenetic Monitor			CRU																			
QA - Entity							CRUD															
QA – Monitor	RU				CRU		R		CRUD													
QA – Staff	R				R		R		CRUD													
Super User																						
PDES – Staff – Clinical Review – MS/MS		R															RU	RU				

Application Flow Key



Module Screen



Internal Module Flow



External Module Flow



Sign In Module



Entity Module



Monitor Module



Data Intake Module



Follow-up Module

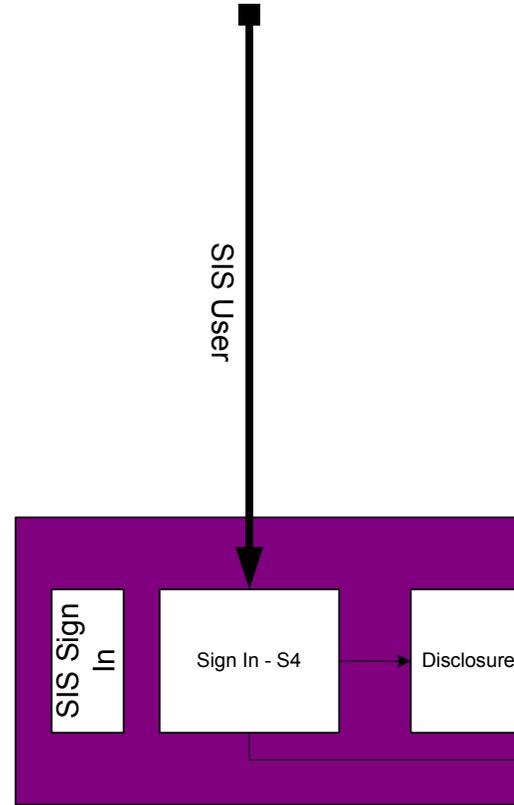


CCC Module

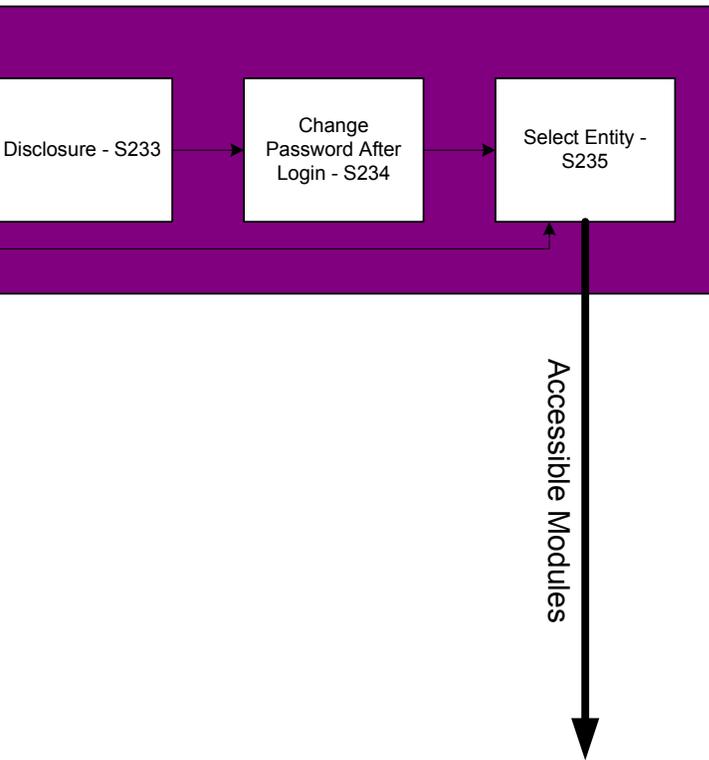


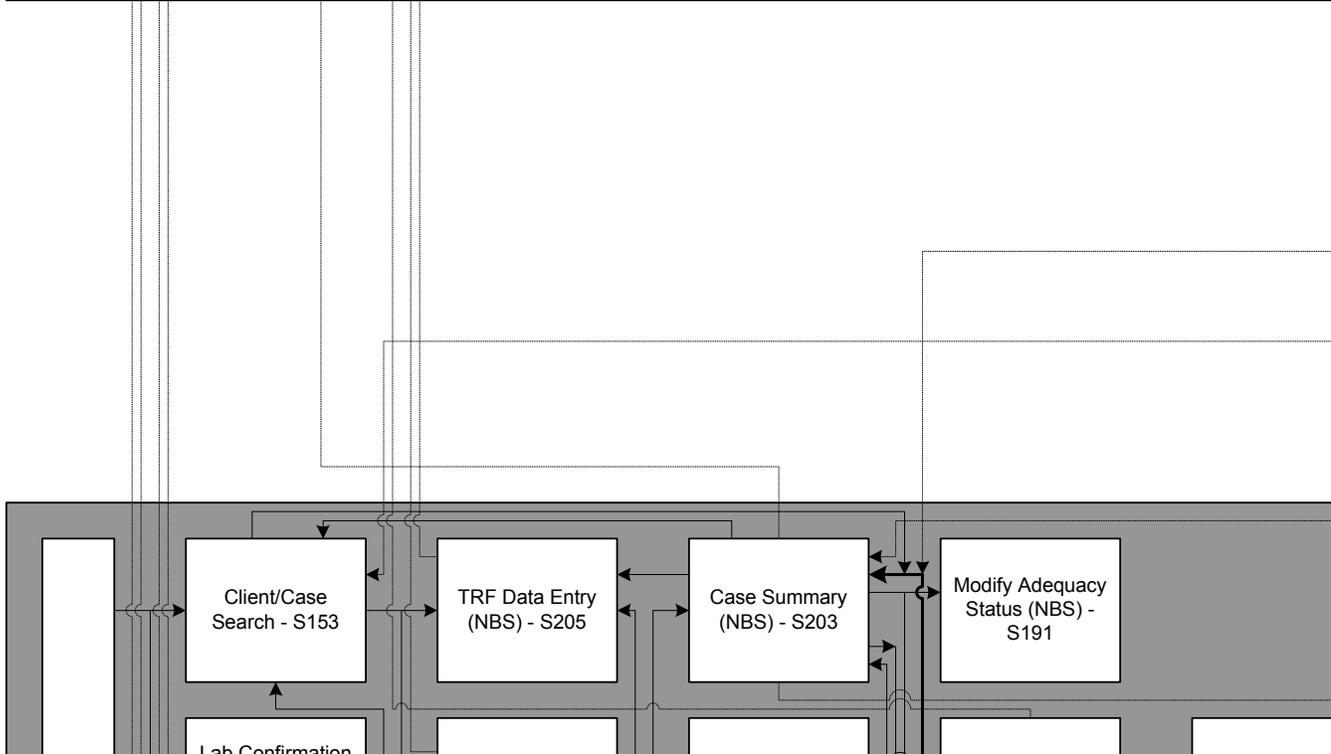
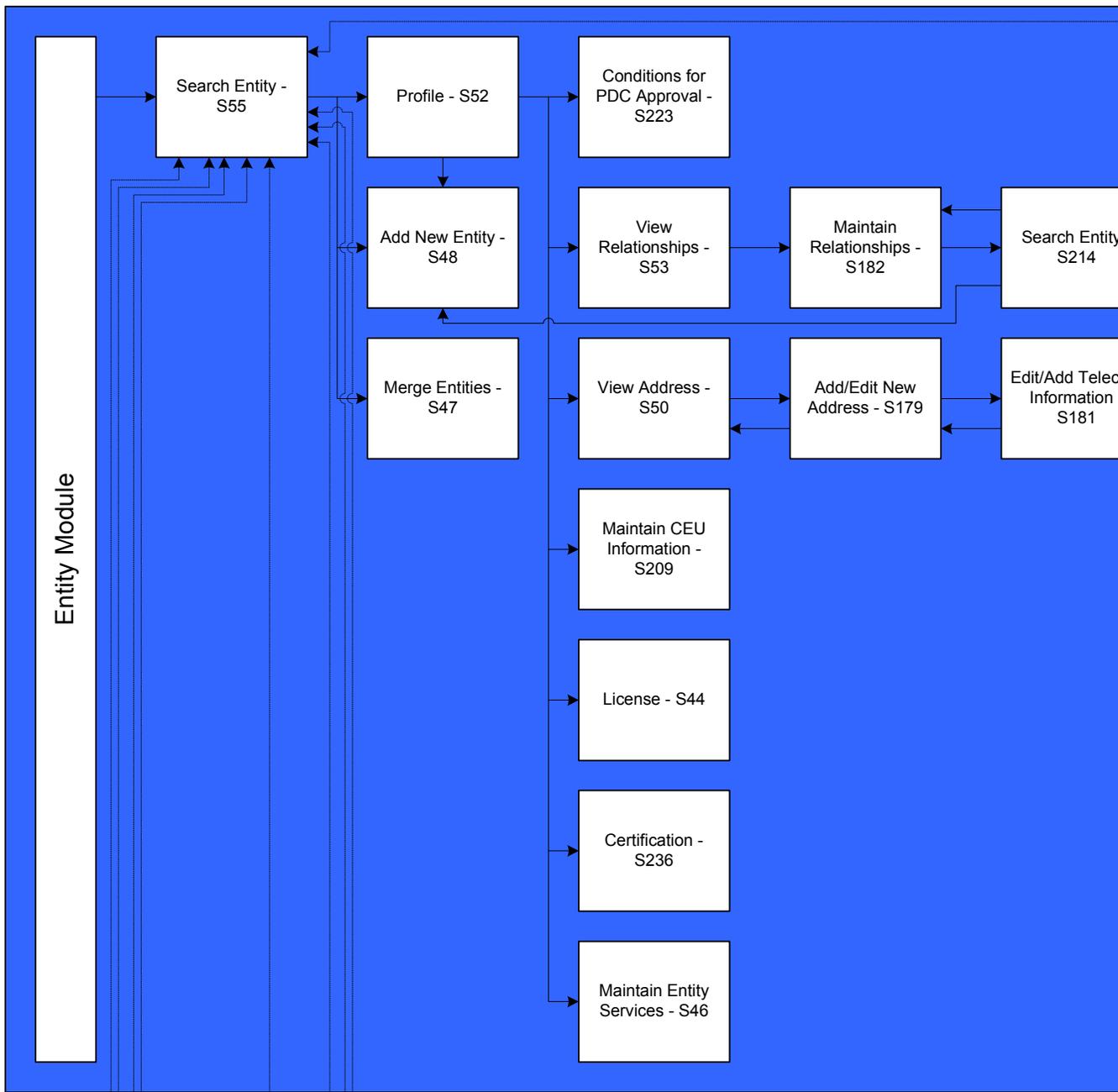
Utilities Module

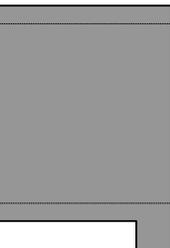
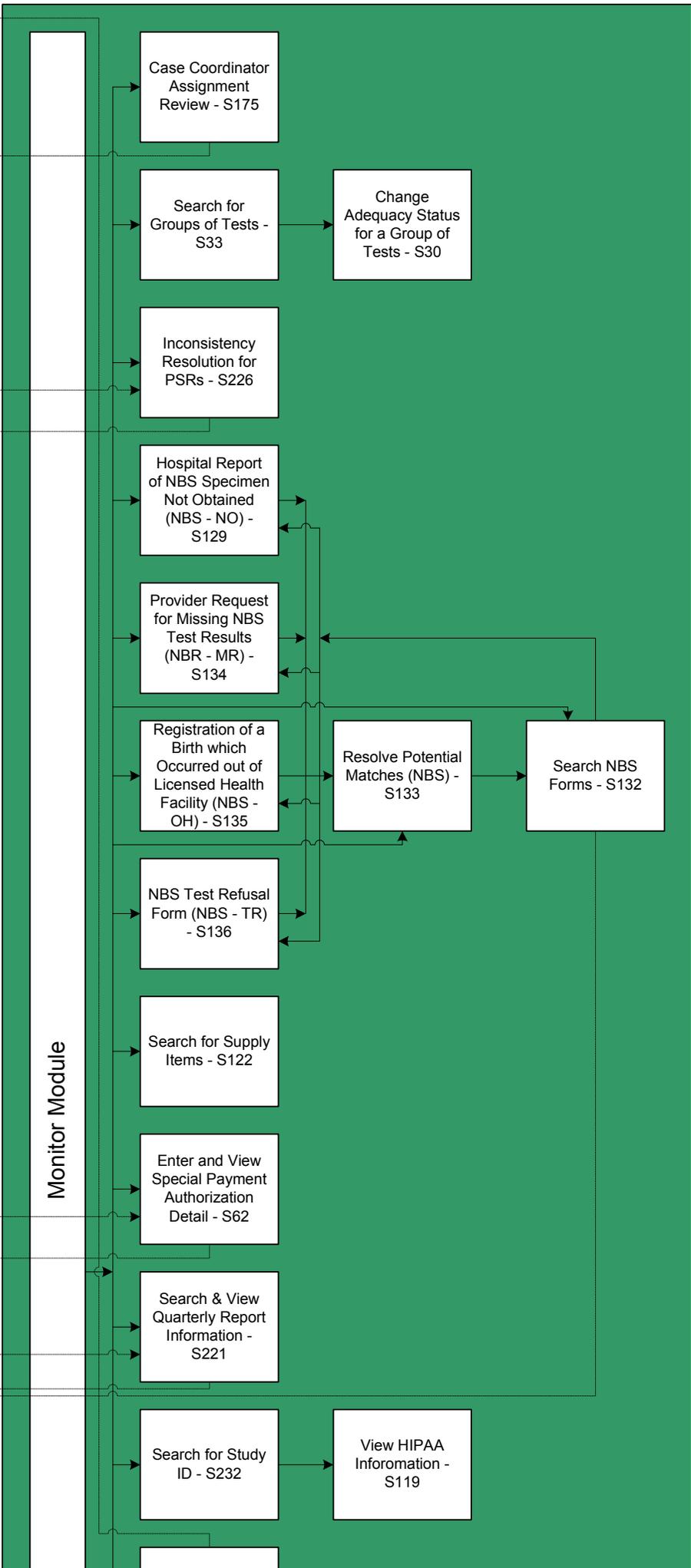
Appendix E – SIS S



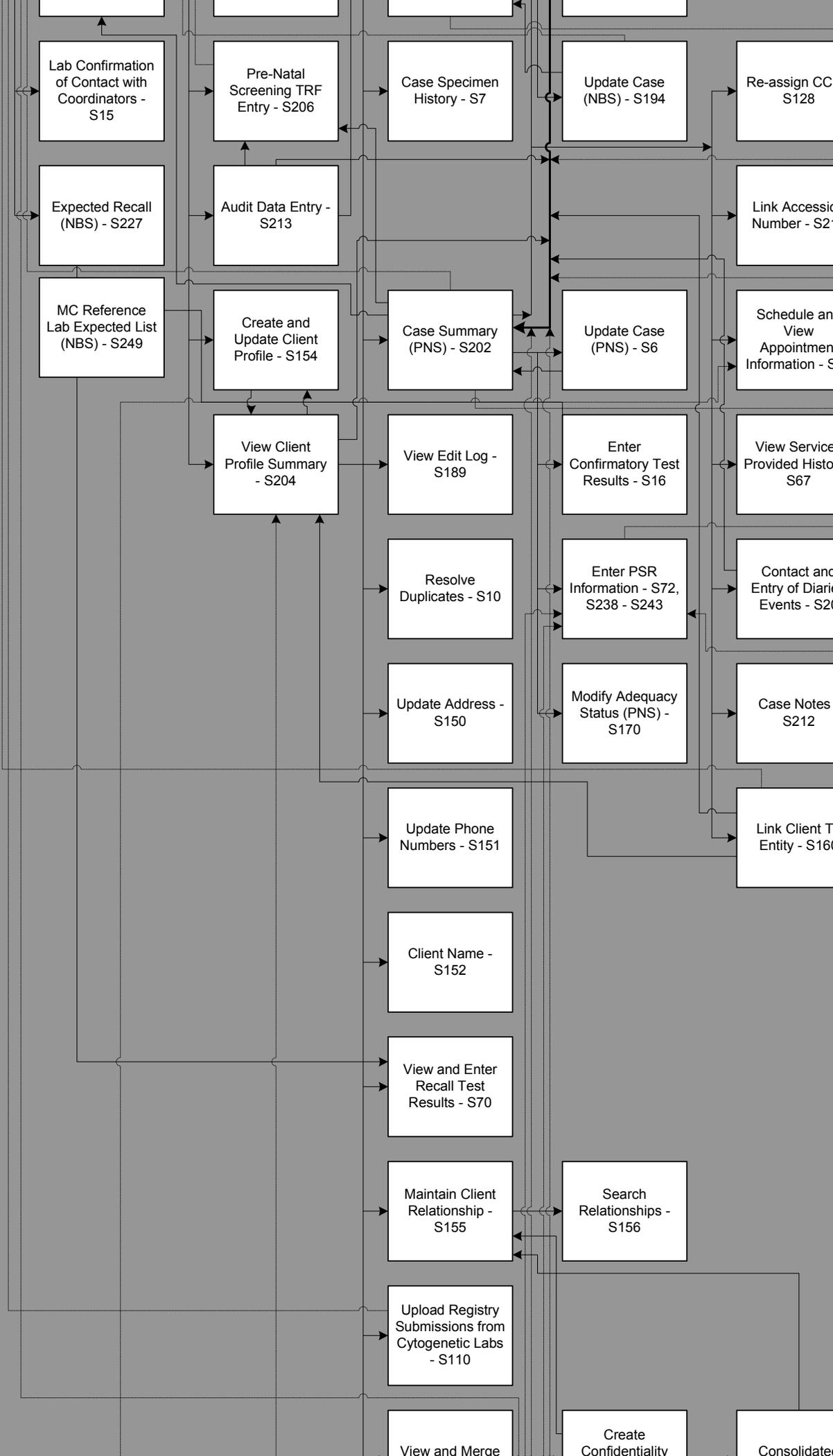
SIS Screen Navigation Map

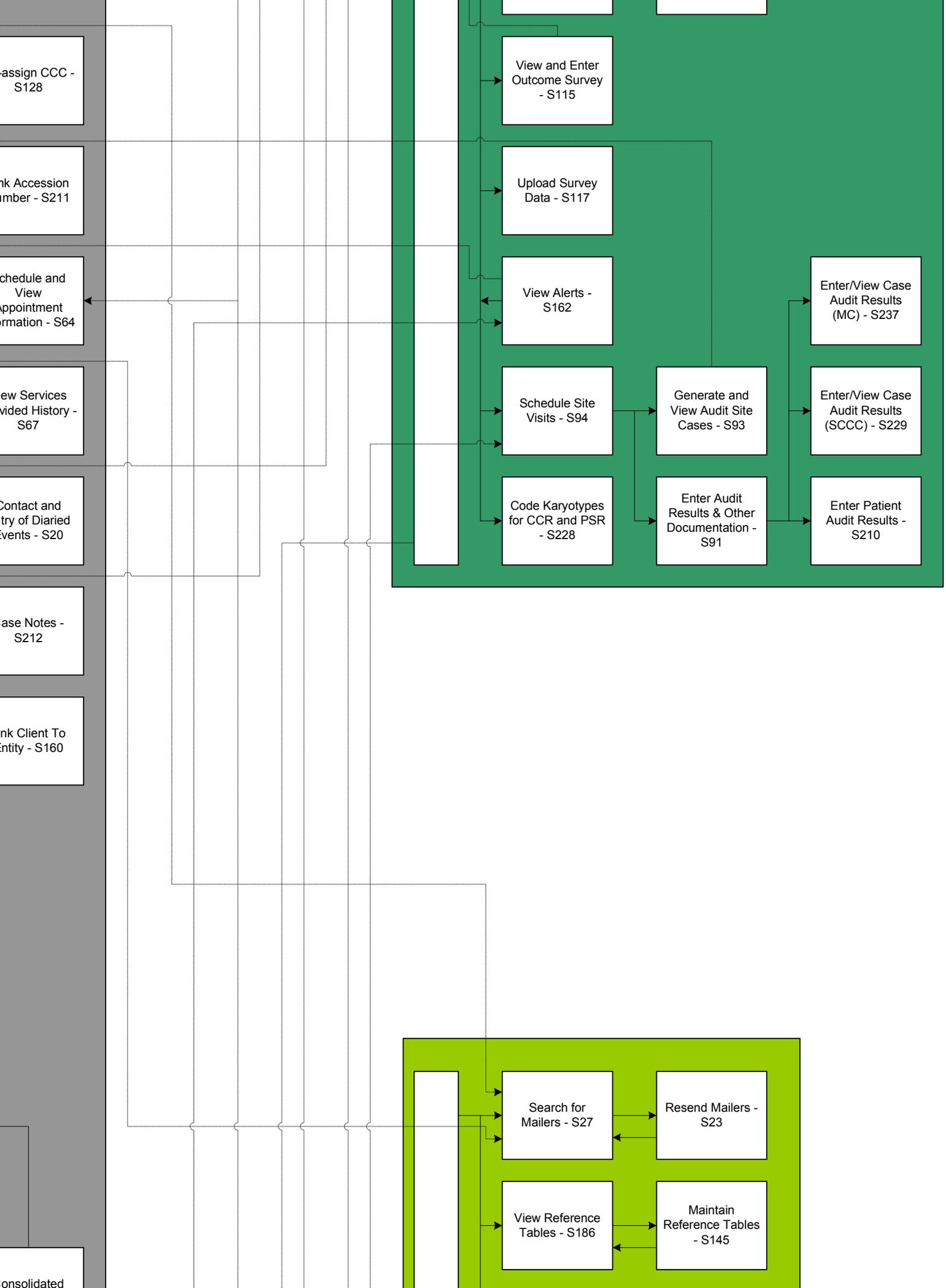


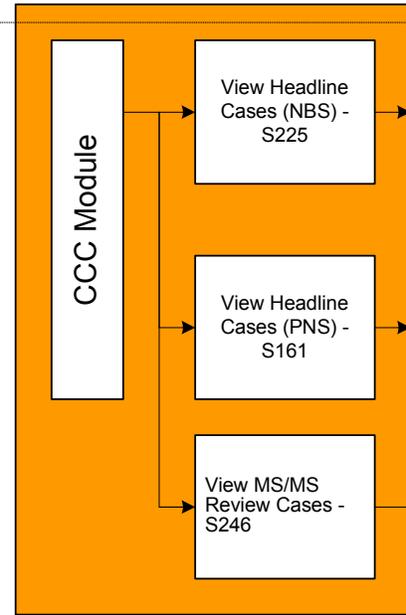
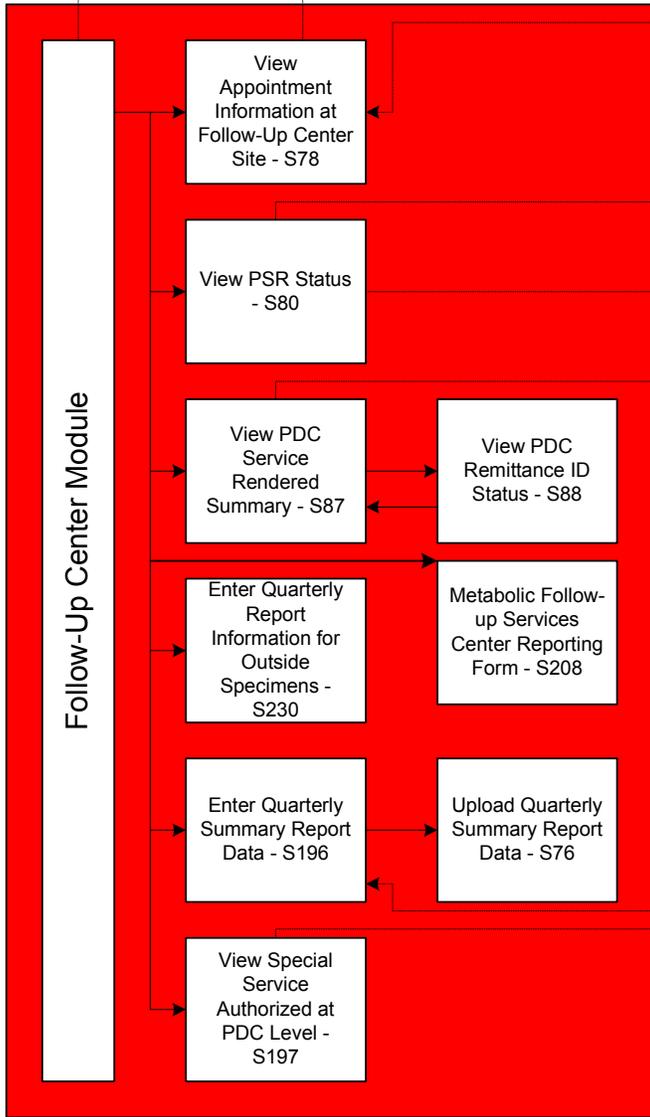
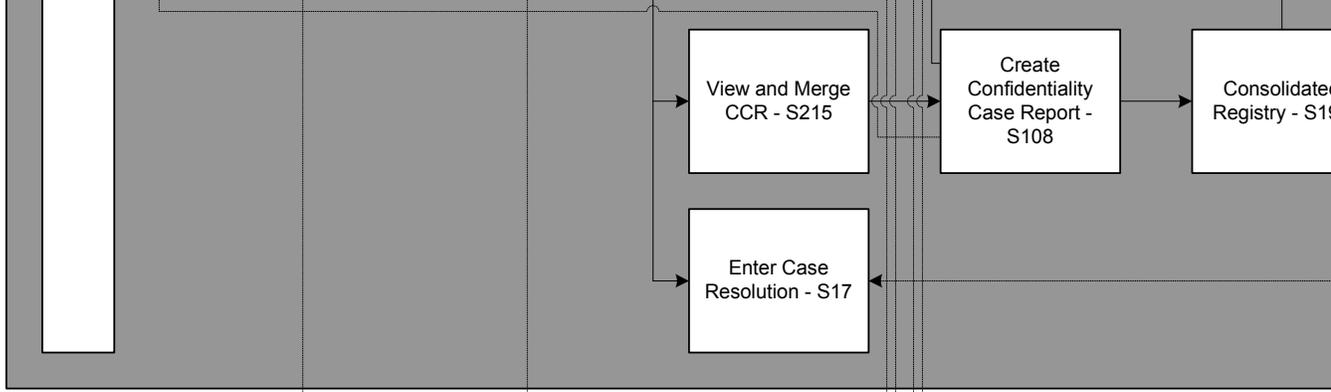


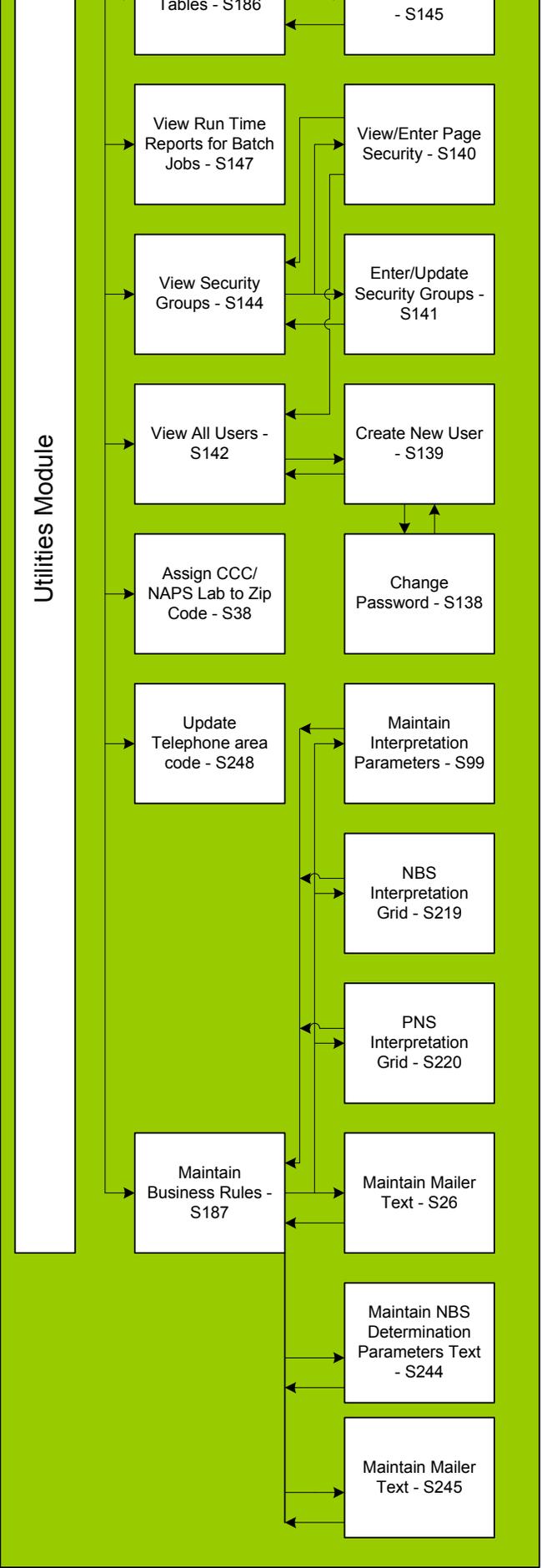
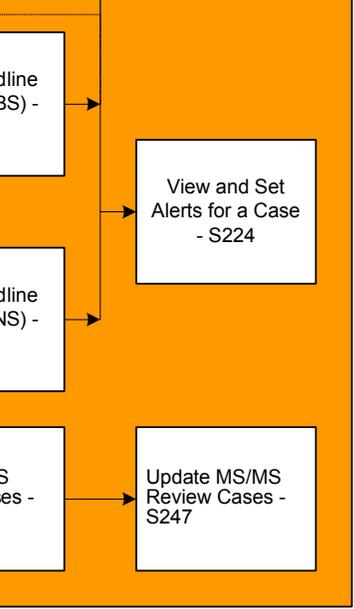
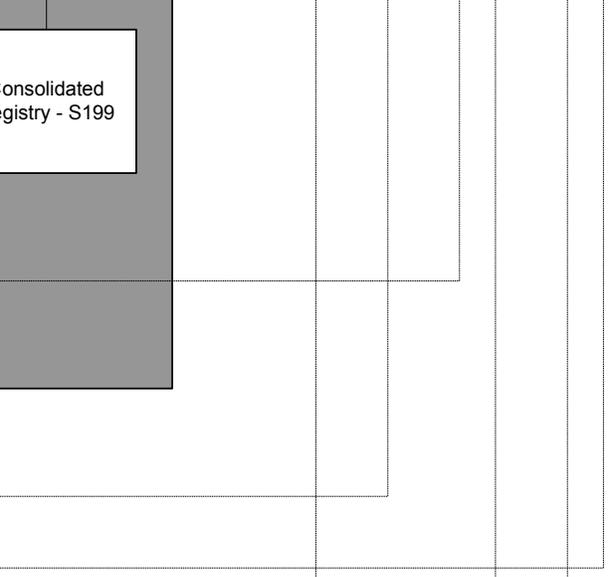


Data Intake Module









Appendix F - Entity Relationship Matrix

ENTITY FROM	RELATIONSHIP TYPE	ENTITY TO	REVERSE RELATIONSHIP	ROLE_DISPLAYED	ADDRESS_TO_REQD.	ADDRESS_FROM_REQD.
Blood Draw Station	is a part of	Corporation	includes			
Blood Draw Station	assigned to	NAPS LAB	assigned to		Y	Y
Hospital	is a part of	Corporation	includes			
Insurer	is a part of	Insurer	includes			
Organization	is a part of	Organization	includes			
PDC	affiliated to	Cytogenetic LAB	affiliates			
PDC Satellite	is a part of	PDC Comprehensive	includes			
Person	assigned to	CCC	assigned to		Y	Y
Person	works for	CCC	employs	Y	Y	
Person	works for	Clinic	employs	Y	Y	
Person	works for	Speciality Care/Follow-up Center	employs	Y	Y	
Person	works for	Government	employs			
Person	works for	Hospital	employs		Y	
Person	works for	Confirmatory Laboratory	employs	Y	Y	
Person	assigned to	NAPS LAB	assigned to	Y	Y	Y
Person	works for	PDC	employs	Y	Y	
Person	works for	Cytogenetic Laboratory	employs	Y	Y	
Person	works for	Insurer	employs		Y	
Person	works for	Local Govt.	employs			
Person	works for	Other Laboratory	employs	Y	Y	
Person	works for	PNS Direct Billing Payer	employs			
Person	works for	Prenatal Diagnosis Center (PDC)	employs			
Person	works for	Sickle Cell Program	employs		Y	
Person	works for	"Corporation"	employs			
Person	works for	Blood Draw Station	employs		Y	
Person	works for	Business Service Provider	employs			

BUSINESS RULES:

- If the relation type is assigned to, then it is mandatory to specify the "ADDRESS_FROM" & "ADDRESS_TO" fields for the relationship.
- If the ROLE or ADDRESS_TO value is 'Y' for a relationship, then the corresponding screen would display the role and Address To textboxes. It would however, NOT be mandatory to fill in these values
- While adding an entity's address belonging to PNS program area, if the client choses to assign a CCC & NAPS lab to the entity, then the assignment of CCC & NAPS lab would happen automatically. This assignment would be based on the ZIP code and would show up as an "assigned to" relationship for the entity.
- While adding an entity belonging to NBS program area, the assignment of a CCC/NAPS Lab would always happen manually.
- For an NBS collection facility, at any given time, only ONE NAPS LAB and only ONE CCC can be assigned.
- For a PNS facility, for each address, there can be only ONE NAPS LAB & only ONE CCC assigned.
- A clinician can be assigned to a CCC or a NAPS LAB, only if the clinician belongs to NBS or PNS or both program areas.
- For each one time provider created in the SIS application, one NAPS LAB & one CCC would automatically be assigned to it. This assignment would happen on basis of the zip code of the provider.

Appendix G – License Number Format Structure

PROVIDER LIST LICENSE FORMATTING

Medical Doctor:

A #####, B #####, C #####, or G #####

Registered Nurse:

RN#####

Nurse Practitioner:

NP #####
NPF#####

Midwives:

Certified Nurse Midwife: CNM #####
Licensed Midwife: LM ###

Licensed Vocational Nurse:

VN #####

Physician's Assistant:

PA #####

Osteopath:

20A #####

Nevada Medical Doctors:

NV 0#####
NV #####

Organization:

ORG##### (Numbers are the ZIP code)

Laboratory:

LAB##### (Numbers are the ZIP code)

Appendix H - XML for Uploading Quarterly Report – Patients

```
<Root>
- <PDC>
  <QR varPDCCode="75c" intYearFrom="2006" intYearTo="2007"
    intQtr="2" intChrom="1" intNTD="2" intKnownImpact="3"
    intQustable="4" intAmnios="50" intAmniosForCVS="40"
    intConfirmPUBS="30" intRptSamples="20"
    varPersonCom="Shailender" chrPHArea="510" chrPHExchange="124"
    chrPHLine="1212" chrPHExt="1234" dtCompleted="06/01/2004"
    chrReviewed="Y" chrSubmit="N" varComments="hello this is a
    comment" />
  <MTRNL chrAGECode="35" intCVS="9" intEA="8" intAMNIO="7"
    intPUBS="6" intDCLND="5" intSAB="4" intOTH="3" intCNLSLNG="2" />
  <MTRNL chrAGECode="37" intAMNIO="5" />
  <MTRNL chrAGECode="38" intCVS="10" />
  <MTRNL chrAGECode="42" intCVS="10" />
  <MTRNL chrAGECode="43" intAMNIO="5" />
  <MTRNL chrAGECode=">45" intCVS="2" />
  <MTRNL chrAGECode="MATERN" intCVS="9" intEA="8" intAMNIO="7"
    intPUBS="6" intDCLND="5" intSAB="4" intOTH="3" intCNLSLNG="2" />
  <FAMILY chrABNType="CHRABN" chrABNCode="DOWNSY" intCVS="9"
    intEA="8" intAMNIO="7" intPUBS="6" intDCLND="5" intSAB="4"
    intOTH="3" intCNLSLNG="2" />
  <FAMILY chrABNType="CHRABN" chrABNCode="TRIS13" intCVS="10"
    />
  <FAMILY chrABNType="CHRABN" chrABNCode="TRIS18" intCVS="1" />
  <FAMILY chrABNType="CHRABN" chrABNCode="CHRABN"
    intAMNIO="5" />
  <FAMILY chrABNType="CHRABN" chrABNCode="OTHER" intCVS="2" />
  <FAMILY chrABNType="NTD" chrABNCode="NTD" intCVS="9" intEA="8"
    intAMNIO="7" intPUBS="6" intDCLND="5" intSAB="4" intOTH="3"
    intCNLSLNG="2" />
  <FAMILY chrABNType="XLINK" chrABNCode="XFRAG" intCVS="10"
    intAMNIO="5" intBIOCHEM="8" intDNA="7" />
  <FAMILY chrABNType="XLINK" chrABNCode="OTHER" intCVS="9"
    intEA="8" intAMNIO="7" intPUBS="6" intDCLND="5" intSAB="4"
    intOTH="3" intCNLSLNG="2" intBIOCHEM="4" intDNA="3" />
  <FAMILY chrABNType="HEMO" chrABNCode="HEMO" intCVS="9"
    intEA="8" intAMNIO="7" intPUBS="6" intDCLND="5" intSAB="4"
    intOTH="3" intCNLSLNG="2" intBIOCHEM="1" intDNA="2" />
  <FAMILY chrABNType="METABO" chrABNCode="TAYSAC" intCVS="9"
    intEA="8" intAMNIO="7" intPUBS="6" intDCLND="5" intSAB="4"
    intOTH="3" intCNLSLNG="2" intBIOCHEM="2" intDNA="1" />
  <FAMILY chrABNType="METABO" chrABNCode="CYSFIB" intCVS="6"
    intBIOCHEM="1" />
```

```
<FAMILY chrABNType="METABO" chrABNCode="OTHER" intCVS="2"
  intBIOCHEM="2" />
<FAMILY chrABNType="OTHHER" chrABNCode="OTHHER" intCVS="9"
  intEA="8" intAMNIO="7" intPUBS="6" intDCLND="5" intSAB="4"
  intOTH="3" intCNSLNG="2" />
<OTHER chrINDCTNCode="ABNULT" intCVS="9" intEA="8"
  intAMNIO="7" intPUBS="6" intDCLND="5" intSAB="4" intOTH="3"
  intCNSLNG="2" />
<OTHER chrINDCTNCode="TEREXP" intCVS="3" />
<OTHER chrINDCTNCode="MULMIS" intCVS="5" />
<OTHER chrINDCTNCode="NXAFP" intCVS="6" />
<OTHER chrINDCTNCode="OTHER" intCVS="8" />
<DEMO intWhite="25" intBlack="25" intNative="25" intMEast="15"
  intAlIndian="11" intCAM="12" intLAOTN="13" intVTNMSE="14"
  intOtherAsian="15" intFLPN="16" intSAMOAN="17" intHWN="18"
  intGUMANIAN="19" intCHI="20" intJPNSE="21" intKOREAN="22"
  intOtherAsianPAC="23" intOther="24" intUnKnown="27" intHISP="5"
  intNONHISP="4" intUnKnownHISP="3" />
<RES chrCNTY="001" intNoOfPatients="25" />
<RES chrCNTY="005" intNoOfPatients="25" />
<RES chrCNTY="051" intNoOfPatients="25" />
</PDC>
</Root>
```

Appendix I – BSS Interface Overview

Business Services System (BSS) Interface Overview

SIS will transmit Patient Services Report (PSR) information to the Genetic Disease Branch Business Services System (BSS) for payment processing. This information will be transmitted two times a month, on the 15th and the last day of each month.

In order for a PSR to be transmitted from SIS to BSS for payment to a PDC, several conditions must be met, as follows:

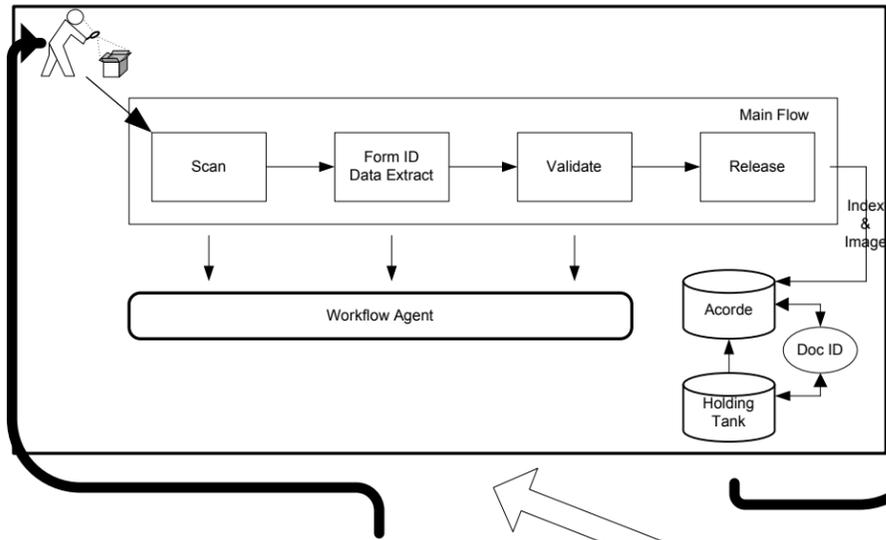
- 1. All inconsistencies for the PSR have been resolved**
2. Any special service identified for payment on the PSR must have been authorized in SIS by GDB.
3. The service has not already been paid.
4. For Amniocentesis services, all above conditions must be met, and “AF_AFP” and “Karyotype” service information must be entered in SIS.
5. Amniocentesis services (AF_AFP and Karyotype) will be paid per fetus unless they are monochromic/monoamniotic twins.
6. All eligible PSRs, where all inconsistencies were resolved within the 15 calendar days preceding the 15th or the last day of each month will be sent from SIS to BSS for payment processing.

The following PSR information will be sent from SIS to BSS:

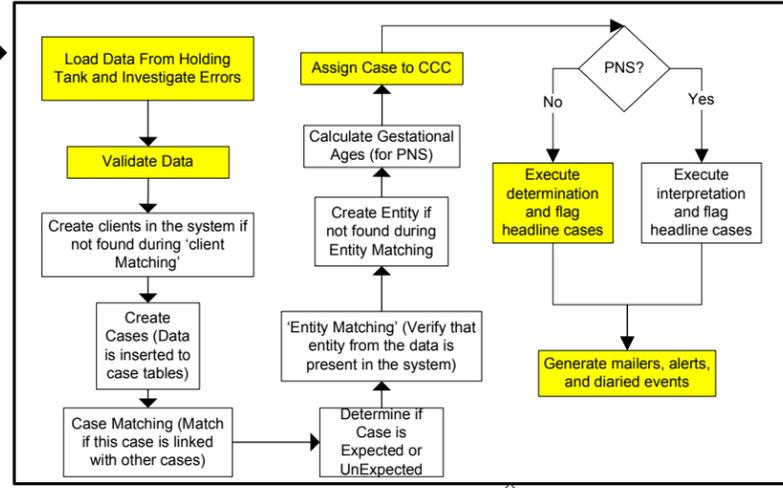
1. PDC Number
2. PDC Satellite
3. PSR Id
4. Accession Number
5. Service Type
6. Service Date
7. Patient last name
8. Patient first name
9. Inconsistency resolved date

SIS

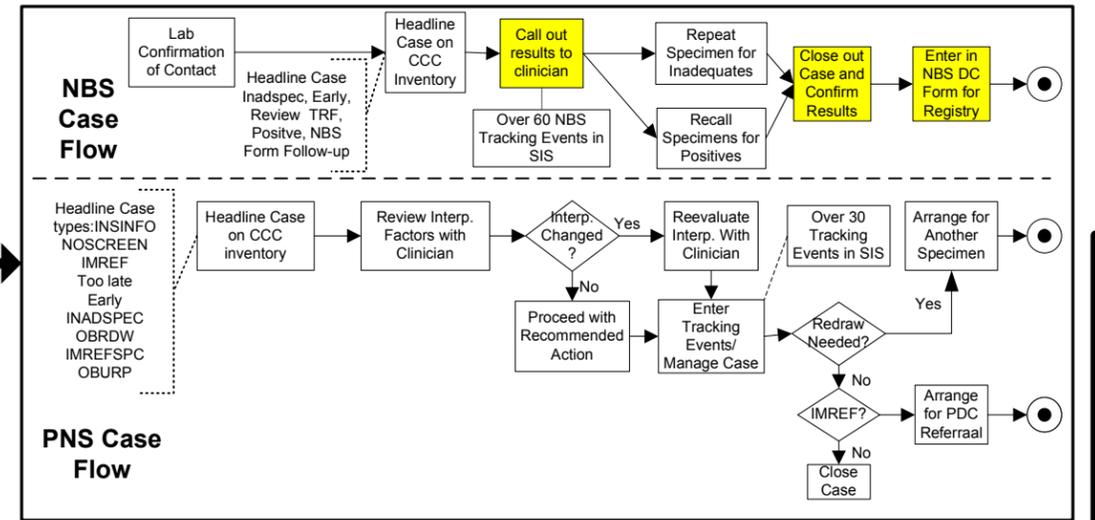
Acquire data



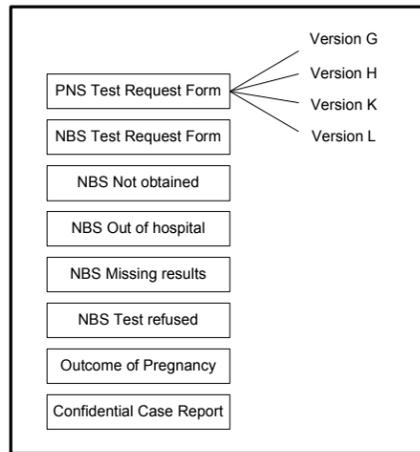
Evaluate case



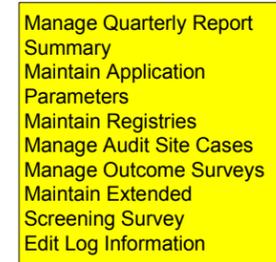
Coordinate services



List of forms



Analyze Data



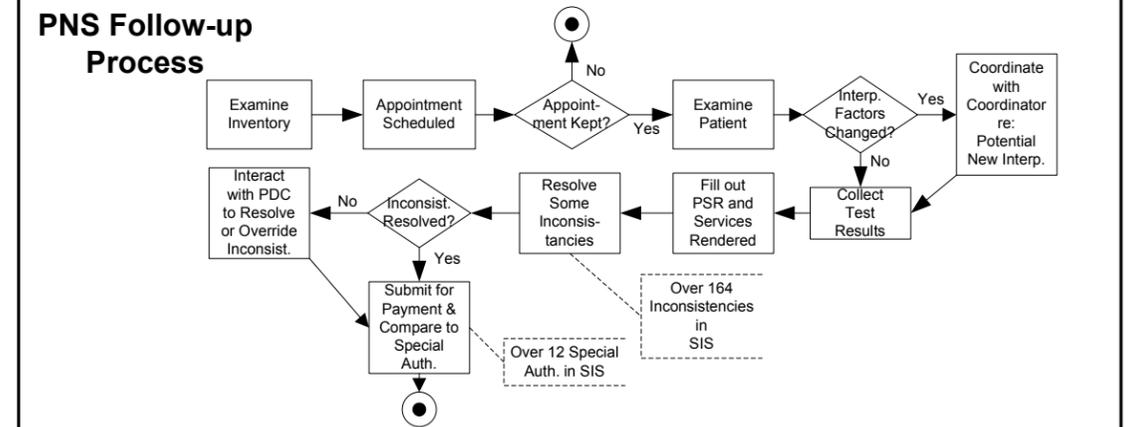
Support Process



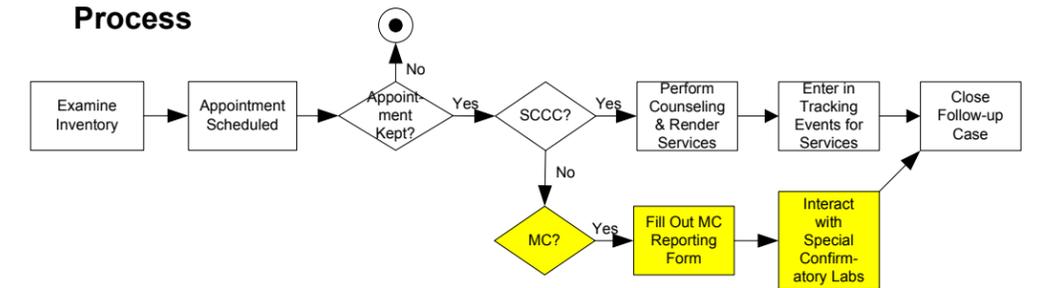
Reports/ Data Warehouse



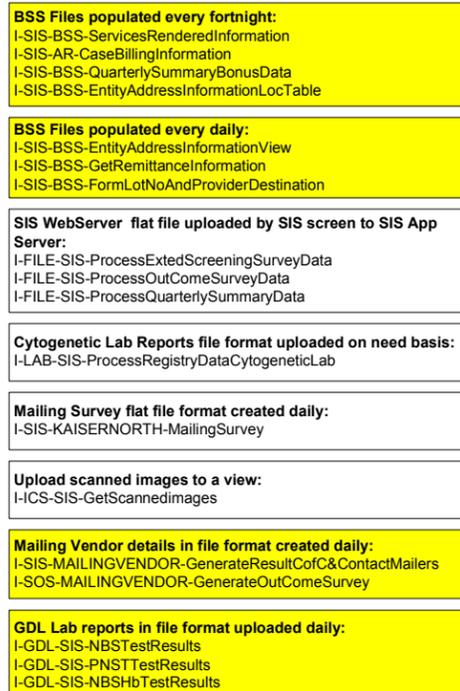
Follow-up On Patient



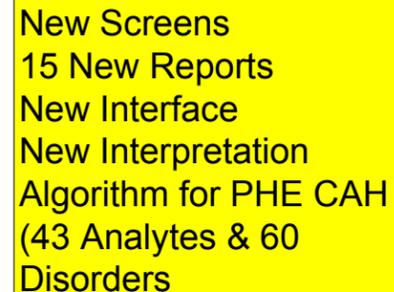
NBS Follow-up Process



Interfaces



Additions



Appendix K - PSR Inconsistency Table

Type Key	
CS	Case Record or Current Status
F	Form
CCC	Case Coordination Center
PI	Policy Issue

#	Type	Description	Text
1	CS, CCC	Case record does not indicate PDC appointment kept by CCC or by PDC	Tracking Event 45 not entered by case coordination center
2	CS, CCC, PI	PDC code field not the same as that entered by CCC in case record	PDC code field entered on the PSR not same as PDC code entered by CCC. Contact the Case Coordinator Center.
3	F, PI	Date fields all "blank"	Dates of service are all blank
4	F, PI	Genetic counseling date field is before the accession date	Genetic Counseling date before laboratory accession date. Verify date.
5	F, PI	Genetic Counseling date field not blank and genetic counseling field "Patient Declined" or "Not Indicated"	Genetic Counseling date entered, but Genetic Counseling was declined or not indicated. Remove date.
6	F, PI	Genetic Counseling date field blank and Genetic Counseling field is "Provided" or "Not authorized"	No Genetic Counseling Date entered, but Genetic Counseling was Provided or Not authorized. Enter date.
7	CS, PI	Genetic Counseling date field not blank and date is greater than 60 days after the accession date	Genetic Counseling Date is greater than 60 days after the accession date. Verify date.
8	F, PI	Genetic Counseling date field not blank, and date is after today's date	Genetic Counseling Date is after the current date. Verify date.
9	F, PI	Genetic Counseling date field not blank and it is a date in the future or date after today's date) or is not a real date, e.g. 12/42/95	Genetic Counseling date is invalid. Verify date.
10	F, PI	Genetic Counseling field is "Provided or Not authorized", Provider name is blank	Genetic Counseling Provided or Not authorized, but the name of person providing genetic counseling was not entered.
11	F, PI	Genetic Counseling field is "Provided or Not authorized", provider name not in entity table	Genetic counseling provided or Not authorized, but provider name for genetic counseling is not approved at this site. Contact GDB.

#	Type	Description	Text
12	F, PI	Genetic Counseling field is "Provided or Not authorized", provider name is "Consultative Sonologist or Amniocentesis Practitioner"	Genetic counseling provided or Not authorized, provider name is "Consultative Sonologist or Amniocentesis Practitioner". Verify name of person providing genetic counseling.
13	F, PI	Ultrasound date field is not blank and it is not a real date, for example 12/42/95.	Ultrasound date is invalid. Verify date.
14	F, CS,PI	Ultrasound date field not blank and date is > 60 days after accession date	Ultrasound date is greater than 60 days after the accession date. Verify date.
15	F,PI	Ultrasound date field is not blank and it is after today's date	Ultrasound date is after current date. Verify date.
16	F,PI	Ultrasound date field before accession day	Ultrasound date before laboratory accession date. Verify date.
17	PI	Ultrasound date field not blank and Genetic Counseling date field is blank and/or Genetic Counseling field is "Declined"	Ultrasound date but no Genetic Counseling date and genetic counseling is declined.
18	F, PI	Ultrasound date field blank and Ultrasound field is "Not authorized or Provided"	No Ultrasound entered date, but ultrasound Provided or Not authorized. Enter date.
19	F, PI	Ultrasound date field is not blank and Ultrasound field is "Patient Declined or not Indicated"	Ultrasound date entered, but Ultrasound declined or not indicated. Remove date.
20	F, PI	Ultrasound field is "Provided or Not authorized", provider name is blank	Ultrasound Provided or Not authorized, but provider name not given. Select Consultative Sonologist's name.
21	PI	Ultrasound field is "Provided or Not authorized", provider name not in entity table	Ultrasound Provided or Not authorized, but provider name for ultrasound is not approved at this site. Contact GDB.
22	F, PI	Ultrasound field is "Provided or Not authorized", provider name is Genetic Counselor name in entity table	Ultrasound Provided or Not authorized, but provider name for ultrasound is a Genetic Counselor name. Enter Consultative Sonologist's Name who performed ultrasound.
23	PI	Ultrasound date field is a date that is after date in amniocentesis date field	Ultrasound date after amniocentesis date. Send to GDB a copy of interpretation factors and documentation of who and when factors verified with patient.

#	Type	Description	Text
24	F, CS,PI	Amniocentesis date can not be after 24 weeks GA - gestational age unless a special authorization is given by an authorized Genetic Disease Branch staff in special authorization log. Special Authorization by either did not have an entry for this accession # or it was denied.	Amniocentesis date cannot be greater than 24 weeks of gestational age unless special authorization and a special authorization was not given. Select amniocentesis as Not Authorized.
25	F, PI	Amniocentesis date is not blank and date is after today's date	Amniocentesis date is after current date. Verify date.
26	F, PI	Amniocentesis date field is not blank and it is a date in the future or not a real date e.g. 12/42/95	Amniocentesis date is invalid. Verify date.
27	F, PI	Amniocentesis date field is before accession day	Amniocentesis date before laboratory accession date
28	F, CS, PI	Amniocentesis field "Provided" and interpretation changed during ultrasound field is "Negative" or "Too early" or "Too late" and a special authorization for amniocentesis not found in the special authorization log or it was denied.	Amniocentesis was provided, but patient's Expanded AFP result changed after ultrasound and no special authorization was given. Select amniocentesis Not Authorized.
29	F, PI	Amniocentesis date field not blank and Amniocentesis field is "Patient Declined or "Not indicated"	Amniocentesis date entered, but Amniocentesis declined or not indicated. Remove date.
30	F, PI	Amniocentesis date field is blank and Amniocentesis field is "Provided" or "Not authorized"	No amniocentesis date entered, but Amniocentesis Provided or Not authorized. Enter date.
31	PI	Amniocentesis date field not blank and genetic counseling date field is blank and genetic counseling field is declined	Amniocentesis date, but no genetic counseling date and genetic counseling declined. Send to GDB a copy of interpretation factor and documentation of who and when factors verified with patient.
32	PI	Amniocentesis date field is not blank and ultrasound date field is blank and ultrasound field is not "Patient Declined"	Amniocentesis date entered; however, there was no ultrasound date entered and it was provided. Enter date.

#	Type	Description	Text
33	F, PI	Amniocentesis field is "Provided or Not authorized", ultrasound result field is "Anencephaly" and special authorization for an amniocentesis not found in the special authorization log or it was denied.	Amniocentesis Provided or Not authorized; Anencephaly present in ultrasound results, no special authorization.
34	F, PI	Amniocentesis field is "Provided or Not authorized", provider name is blank	Amniocentesis Provided or Not authorized, but provider name not given. Enter Amniocentesis Practitioner name.
35	F, PI	Amniocentesis field is "Provided or Not authorized", provider name not in the entity table	Amniocentesis Provided or Not authorized, but provider name for the amniocentesis practitioner not approved at this site. Contact GDB.
36	F, PI	Amniocentesis field is "Provided", provider name for amniocentesis provider name field is "Provider Name for a genetic counselor"	Genetic Counselor provider name in Amniocentesis provider name field
37	F, CS, CCC, PI	Amniocentesis field is "Not indicated" and interpretation changed during ultrasound field is not "Negative" or "Too early" or "Too late" and /or ultrasound result field is not "Oligohydramnios", or "anencephaly without other ultrasound results", or "fetal demise > or = 20 weeks" or "fetal demise < 20 weeks"	Amniocentesis not indicated, but no reason given based on ultrasound change or finding.
38	CS, PI	Fetal tissue karyotype date field is not blank and interpretation changed during ultrasound field is "Negative", or "Too Early" or "Too Late" and special authorization for fetal tissue karyotype not found in special authorization log or it is denied.	Fetal tissue karyotype date, but interpretation changed during ultrasound, so final interpretation changed patient results and no special authorization. Remove fetal tissue karyotype service and its date. Delete grid bar.
39	F, PI	Fetal Tissue Karyotype date field is not blank, and date is > 60 days after the accession date	Fetal tissue karyotype date is greater than 60 days after laboratory accession date. Verify date.
40	F, PI	Fetal Tissue Karyotype date field is not blank, and date is after today's date	Fetal tissue karyotype date is after current date. Verify date.
41	F, PI	Fetal Tissue Karyotype date field is before the accession date	Fetal tissue karyotype date is before laboratory accession date. Verify date.

#	Type	Description	Text
42	F, PI	Fetal Tissue Karyotype date field is not blank and it is not a real date or date in the future, for example 12/42/95	Fetal tissue karyotype date is invalid. Verify date.
43	CS, PI	Fetal Tissue Karyotype field is "Selected", but Ultrasound results field is "anencephaly" and special authorization for fetal tissue karyotype is not found in the special authorization log	Fetal tissue karyotype was provided, and anencephaly present, but there is no special authorization given. Remove Fetal Tissue Karyotype as your selection.
44	CS, PI	Fetal Tissue Karyotype field is selected, but either Amniocentesis field is "Provided" and Karyotype diagnosis field is not "Not Performed" or "Culture Failed" and fields (new #), are not blank or fields (new #) is not blank on this PSR or on previous PSR	Fetal tissue karyotype provided, but patient had previous paid karyotype by amniocentesis. No special authorization given. Delete the Fetal Tissue Karyotype grid bar.
45	F, PI	Under other services, fetal tissue karyotype is selected and the date field is not blank but no karyotype listed in abnormal karyotype result field or Karyotype diagnosis field is not "normal-gender not revealed", or "normal male (include normal variants)", or "normal female (include normal variants)" or "abnormal"	Fetal tissue karyotype date, but no karyotype
46	F, PI	Under other services Fetal Tissue Karyotype is Selected, but pregnancy status field is not "known elective termination after PDC visit" or "fetal loss after PDC visit" (Therefore pregnancy status is equal to "Continuing Pregnancy", or "Patient intends to have fetal reduction" or "patient undecided /lost to follow-up or unknown, or "patient intends to have an elective termination after PDC visit".)	Fetal tissue karyotype was provided, but pregnancy status not appropriate. Verify pregnancy status.
47	F, PI	Amniocentesis is "Provided", Fetal Tissue Karyotype field is selected, and Special authorization field is "No" and special authorization found in special authorization log	Amniocentesis and fetal tissue karyotype were both performed, but no special authorization was not given.

#	Type	Description	Text
48	F, PI	Amniocentesis field is "Provided", Fetal Tissue Karyotype field is " Selected", and Special authorization field is "Yes" and special authorization not found in special authorization log	Amniocentesis and fetal tissue karyotype were both provided, special authorization was not given. Contact GDB.
49	F, PI	Second Opinion Ultrasound date field is blank and Second Opinion Ultrasound field is "Yes."	Second opinion ultrasound was provided but no date of service entered. Enter date.
50	F, PI	Second Opinion Ultrasound field is "Yes" Provider name is blank	Second opinion ultrasound provided, provider name not given. Enter Consultative Sonologist's Name.
51	PI	Second Opinion Ultrasound field is "Yes," Provider name not in the entity table	Second opinion ultrasound provided, but provider name is not approved at this site. Contact GDB.
52	PI	Second Opinion Ultrasound field is "Yes," Provider code is "Genetic counselor name in entity table	Second opinion ultrasound provided, but provider name for ultrasound is a genetic counselor name. Enter Consultative Sonologist's name.
53	F, PI	Second Opinion Ultrasound field is "Yes" but What PDC Referred Patient for Second Opinion Ultrasound field is blank	2nd opinion ultrasound provided, but name of PDC referring for 2nd opinion ultrasound is not given
54	F, PI	What PDC Referred Patient for Second Opinion Ultrasound field is not blank, and Second Opinion Ultrasound field is "No".	This ultrasound was not a second opinion ultrasound; therefore, remove the referring PDC code.
55	F, PI	What PDC Referring Patient for Second Opinion Ultrasound field is not PDC code in list of State-approved PDC/Follow-up Centers/NOT in entity table	Invalid code referring PDC. Contact GDB.
56	F, PI	Prenatal Diagnosis Center/Satellite Code field is same PDC for What PDC Referring Patient for Second Opinion Ultrasound field and special authorization field is "Yes" and special authorization not found in special authorization log	Referring PDC for second opinion ultrasound was not different from PDC providing initial ultrasound and no special authorization was not given.

#	Type	Description	Text
57	F, PI	Prenatal Diagnosis Center/Satellite Code field is same PDC for Which PDC Referring Patient for Second Opinion Ultrasound field code and special authorization field is "No" and special authorization found in special authorization log	Referring PDC for the second opinion ultrasound was not different from PDC providing initial ultrasound and special authorization was given. Answer "Yes" to special authorization question and provide last name of person giving special authorization. answered no
58	F, PI	OTHER services field is placental biopsy, or fetal tissue karyotype, or percutaneous umbilical blood sampling OTHER date field is blank	Service(s) under Other were provided, but no date entered. Enter date.
59	F, CS,PI	OTHER date field is not blank, and date is > 60 days after the accession date	The date for services under other is greater than 60 days after laboratory accession date. Verify date.
60	F, CS,PI	Other date field is before the accession date	The date for service(s) under Other is before laboratory accession date. Verify date.
61	F, PI	OTHER date field is not blank and Amniocentesis date field is "date that is greater than the date in OTHER field" and Ultrasound field is not "Declined"	The date for service(s) under Other is before amniocentesis date. Verify date.
62	F, PI	OTHER date field is not blank and it is not a real date, for example 12/42/95.	The date for service(s) under Other is invalid. Verify date.
63	PI	SLOS testing is "Provided" and Expanded AFP Referral due to field is not "Smith-Lemli-Opitz syndrome" but Amniocentesis field is "Provided" or "Not Authorized."	Referral is not for SLOS; therefore, SLOS diagnostic testing is Not Authorized. Change SLOS testing status to Not Authorized.
64	F, PI	Other date field is not blank, but no type of service selected such as "Placental Biopsy" or "Percutaneous Umbilical Blood Sampling (PUBS)"	The date for service(s) under Other was given, but the service (such as Fetal Tissue Karyotype, Placental Biopsy, Percutaneous Umbilical Blood Sampling) was not selected. Specify a service.
65	CS, F, PI	Smith-Lemli-Opitz syndrome testing is "Provided" or "patient declined" and Expanded AFP Referral due to field is not "Smith Lemli-Opitz"	Smith Lemli-Opitz syndrome diagnostic testing was provided or patient declined, but the patient's referral indication was not positive for SLOS.

#	Type	Description	Text
66	F, PI	Smith-Lemli-Opitz syndrome testing is "Provided" or "Not Authorized," and Smith Lemli-Opitz Results field is blank (means "fetus not affected", or "fetus affected", or "test not performed" were not selected)	Smith Lemli-Opitz syndrome diagnostic testing was provided, but no Smith Lemli-Opitz syndrome results were given. Enter SLOS results.
67	F, PI	Smith Lemli-Opitz syndrome Diagnostic Testing not "Provided" or "Not Authorized" or is equal to "Not Indicated" or "Patient Declined" and SmithLemli-Opitz Results field is "Fetus Affected" or "Fetus Not Affected" or "Test Not Performed"	Smith-Lemli-Opitz syndrome testing was not indicated or the patient declined, but there are Smith-Lemli-Opitz syndrome diagnostic testing results.
68	F, PI	Under Other services placental biopsy or percutaneous umbilical blood sampling is selected, Provider Name is blank.	Under Other services placental biopsy or percutaneous umbilical blood sampling (PUBS) was selected, but provider name not given. Enter Provider Name.
69	PI	Under Other services placental biopsy or percutaneous umbilical blood sampling is selected but Provider name is not in the entity table.	Under Other services placental biopsy or percutaneous umbilical blood sampling (PUBS) was selected, but provider name for amniocentesis practitioner is not approved at this site. Contact GDB.
70	PI	Under Other services placental biopsy or percutaneous umbilical blood sampling is selected, but Provider name is Genetic counselor name in entity table.	Under other services placental biopsy or percutaneous umbilical blood sampling (PUBS) was selected, but provider name is a genetic counselor name.
71	CS, CCC, PI	Interpretation factor changed during counseling field is blank, Case Record changed for either the weight, and/or maternal age, and/or smoking, and/or insulin dependent diabetes, and/or race, and/or ethnicity, and/or # of fetuses or gestational age by Case Coordinator Center	The patient's Expanded AFP interpretation factor(s) changed during counseling the Case Coordinator Center was informed of the change in weight, or maternal age, or smoking, or insulin dependent diabetes, or number of fetueses or gestational age, or race or ethnicity. Please indicate this interpretation factor change on the patient service report (PSR). If an error was made, contact the Case Coordinator Center.

#	Type	Description	Text
72	CS, CCC, PI	Interpretation changed during genetic counseling is "Negative", or "Too Early", "Too Late", or "Other Screen Positive" and no change to last four digits of the overall-interpretation code* in Case Record programming language from the grid used to calculate interpretations and interpretation changes	Interpretation change during genetic counseling, no interpretation changed in case record. Contact Case Coordinator Center.
73	CS, CCC, PI	Interpretation factor changed during ultrasound field is blank, Case Record changed for gestational age by Case Coordinator Center	Gestational age changed during ultrasound by the PDC and was communicated to the Case Coordinator Center (CCC). Enter gestational age changed during ultrasound.
74	CS, CCC, PI	Interpretation factor changed during ultrasound field is blank, Case Record changed for number of fetuses by Case Coordinator Center	Number of fetuses changed during ultrasound by the PDC and was communicated to the Case Coordinator Center (CCC). Enter number of fetuses changed during ultrasound.
75	CS, CCC, PI	Ultrasound date field is not blank or ultrasound is "Provided", Case record changed for gestational age by Case Coordinator Center and interpretation factors changed during genetic counseling field is "Too Early", or "Too Late", or "Negative" or "Other Screen Positive"	Expanded AFP Screening results changed during genetic counseling. Change ultrasound to "Not Authorized"
76	CS, CCC, PI	Interpretation changed during ultrasound field is "Negative", or "Too Early", or "Too Late or "Other Screen Positive" and no change to last four digits of the overall-interpretation code* in Case Record programming language from the grid used to calculate interpretations and interpretation changes	The patient's final Expanded AFP Screening result changed during ultrasound. Contact Case Coordinator Center.
77	CS, CCC, PI	Gestational age field not blank and no change to gestational weeks in Case Record by Case Coordinator Center	Gestational age changed during counseling. Contact Case Coordinator Center
78	CS, CCC, PI	Weight field is not blank and weight has not changed in Case Record by Case Coordinator Center	Weight changed during counseling. Contact Case Coordinator Center

#	Type	Description	Text
79	CS, CCC, PI	Maternal age field is not blank and there was no change to mother's birth date in Case Record by Case Coordinator Center	Maternal age changed during counseling. Contact Case Coordinator Center
80	CS, CCC, PI	Insulin-Dependent Diabetes field is not blank and no change to Insulin Dependent Diabetes in Case Record by Case Coordinator Center	Insulin dependent diabetes changed during counseling. Contact Case Coordinator Center
81	CS, CCC, PI	Race field is not blank and no change to race in Case Record by Case Coordinator Center	Race changed during counseling. Contact Case Coordinator Center
82	CS, CCC, PI	Hispanic (Race/Ethnicity) field is not blank and no change to Hispanic question in Case Record by Case Coordinator Center	Hispanic (ethnicity) changed during counseling. , no change in hispanic status in case record, Contact Case Coordinator Center
83	CS, CCC, PI	Number of fetuses field is not blank and the number of fetuses has not changed in Case Record by Case Coordinator Center	Number of fetuses changed during counseling. , Contact Case Coordinator Center
84	CS, CCC, PI	Smoking field is not blank and no change to Smoking question in Case Record by Case Coordinator Center	Smoking changed during counseling. Contact Case Coordinator Center
85	CS, CCC, PI	Number of fetuses field is not blank and the number of fetuses has not changed in Case Record by Case Coordinator Center and Ultrasound results field is not "fetal demise > or = 20 weeks" or "fetal demise < 20 weeks"	Number of fetuses changed during ultrasound. Contact Case Coordinator Center
86	CS, CCC, PI	Number of fetuses in field is not equal to the number of fetuses in Case Record and ultrasound results field is not "fetal demise < 20 weeks" or "fetal demise > or = 20 weeks"	Number of fetuses on the patient service report (PSR) is not the same number of fetuses in the patient's Expanded AFP results and a fetal demise was not indicated on ultrasound. Contact Case Coordinator Center.
87	CS, CCC, PI	Interpretation factor during ultrasound field is not blank for gestational age, but case record for gestational age was not changed in case record by Case Coordinator Center.	If the gestational age changed during ultrasound, contact the Case Coordinator Center. If the gestational age did not change during the ultrasound, remove selection of "gestational age" as an interpretation factor that changed during ultrasound.

#	Type	Description	Text
88	PI	Special authorization field is "Yes", but no special authorization found in special authorization log	Special authorization answered yes, but no special authorization was given. Replace "Yes" with "No" and Remove GDB staff person's last name.
89	PI	Special Authorization field is "Yes" but service(s) provided in fields 15, 21, 27, 32, 37, 41, 47, 38,40,39, 51,42, 43, 44, 45 , 54, 56 do not match service(s) in the special authorization log approved by GDB staff.	Special authorization service(s) does not match what was approved by GDB staff
90	PI	Second Opinion Ultrasound field is "Yes," Special authorization approved by GDB field is "No" and AF-AFP on first PSR AF-ChE is "blank" or is "less than or equal to 2.0 M.o.M."	Second opinion ultrasound was provided, but AF-AFP not greater than or equal to 2.0 M.o.M. on first PSR submitted and no special authorization was given. Select "Not Authorized" in ultrasound field and override inconsistency.
91	F, PI	Ultrasound Results field is "Anencephaly" for any fetus A-E, Bi-parietal Diameter is not blank	Bi-parietal diameter was given, but anencephaly present on ultrasound. Remove BPD measurement after verifying anencephaly was an ultrasound finding.
92	F, PI	Ultrasound results field is not blank for any fetus A-E and Ultrasound date field is blank	Ultrasound result, but no ultrasound date. Enter date.
93	F, PI	Results for any fetus A-E in Bi-Parietal Diameter field, and in Ultrasound results field for any fetus A-E, but Ultrasound field is "Declined" or "Not Indicated"	Ultrasound result, but ultrasound declined or not indicated. Either remove ultrasound findings or select ultrasound Provided.
94	F, PI	Ultrasound results field is "No Abnormality on Ultrasound" and "Pregnancy not Detected" for any fetus A-E) For example- fetus A cannot have no abnormality on ultrasound and have some type of abnormality-see list of abnormalities divide up by body systems	Ultrasound results are both selected for "no abnormality on ultrasound" and "pregnancy not detected" or "a specify abnormality" was selected. Verify ultrasound results.
95	F, PI	All Ultrasound results fields are blank for any fetus A-E and Ultrasound date field is not blank for any fetus A-E	No ultrasound result, but there is an ultrasound date. Enter ultrasound results.

#	Type	Description	Text
96	F, PI	Number of fetuses field is not equal to number of ultrasound results in the Ultrasound results field. For example, there are 3 fetuses noted in field number of fetuses in this pregnancy (include fetal demises) #13; however, in the Ultrasound results field ultrasound findings #31 only the result for fetus A and B are noted. Fetus C ultrasound results are missing. Also, the ultrasound service must be not authorized or provided.	Number of fetuses indicated is not equal to the number of fetuses that there are ultrasound results for.
97	F, PI	Ultrasound field is "Provided or Not authorized", but Bi-Parietal Diameter field is blank for any fetus A-E unless "Too Early" selected in field if interpretation changed during ultrasound indicate final interpretation #26 or "anencephaly" not selected in field ultrasound findings # 31	Ultrasound provided or Not authorized, but no bi-parietal diameter (BPD) result for any fetus A-E
98	F, PI	Amniotic fluid alphafetoprotein (AF-AFP) result field is greater than 45.00 for any fetus A-E-can allow after warning	Amniotic fluid alphafetoprotein (AF-AFP) value greater than 45.00. Verify M.o.M. results.
99	F, PI	Amniotic fluid alphafetoprotein (AF-AFP) result field is greater or equal to 2.00 M.o.M. for any fetus A-E and AF-AChE field is "not performed" for any fetus A-E	Amniotic fluid alphafetoprotein (AF-AFP) greater or equal to 2.00 M.o.M., but there is no amniotic fluid acetylcholinesterase (AF-AChE) result (positive or negative). Enter AF-AChE result.
100	CS, PI	Second Opinion Ultrasound field "Yes" and on first PSR Amniotic fluid alphafetoprotein (AF-AFP) result field #37 not = "greater than or equal to 2.00 M.o.M." for any fetus A-E and AF-AChE result field #40 not = "Positive" for any fetus A-E	Second opinion ultrasound provided, but amniotic fluid alphafetoprotein (AF-AFP) less than 2.00, and amniotic fluid acetylcholinesterase (AF-AChE) result not positive
101	F,PI	Amniotic fluid alphafetoprotein (AF-AFP) field is blank and If AF-AFP not available give reason field is blank	No amniotic fluid alphafetoprotein (AF-AFP) and no reason given. Enter reason.

#	Type	Description	Text
102	F,PI	Amniotic fluid alphafetoprotein (AF-AFP) field is not blank and if AF-AFP not available give reason field is "Not Performed" or "Uninterpretable"	Amniotic fluid alphafetoprotein (AF-AFP) result; however, also selected that amniotic fluid alphafetoprotein (AF-AFP) was not performed or uninterpretable.
103	F,PI	Karyotype Diagnosis field is all blank for any fetus A-E and Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank for any fetus A-E and Adequate fluid collected field is "Yes" for any fetus A-E and Karyotype Diagnosis field is not "Culture failed" for any fetus A-E.) For example, Karyotype Diagnosis field is all blank for fetus A and Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank for fetus A and Adequate fluid collected field is "Yes" for fetus A and Karyotype Diagnosis field is not "Culture failed" for fetus A. This is the same statement for fetus B, C, D, and E.	Amniotic fluid collected and culture did not fail but there is no karyotype result. Enter karyotype result.
104	F,PI	Adequate fluid collected field is "No" for any fetus A-E, but AF-AChE field "Positive" or "Negative" for any fetus A-E	Amniotic fluid not adequate, but amniotic fluid acetylcholinesterase (AF-AChE) positive or negative
105	F,PI	Karyotype Diagnosis field is blank for any fetus A-E or Abnormal Karyotype result/Cytogenetic diagnosis field is blank for any fetus A-E, and AF-AChE field is either "Positive" or "Negative" for any fetus A-E	Amniotic fluid acetylcholinesterase (AF-AChE) positive or negative, but no karyotype.
106	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not blank for any fetus A-E and/or Karyotype Diagnosis field is "Normal-gender not revealed", or "Normal Male", or "Normal Female", or "Abnormal", or "Culture failed" for any fetus A-E and ultrasound result field is "Pregnancy not detected" for any fetus A-E	Karyotype result, but pregnancy not detected.

#	Type	Description	Text
107	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not blank for any fetus A-E, and/or Karyotype Diagnosis field is "Normal-gender not revealed", or "Normal Male", "Normal Female", or "Abnormal" for any fetus A-E and Interpretation changed during ultrasound field is "Negative", or "Too Early", or "Too Late"	Karyotype result, but a change during the PDC ultrasound, and/or final Expanded AFP result changed to negative, too early, or too late. A special authorization was not given. Select amniocentesis Not Authorized.
108	F,CS,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not blank for any fetus A-E, and/or Karyotype Diagnosis field is "Normal-gender not revealed", or "Normal Male", or "Normal Female", or "Abnormal" for any fetus A-E and Ultrasound results field is fetal demise without ultrasound abnormalities "any of the abnormalities in the list or other comment" and Expanded AFP Referral field is not "Trisomy 18" or "Smith-Lemli-Opitz syndrome" or "Trisomy 18 and Smith-Lemli-Opitz syndrome"	Karyotype result, but there was a fetal demise without any fetal ultrasound abnormality, and Expanded AFP indication for referral is not trisomy 18 screen positive and/or not SLOS screen positive. Select amniocentesis Not Authorized.
109	F,CS,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not blank for any fetus A-E and/or Karyotype Diagnosis field is "Normal-gender not revealed", or "Normal Male", or "Normal Female", or "Abnormal" for any fetus A-E and Ultrasound results field is "anencephaly" and "no other ultrasound abnormality" for any fetus A-E and Expanded AFP Referral due to Screen Positive for field is not "Trisomy 18" or "Smith Lemli-Opitz syndrome" or "Trisomy 18 and Smith Lemli-Opitz syndrome"	Karyotype result and anencephaly present on ultrasound without other fetal abnormalities, and Expanded AFP referral indication is screen positive for any indication. Select amniocentesis Not Authorized.

#	Type	Description	Text
110	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not blank for any fetus A-E and/or Karyotype Diagnosis is "Normal-gender not revealed", or "Normal Male", "Normal Female", or "Abnormal" for any fetus A-E, and Amniocentesis date field is blank or Fetal Tissue Karyotype is not selected for or Other date field is blank	Karyotype result, but no date of service. Enter date of service for amniocentesis or fetal tissue karyotype.
111	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field #56 not = "blank" for any fetus A-E and/or Karyotype Diagnosis field #51 = "Normal-gender not revealed", or "Normal Male", or "Normal Female", or "Abnormal" for any fetus A-E, and Adequate Amnio Fluid Collected field #36 = "No" for any fetus A-E	Karyotype result, but adequate amniotic fluid was not collected. If amniotic fluid was not collected, then karyotype result is not possible. If karyotype result is the result of fetal tissue karyotype, then select fetal tissue karyotype.
112	F,PI	1) Adequate Amniotic fluid = Yes and Karyotype diagnosis field = blank and Abnormal karyotype result/cytogenetic diagnosis field = blank; 2) Adequate Amniotic fluid = Yes and Karyotype diagnosis field = not performed.	Amniotic fluid adequate, but no karyotype. Enter karyotype result or enter amniotic fluid as not adequate.
113	F,PI	Adequate Amnio Fluid Collected field is "Yes", but AF-AFP results field is blank for any fetus A-E and If AF-AFP not available give reason field is not "Not Performed" or not "Uninterpretable"	Amniotic fluid adequate, but no amniotic fluid alphafetoprotein (AF-AFP) and no reason given for why no AF-AFP result. Enter reason.
114	F,PI	Adequate Amnio Fluid Collected field is "No", but AF-AFP field is not blank for any fetus A-E	Amniotic fluid not adequate, but amniotic fluid alphafetoprotein (AF-AFP) given. Verify that amniotic fluid was not adequate.
115	F,PI	Amniocentesis field is "Declined" or "Not indicated", but AF-AFP results field is not blank for any fetus A-E	Amniocentesis declined or not indicated, but amniotic fluid alphafetoprotein (AF-AFP) result. Remove AF-AFP result.
116	F,PI	AF-AFP result field is blank, but Adequate Amnio Fluid Collected field is "Yes" and Ultrasound Results field is not "fetal demise" or "anencephaly"	No AF-AFP, but adequate fluid collected. Enter AF-AFP result.

#	Type	Description	Text
117	F,PI	Expanded AFP Referral in case record not "Smith Lemli-Opitz" and SLOS results field is "Fetus Affected" or "Fetus Not Affected" or "Test Not Performed"	SLOS results, but referral is not SLOS positive. Select Smith-Lemli-Opitz syndrome Not Authorized or remove SLOS results.
118	F,PI	Expanded AFP Referral due to screen positive for field is in Case Record not "Smith Lemli-Opitz" and 7-Dehydrocholesterol ng level field is not blank	7-dehydrocholesterol result; however, referral is not positive for SLOS. If patient's amniotic fluid had SLOS diagnostic testing, then select SLOS Not Authorized. If amniotic fluid not tested for SLOS, remove 7-dehydrocholesterol result.
119	F,PI	Expanded AFP Referral due to screen positive for field is in Case Record not "Smith Lemli-Opitz" and 8-Dehydrocholesterol ng level field is not blank	8-dehydrocholesterol result; however, referral is not positive for SLOS. If patient's amniotic fluid had SLOS diagnostic testing, then select SLOS not Authorized. If amniotic fluid not tested for SLOS, remove 8-dehydrocholesterol result.
120	F,PI	Expanded AFP Referral due to screen positive for field is in Case Record not "Smith Lemli-Opitz" and Can 8-Dehydrocholesterol be detected field is "Yes"	8-dehydrocholesterol detected; however, referral is not positive for SLOS. If patient's amniotic fluid had SLOS diagnostic testing, then select SLOS Not Authorized. If amniotic fluid not tested for SLOS, remove 8-dehydrocholesterol result.
121	F,PI	Expanded AFP Referral due to screen positive for field is in Case Record not "Smith Lemli-Opitz" and Can 8-Dehydrocholesterol be detected field is "No"	8-dehydrocholesterol not detected; however referral is not positive for SLOS. If patient's amniotic fluid had SLOS diagnostic testing, then select SLOS Not Authorized. If amniotic fluid not tested for SLOS, remove 8-dehydrocholesterol result. but SLOS screen positive not in case record
122	F,PI	Expanded AFP Referral due to screen positive for field is in Case Record "Smith Lemli-Opitz", Amniocentesis field is "Provided or Not authorized" and SLOS testing is = "Provided" or "Not Authorized"	No SLOS results, but SLOS diagnostic testing was provided. Enter SLOS results.
123	F,PI	Smith Lemli-Opitz Results field is "Fetus Affected", 7-Dehydrocholesterol ng level field is blank	SLOS result fetus affected, but no 7-dehydrocholesterol results. Enter 7-DHC results.

#	Type	Description	Text
124	F,PI	Smith Lemli-Opitz Results field is "Fetus Not Affected", 7-Dehydrocholesterol ng level field is blank	SLOS result fetus not affected, but no 7-dehydrocholesterol results. Enter 7-DHC results.
125	F,PI	Smith Lemli-Opitz Results field is "Fetus Affected", 8-Dehydrocholesterol ng level field is "blank"	SLOS result fetus affected, but no 8-dehydrocholesterol results. Enter 8-DHC results.
126	F,PI	Smith Lemli-Opitz Results field is "Fetus Not Affected", Can 8-Dehydrocholesterol be detected field is not blank. Blank refers to either "Yes" or "No" not being selected	SLOS result fetus not affected, but 8-dehydrocholesterol results not detected. Answer Yes or No to 8-dehydrocholesterol detected level question.
127	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not blank for any fetus A-E or Karyotype Diagnosis field is "Normal-gender not revealed", or "Normal Male", or "Normal Female", or "Abnormal" and Karyotype Diagnosis field is "Culture failed" for any fetus A-E) For example, if fetus A has a normal or abnormal karyotype, culture failed cannot be selected for fetus A	Culture failed, but karyotype given. Either remove culture failed or remove karyotype result.
128	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank for any fetus A-E and Karyotype Diagnosis field is blank" for any fetus A-E and Amniocentesis date field is not blank for any fetus A-E or Fetal Tissue Karyotype date field is selected for under other services and date field for other services is not blank for any fetus A-E	No karyotype result, but amniocentesis date or fetal tissue karyotype date. Enter karyotype result.
129	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank for any fetus A-E and Karyotype Diagnosis field is blank for any fetus A-E and Amniocentesis field is "Provided" for any fetus A-E or Fetal Tissue Karyotype is selected under Other services for any fetus A-E	No karyotype result, but the patient had amniocentesis or fetal tissue karyotype service.

#	Type	Description	Text
130	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not blank for any fetus A-E, or Karyotype Diagnosis field is "Abnormal" for any fetus A-E and Cytogenetic Lab Specimen Number field is blank for any fetus A-E	No cytogenetic lab specimen number, but karyotype result. Enter cytogenetic lab specimen number.
131	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank for any fetus A-E, or Karyotype Diagnosis field is not "Normal-gender not revealed", "Normal Male", "Normal Female", or "Abnormal" for any fetus A-E, but Code of Lab Completing Study field is not blank for any fetus A-E	No karyotype result, but cytogenetic lab code entered. Remove lab code or enter karyotype.
132	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank for any fetus A-E, or Karyotype Diagnosis field is not "Normal-gender not revealed", or "Normal Male", or "Normal Female", or "Abnormal" for any fetus A-E, but Name of Lab Completing the study field is not = "blank" for any fetus A-E	No karyotype result, but name of lab completing study entered. Remove lab name or enter karyotype.
133	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank for any fetus A-E, or Karyotype Diagnosis field is not "Normal-gender not revealed", or "Normal Male" or "Normal Female" or "Abnormal" for any fetus A-E, but Cytogenetic Lab Specimen Number field is not blank for any fetus A-E	No karyotype result, but cytogenetic specimen number entered. Remove this number.

#	Type	Description	Text
134	F,PI	Karyotype Diagnosis field is equal to both "Normal Male or Normal Female or Normal-gender not revealed" and "Abnormal" for any fetus A-E) For example, either both normal and abnormal or both normal male and abnormal or both normal female and abnormal karyotype diagnosis selected in field #52 for fetus A. This inconsistency would not be generated if field #52 is restricted to only one choice per fetus (A-E)	Both normal and abnormal karyotype were selected. Enter either normal karyotype or abnormal karyotype- only one karyotype result per fetus.
135	F,PI	Karyotype Diagnosis field is "Not Performed" for any fetus A-E, but Cytogenetic Lab Specimen Number field is not blank for any fetus A-E	Karyotype not performed, but cytogenetic specimen number entered. Remove this number or verify karyotype not performed.
136	F,PI	Karyotype Diagnosis field is "Not Performed", but name of Lab Completing Study field or Lab Code Number field not blank	Karyotype not performed, but cytogenetic lab code number or lab name entered. Remove lab code or remove lab name or verify karyotype not performed.
137	F,PI	Karyotype Diagnosis field is "Not Performed and Cultured Failed", or "Not Performed and Normal male" or "Not Performed and Normal Female", or "Not Performed and Normal-gender not revealed", or "Not Performed and Abnormal" also selected for any fetus A-E. For example, if fetus A is equal to "not performed", it cannot also be equal to "normal male" or "normal female" or "normal-gender not revealed" or "abnormal". Field should be restricted to one choice	Karyotype not performed, but karyotype result entered or culture failed. Select either karyotype not performed and remove karyotype result or remove karyotype not performed and leave karyotype results and remove culture failed.
138	F,PI	Karyotype Diagnosis field is "Not Performed" for any fetus A-E, but Abnormal Karyotype Result/Cytogenetic Diagnosis is not "blank" for any fetus A-E	Karyotype not performed, but abnormal karyotype ISCN result. Remove karyotype not performed and select abnormal or Remove abnormal karyotype-ISCN result and select karyotype not performed.

#	Type	Description	Text
139	F,PI	Karyotype Diagnosis field is both "Normal male" and "Normal Female" or "Normal male and Normal-gender not revealed", or "Normal female and Normal-gender not revealed" for any fetus A-E) For example, normal male and normal female karyotypes both selected for fetus A-cannot have this occur. If drop-down box choose only one	Both normal male and female karyotypes for a fetus. Only one karyotype can be chosen per fetus.
140	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not "Down syndrome karyotype" for any fetus A-E and Karyotype Abnormal Designate Abnormality field is "Down syndrome" box selected for any fetus A-E	Abnormal Karyotype result/cytogenetic diagnosis (ISCN short form) is not the nomenclature for Down syndrome the box for Down syndrome was selected. What is the correct karyotype for this fetus?
141	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not "Trisomy 18 karyotype" for any fetus A-E and Karyotype Abnormal Designate Abnormality field is "Trisomy 18" box is selected for any fetus A-E	Abnormal Karyotype result/cytogenetic diagnosis (ISCN short form) is not the nomenclature for Trisomy 18 box yet the box for Trisomy 18 was selected. What is the correct karyotype for this fetus?
142	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not "another type of karyotype" for any fetus A-E and Karyotype Abnormal Designate Abnormality field is "other abnormal" box is selected for any fetus A-E	Abnormal Karyotype result/cytogenetic diagnosis (ISCN short form) is not the nomenclature for an abnormal karyotype and yet the box for other abnormal karyotype was selected. What is the correct karyotype for this fetus?
143	F,PI	Karyotype Diagnosis field is "Abnormal", but If Karyotype Abnormal Designate abnormality field is not "Down syndrome" or "Trisomy 18", or "Other Abnormal Karyotype"	Abnormal karyotype diagnosis but no abnormal karyotype designated. Select whether Down syndrome, or Trisomy 18, or other abnormal karyotype.
144	CS, CCC, PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not blank or Karyotype Diagnosis field is "Normal-gender not revealed", or "Normal Male" or "Normal Female" or "Abnormal" or "Culture Failed" and CVS/EA box checked in Case Record	Karyotype given, chorionic villi sampling (CVS)/early amniocentesis (EA) on patient's Expanded AFP screening results. Contact the Case Coordinator Center.

#	Type	Description	Text
145	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank, but Karyotype Abnormal Designate Abnormality field is "Down syndrome"	No ISCN short form for abnormal karyotype result/cytogenetic diagnosis, but Down syndrome box selected under if karyotype abnormal designate abnormality. Enter ISCN for abnormal karyotype result.
146	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank, but Karyotype Abnormal Designate Abnormality field is "Trisomy 18"	No ISCN short form for abnormal karyotype result/cytogenetic diagnosis, but Trisomy 18 box selected under if karyotype abnormal designate abnormality. Enter ISCN for abnormal karyotype result.
147	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is blank, but Karyotype Abnormal Designate Abnormality field is "Other Abnormal Karyotype"	No ISCN short form for abnormal karyotype result/cytogenetic diagnosis, but other abnormal karyotype box selected under if karyotype abnormal designate abnormality. Enter ISCN abnormal karyotype result.
148	F,PI	Abnormal Karyotype Result/Cytogenetic Diagnosis field is not blank, but Karyotype Abnormal Designate Abnormality field is blank	ISCN short form for abnormal karyotype result/cytogenetic diagnosis, but Down syndrome, or Trisomy 18 or other abnormal karyotype boxes were not selected.
149	F,PI	Provide Termination Date If Available field is after today's date	Termination date after current date. Verify date.
150	F,PI	Provide Termination Date If Available field is not a real date for example 12/42/95	Date of termination is invalid. Verify date.
151	F,PI	Provide Termination Date If Available field is before date used to generate accession number	Date of termination before laboratory accession date. Verify date.
152	F,PI	Provide Termination Date If Available field is there but in pregnancy status field is "Continuing Pregnancy" or "Patient Undecided/Loss to Follow-up or Unknown"	Date of termination but pregnancy status does not indicate that the patient had an elective termination after the PDC visit.
153	CS, PI	Expanded AFP Referral Due To Screen Positive for field is not equal to Case Record	Screening indication on the PSR does not match the Expanded AFP Screening result. Contact the Case Coordinator Center.
154	CS, PI	Two PSRs entered for the same patient, special authorization field is blank or "No"	Two PSRs entered for the same patient, but no special authorization given. Contact GDB.

#	Type	Description	Text
155	CS, PI	Two PSRs entered for the same patient and ultrasound field is "Provided" or ultrasound date field is not blank, special authorization field is "Yes" and no special authorization found in special authorization log	Two first opinion ultrasounds on PSRs entered, but no special authorization given. Contact GDB
156	CS, PI	Multiple ultrasound procedures on the same patient-Ultrasound field is "Provided" or ultrasound date field is not blank and no special authorization in special authorization log for multiple ultrasounds	Multiple first opinion ultrasounds, but no special authorization given. Contact GDB.
157	F,PI	Later Ultrasound answered "No", later ultrasound selected, List Additional Diagnoses field is not blank	Later Ultrasound declined, but list additional diagnoses entered for a later ultrasound. Remove list of additional diagnoses or verify later ultrasound declined.
158	F,PI	Later Ultrasound field selected in this field, List Additional Diagnoses field is blank"	Later ultrasound performed, but no additional diagnoses given. Remove later ultrasound or enter additional diagnoses.
159	F	One inconsistency for PSR ultrasound section is fetal demise > or = 20 weeks cannot be check marked at the same time as fetal demise < 20 weeks for each fetus in the pregnancy.	Fetal demise > or = 20 weeks cannot be check marked at the same time as fetal demise < 20 weeks for each fetus in the pregnancy
160	F, PI	Date fields all "blank"	Dates of service are all blank. Do not complete a PSR. Contact CCC that patient declined all services
161	F, PI	Genetic Counseling field, Ultrasound field, and Amniocentesis field are all "Patient declined" or "Not Indicated"	Patient declined all services or all services were not indicated. Do not complete a PSR. Contact CCC that patient declined all services. Also contact GDB.
162	F,PI	Second Opinion ultrasound is "Yes" and 2nd Opinion Ultrasound date field is not blank and it is a date in the future (date is after today's date) or not a real date	Second Opinion ultrasound was answered "Yes", but Second Opinion ultrasound date is invalid. Verify date.
163	F,PI	Second Opinion ultrasound is "Yes" and 2nd Opinion Ultrasound field is before accession date	Second Opinion ultrasound was answered "Yes", but the date for 2nd Opinion ultrasound is before laboratory accession date. Verify date.

#	Type	Description	Text
164	F,PI	Second Opinion ultrasound was answered "Yes", but 2nd Opinion Ultrasound date is before ultrasound date field	Second Opinon ultrasound was answered "Yes", but 2nd Opinion ultrasound date is before ultrasound. Verify date.
165	F, PI	Abnormal karyotype selected , but the ISCN form is blank.	Karyotype is designated as abnormal, but the specific karyotype in ISCN form was not given. Enter in the specific abnormal karyotype nomenclature.
166	F,PI	Status of pregnancy is blank	Pregnancy status was not given. Select a pregnancy status.
167	F, PI	If the field "If AF-AFP is over 2.0 M.o.M. and/or AChE is positive, did patient have another ultrasound?" =Yes AND No entry of "later ultrasound" in "Information Acquired by" on screen G OR No selection within "list additional diagnoses" .	AF-AFP is 2.0 M.o.M and/or AChE is positive and the patient had another ultrasound. Select "Later ultrasound" under Information Acquired by and provide the specific diagnosis from the List of Additional Diagnoses.
168	PI	Genetic Counseling = Declined or Not Indicated AND Any other service = Provided AND That other service = provided does not have the special authorization flag = Y in the T_CASE_REFERRAL table	Genetic counseling was declined or not indicated and no special authorization was given for one of the services indicated on the PSR. Either select the service as not authorized or delete it the grid bar.
169	PI	Ultrasound = provided or Amniocentesis = provided AND Genetic counseling = provided Then Fire inconsistency if the ultrasound that is provided has a date less than the genetic counseling provided date OR Fire inconsistency if the amniocentesis that is provided has a date less than the genetic counseling provided date	Ultrasound or amniocentesis service was provided on a date before the genetic counseling provided date.

Appendix L - Screen Mapping

Screen ID	Screen Name
4	Sign In
6	Update Case (PNS)
7	Case Specimen History
10	Resolve Duplicates
15	Lab Confirmation of Contact with Coordinators
16	Enter Test Results from Non-Contract Labs
17	Report of Diagnosed Case
20	Tracking and Diaried Events
23	Resend Mailers
26	Maintain Mailer Text
27	Search for Mailers
30	Change Adequacy Status for a Group of Tests
33	Search for a Test or a Group of Tests
38	Assign CCC/NAPS Lab to Zip Codes
44	License
46	Maintain Entity Services
47	Merge Entities
48	Add New Entity
50	View Address
52	Entity Profile
53	Entity Relationships
55	Entity Search & Results
62	Enter and View Special Payment Authorization Details
64	Schedule and View Appointment Information
67	View Services Provided History
70	Enter Additional Test Results
72	Enter PSR Information
76	Upload Quarterly Summary Report Data
78	View Appointment Information at Follow-up Center Site
80	View PSR Status
87	View PDC Service Rendered Summary
88	View PDC Remittance ID Status
91	Enter Audit Results and other Documentation
93	Generate Audit Site Cases
94	Schedule Site Visit
99	Maintain Interpretation Parameters
106	Maintain Proficiency Test Data
108	Maintain Registries - Confidential Case Report
110	Upload Chromosomal Registry Submissions from Cytogenetic Labs
115	View and Enter Outcome Survey
117	Upload Survey Data
119	View HIPAA Information
122	Search for Supply Items
128	Re-assign CCC
129	Hospital Report of Newborn Screening Specimen Not Obtained (NBS - NO)
132	Search NBS Forms
133	Resolve Potential NBS Form Matches
134	Provider Request for Missing Newborn Screening Test Results (NBS - MR)
135	Registration of a birth which occurred out of a licensed health facility (NBS-OH)
136	Enter NBS-TR Form
138	Change Password
139	Create New User
140	View/Enter Page Security
141	Enter/Update Security Groups
142	View all Users
144	View Security Groups
145	Maintain Reference Tables
147	View Run time reports for batch Jobs
150	Update Address
151	Update Phone Numbers
152	Update Name
153	Client/Case Search
154	Create and Update Client Profile

Screen ID	Screen Name
155	Maintain Client Relationship
156	Search for Relationships
160	Link Entity to Client
161	View Headline Cases (PNS)
162	View Alerts
170	Modify Adequacy Status (PNS)
175	Case Coordinator Assignment Review
179	Add/Edit New Address
181	Edit/Add Telecom Information
182	Maintain Relationships
186	View Reference Tables
187	Maintain Business Rules (Menu Screen)
189	View Edit Log
191	Modify Adequacy Status (NBS)
194	Update Case (NBS)
196	Enter Quarterly Summary Report Data
197	View Special Service Authorization at PDC Level
199	Consolidated Registry
202	Case Summary (PNS)
203	Case Summary (NBS)
204	View Client Profile
205	TRF Data Entry (NBS)
206	TRF Data Entry (PNS)
208	Client- Metabolic Follow-up Services Center Reporting Form
209	Maintain CEU's
210	Enter/View Case Audit Results (PDC)
211	Link Accession Numbers
212	Case Notes
213	Audit Data Entry
214	Entity Search
215	View & Merge CCR
219	NBS Interpretation Grid
220	PNS Interpretation Grid
221	Search & View Quarterly Report Information
223	Conditions for PDC Approval
224	View and Set Alerts for a Case
225	View Headline Cases (NBS)
226	Inconsistency Resolution For PSRs
227	Expected Recall (NBS)
228	Code Karyotypes for CCR and PSR
229	Enter/View Case Audit Results (SCCC)
230	Follow-up - Enter Quarterly Report Information for Outside Specimens
232	Search for Study ID
233	Disclosure
234	Change Password After Login
235	Select Entity
236	Certification
237	Enter/View Case Audit Results (MC)
238	Enter PSR Information: Genetic Counseling
239	Enter PSR Information: Ultrasonography
240	Enter PSR Information: Amniocentesis
241	Enter PSR Information: SLOS
242	Enter PSR Information: Other/Karyotype
243	Enter PSR Information: Subsequent Information and Pregnancy Status
244	NBS Interpretation Parameters
245	PNS Mailer Grid
246	View MS/MS Review Cases
247	Update MS/MS Review Cases
248	Update Telephone Area Code (Utilities)
249	MC Reference Lab Expected List