

Confidential Report of an Outcome of Pregnancy Portal End to End User Guide

The [Genetic Disease Screening Program \(GDSP\) Portal](https://calgenetic.cdph.ca.gov) (<https://calgenetic.cdph.ca.gov>) is a secure web-based platform. It's best to navigate to the portal using **Microsoft Edge, Chrome, Firefox, or Safari browsers**. This application is **not** optimized for Internet Explorer, which means that certain features and functions may not behave as intended. Bookmarking the site in a commonly used web browser is recommended.

California Department of
PublicHealth

Sign In | Register

Resources | Contact

WELCOME TO CALGENETIC PORTAL

Due to system maintenance, CalGenetic Portal will not be available on the following dates: 12/07/2024, 02/01/2025, and 03/15/2024.

Effective immediately, we are updating our process for mailing non-urgent paper test results due to an unforeseen conflict/contract termination with our print vendor. There will be delays in the mailing of hard copies of results for both Newborn and Prenatal Screening Programs. Communication of all positive and urgent cases to providers is unaffected by this issue, and continues to take place through the area service centers (ASCs) or case coordinator centers (CCCs). Here's what you need to know:

1. Newborn Screening Results:

- Hospitals and facilities can elect to receive newborn screening results electronically by establishing a dedicated email address to receive the NBS results. To participate, please email nbs@cdph.ca.gov to receive an application and instruction guide.

2. Prenatal Screening Results:

- Manual/Two-Page Requisition Form Orders:** Paper result mailers will continue to be sent for Prenatal Screening orders placed using manual or two-page requisition forms.
- CalGenetic Portal Orders:** For providers who placed orders through the CalGenetic Portal, results will be available electronically as soon as they are ready. However, paper results will not be mailed for the foreseeable future.

Thank you for your understanding during this time. If you have any questions, please reach out to our support team.

CALIFORNIA GDSP
Genetic Disease Screening Program

1. Portal Register and Sign In

1.1 Navigate to the CalGenetic Portal Home page. Click the “Register/Sign in” button on the lower righthand side of the CalGenetic Portal Homepage, as shown below. First-time users of the GDSP Portal needs to register and create an account. Returned portal users can sign in directly. ‘Register’ and ‘Sign In’ buttons can also be found at the top right of the CalGenetic Portal Home page as shown below.

CALIFORNIA GDSP
Genetic Disease Screening Program

Our Mission
is to serve the people of California by reducing the emotional and financial burden of disability and death caused by genetic and congenital disorders. GDSP is able to accomplish this goal by providing timely screening and follow-up services to pregnant individuals and newborns throughout the state.

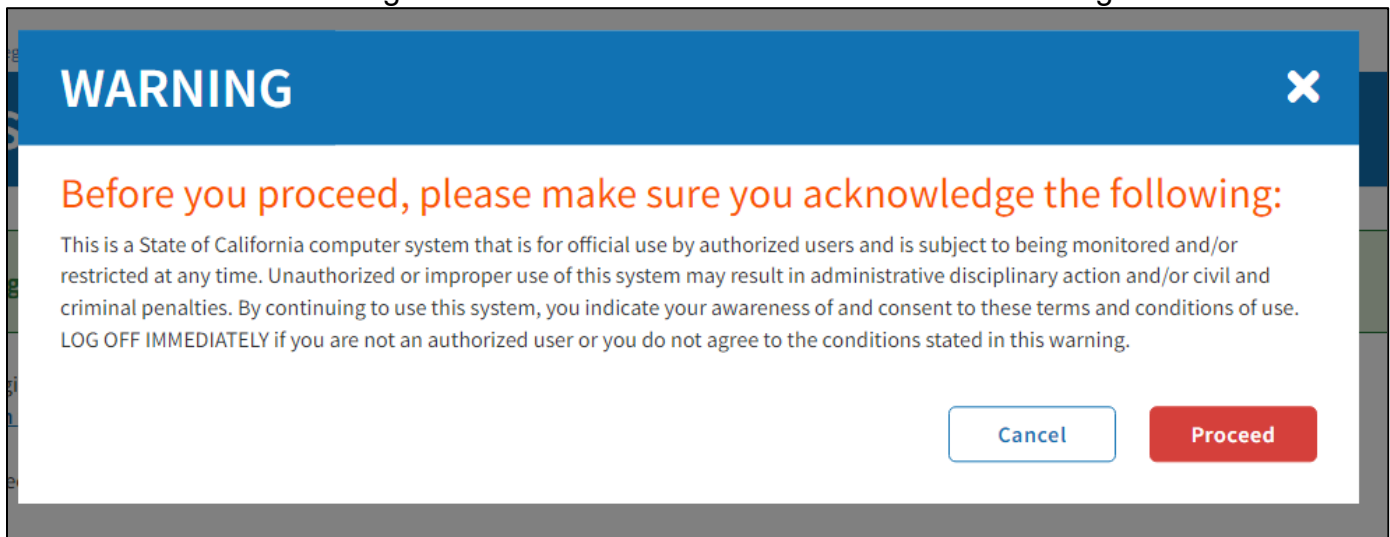
Register/Sign in to Your Account
If you are a new or returning user please create your CDPH account.

Register / Sign In →

Sign In | Register

Resources | Contact

- 1.2 A pop-warning message will be displayed after clicking on the 'Register/Sign In' button. The message cautions that unauthorized use may lead to legal and/or disciplinary action. Click "Proceed" to acknowledge the disclaimer and to continue onto the next "Sign In" screen.



- 1.3 Returned portal users can enter login email address and password and click the blue "Sign In" button to continue onto next screen for multifactor authentication. First time users need to click on the "Sign up now" link below the "Sign In" button to register and create an account.


The image shows two side-by-side forms. The left form is for registration, with fields for "Email", "New Password", "Confirm New Password", "First Name", and "Last Name". It includes a "Send verification code" button, a "Create Account" button, and a "Cancel" button. The right form is for sign-in, featuring the "California Department of Public Health" logo and the text "Sign in with a CDPH or GDSP user account". It has a "CDPH or GDSP Sign in ->" button, an "OR" separator, and the text "Sign in with your existing account". Below this are fields for "Email Address" and "Password" (with a "Forgot your password?" link), a "Sign in" button, and a "Don't have an account? Sign up now" link.

- 1.3.1 After clicking "Sign up now", users are redirected to the registration screen and asked to enter a preferred login email. A Verification Code will be sent to that email and will land in the user's inbox within 1-2 minutes. Users will **not** be able to proceed until they have entered the verification code.
- 1.3.2 After entering the verification code, complete the password, password confirmation, and first and last name fields. Click "Create Account".
- 1.3.3 Next, enter a preferred phone number to receive calls or texts. This will enable multifactor authentication, which will be used to authenticate you during the sign in process. Multi-factor

authentication is required for CalGenetic Portal log-ins. To successfully register, users must request a code or call and respond to either method. If users select the “Send Code” option, they will receive a text message and must type the code in the portal text box shown below.

<p>Enter a number below that we can send a code via SMS or phone to authenticate you.</p> <p>Country Code United States (+1) ▼</p> <p>Phone Number Phone number</p> <p><input type="button" value="Send Code"/> <input type="button" value="Call Me"/> <input type="button" value="Cancel"/></p>	<p>We have the following number on record for you. We can send a code via SMS or phone to authenticate you.</p> <p>Phone Number - XXX-XXX-7478</p> <p>Enter your verification code below, or send a new code</p> <p><input type="text"/></p> <p><input type="button" value="Cancel"/></p>
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1.3.4 The registration process is now complete, and users are redirected back to the “Sign In” screen. Enter login email address and password, click the “Sign In” button to continue onto next screen for multifactor authentication.



Sign in with a CDPH or GDSP user account

OR

Sign in with your existing account

Email Address

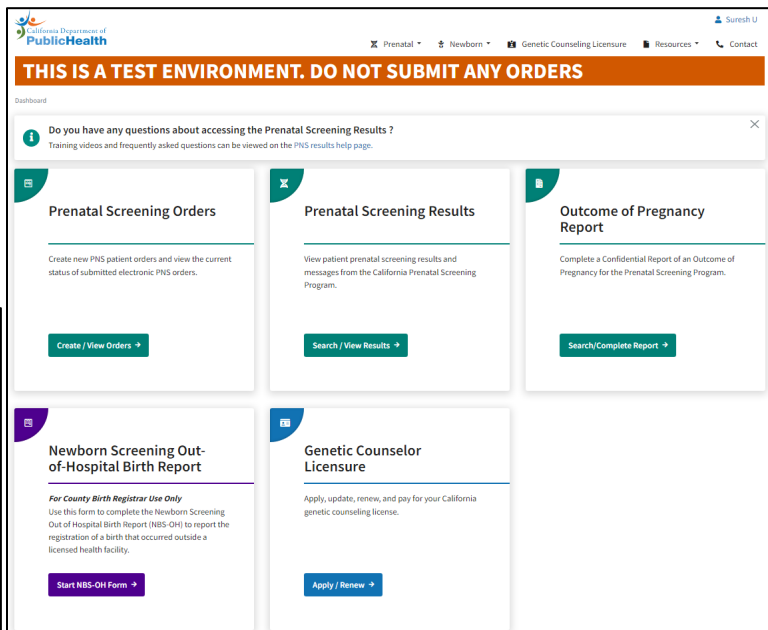
Password [Forgot your password?](#)

Don't have an account? [Sign up now](#)

- 1.4 Select “Send Code” or “Call me” to complete multifactor authentication. Answer the phone call or enter the 6 digit code that is texted to the phone number specified on the registration page. It is not necessary to press enter after typing in the correct code. Successful sign in is now complete and users will land on the Dashboard screen.

We have the following number on record for you. We can send a code via SMS or phone to authenticate you.

Phone Number - XXX-XXX-3140



2. Complete the Privacy Statement after clicking the Outcome of Pregnancy Report Tile.

- 2.1 Once signed in, go to the Outcome of Pregnancy Report tile on the dashboard. Click the “Search / Complete Report” button. Portal users will be prompted to complete the Privacy Statement. The privacy statement only needs to be acknowledged once per login session. However, users will be asked to complete the privacy statement each time they log-out and log-in again.

- 2.2 To complete the Privacy Statement, read the text in the dialogue box, click the acknowledgement checkbox, and then click the “Continue” button.

PRIVACY STATEMENT

Dashboard | Privacy Statement

The Information Practices Act of 1977 (civil code 1798 et seq.) allows the collection of personal information directly from the individual who is the subject matter of the information, to the greatest extent practicable. The data requested in this form are required by the Genetic Disease Screening Program (GDSP) of the California State Department of Public Health and are mandated by the California Code of Regulations (CCR), Title 17, Section 6527 (g)(2). These data are used to provide information to subjects on the prevention of birth defects; to determine prevalence of neural tube defects, chromosome abnormalities and other structural defects; and to monitor trends of occurrence. This information will also be used to determine the effectiveness of the California Prenatal Screening Program. It is essential that health professionals completing this form provide complete and accurate information.

The information collected on this form is maintained by the California Department of Public Health. The information we collect will be kept confidential and on file at the Department, as required by law. Any information provided may be disclosed to the California State Auditor, the California Office of Health Information Integrity, the California Office of Information Security and Privacy Protection, the U.S. Department of Health and Human Services or to other state and federal agencies as required by law.

Publishing by the Department of Statistical Compilations relating to morbidity and mortality studies that do not identify individual cases and sources of information or religious affiliations may be used in special studies as defined in Health and Safety Code 100330. The furnishing of such information to the Department or its authorized representative, or to any other cooperating individual, agency, or organization in any such special study, shall not subject any person, hospital, or other organization furnishing such information to any action or damages.

You have the right to review the records we keep about you during normal business hours. The California Department of Public Health Privacy Officer will, upon request, inform you regarding the location of your records and the categories of any persons who use the information in those records. For more information, contact the California Department of Public Health using the following contact information:

California Department of Public Health, Genetic Disease Screening Program
850 Marina Bay Parkway, Room F-175, MS 8200
Richmond, CA 94804
cdph_gdsp_pns_outcomes@cdph.ca.gov

I acknowledge and agree to the above terms

3. Search New Outcome Survey Reports in order to begin filling them out.

3.1 After completing the privacy statement, users will land on the “Search Reports Screen”. This screen displays a section called “Search for a Pending Report.”

SEARCH REPORTS

Dashboard | Search Reports

Search for a Pending Report

Unique Provider ID * ⓘ

Form Number * ⓘ

Search Result

Search Results Will Appear Here

Search

3.2 Enter the Unique Provider ID and Form Number, which can be found in the email CPDH sends to providers. For additional help, hover over the self-help green “i” icon next to each field.

Dear Provider,

We kindly request that you complete the Confidential Report of an Outcome of Pregnancy for a birthing parent who received services related to prenatal screening, as mandated by the California Code of Regulations (Title 17, Section 6527). Please log into the secure CalGenetic Portal using the following unique Provider ID and Form Number specific to each birthing parent. Your prompt submission of the report within 14 days of receiving this email is greatly appreciated.

Please log into: <https://calgenetic.cdph.ca.gov>
Provider ID: OS0001578
Form Number: 836067323

The California Code of Regulations (Title 17, Section 6527) requires that this information be provided for analysis of the effectiveness of the policies and practices adopted by the California Prenatal Screening Program. Your confidential disclosure of patient information will be used for public health surveillance and Prenatal Screening Program evaluation and is permitted under the Health Insurance Portability and Accountability Act (HIPAA) regulations. For additional details regarding data use and patient privacy, please refer to the Privacy Statement at the bottom of this letter.

When you log into the CalGenetic Portal, please use the Provider ID and the Form Number provided above to search for the requested report in the portal. First-time users of the CalGenetic Portal need to register with an email account. Detailed portal navigation guidance can be found at https://www.cdph.ca.gov/Programs/CFH/DGDS/Pages/pns/PNS_Portal_Res

3.3 After completing these fields, press the “Search” button. The matching Outcome of Pregnancy Report’s details will appear in the section to the right. Click the “Start Report” button after verifying the form number, provider’s name, facility name, and facility address.

The screenshot shows the 'SEARCH REPORTS' page with the following elements:

- Header:** 'SEARCH REPORTS' in a blue bar.
- Breadcrumbs:** 'Dashboard | Search Reports'.
- Search Icon:** A magnifying glass icon in a green circle.
- Title:** 'Search for a Pending Report'.
- Form Fields:**
 - 'Unique Provider ID *' with a help icon and value 'OS0001578'.
 - 'Form Number *' with a help icon and value '836067323'.
- Buttons:** 'Reset' and 'Search' (with magnifying glass icon) at the bottom left; 'Start Report →' in a green box at the bottom right.
- Search Result Section:**
 - Text: 'Verify that this is the correct report before you start.'
 - Table:

Form Number	836067323
Provider Name	VINOD AMBASTHA
Facility Name	Auto-FACILITY
Facility Address	300 PASTEUR DR, Palo Alto, CA 94521

3.4 If users enter a provider ID and/or form number that do not match any existing report they will see a message stating, “No Pending Report Found”.

The screenshot shows the 'SEARCH REPORTS' page with the following elements:

- Header:** 'SEARCH REPORTS' in a blue bar.
- Breadcrumbs:** 'Dashboard | Search Reports'.
- Search Icon:** A magnifying glass icon in a green circle.
- Title:** 'Search for a Pending Report'.
- Form Fields:**
 - 'Unique Provider ID *' with a help icon and value 'OS1231231'.
 - 'Form Number *' with a help icon and value '123123123'.
- Buttons:** 'Reset' and 'Search' (with magnifying glass icon) at the bottom left.
- Search Result Section:**
 - Warning:** A red triangle icon followed by the text 'No Pending Report Found'.
 - Text: 'Please check that you entered Provider ID and Form Number correctly. If values are correct, then this report has already been submitted.'

3.5 If users searched a report that another Outcome Survey user or SIS 2.0 user is already working on, they will receive a message stating, “This Report is In Progress”.

SEARCH REPORTS

Dashboard | Search Reports

Search for a Pending Report

Unique Provider ID *

OS0001652

Form Number *

989456652

Search

Search Result

This Report is In Progress

Only the person who began this report can complete it. If you began this report, it will be listed in the section below. Contact GDSP if this report needs to be reassigned to your queue.

4. Your In Progress Reports: Access reports that you have begun but not submitted.

4.1 On the same Search Reports screen, there is a section called “Your In Progress Reports”. This section contains “In Progress” reports that were started by the logged-in user but not submitted. To resume editing, portal user can click the pencil icon to the right of the report they wish to continue working on. To remove a report from “Your In Progress Reports” list, click the trash icon.

4.2 Users do not have access to “In Progress” reports that were started by other users. Please contact GDSP at CDPH_GDSP_PNS_Outcomes@cdph.ca.gov if an “In Progress” report needs to be reassigned to a new user for completion and submission.

SEARCH REPORTS

Dashboard | Search Reports

Search for a Pending Report

Unique Provider ID *

OS0001652

Form Number *

989456652

Search

Search Result

This Report is In Progress

Only the person who began this report can complete it. If you began this report, it will be listed in the section below. Contact GDSP if this report needs to be reassigned to your queue.

Your In Progress Reports

Continue working on your pending draft reports.

Patient Name	Patient DOB	Form Number ↑	Edit/Delete
test patientuat1	09/16/1994	989456652	
AutoONHOKRUE AutoXZGMCPNG	11/13/1997	994362259	

5. Get Started Screen and Confirm Birthing Parent Information Section

5.1 After entering the correct provider ID and form number on the Search Reports page and clicking “search”, users will then see a “Start Report” button. Click this button and land on the “Get Started” Screen. Users will see the “Confirm Birthing Parent Information” section at the top. Review the birthing parent information and answer the questions underneath the “Get Started” header.

5.2 If users select “No” for “Do you have information about this pregnancy or the outcome of this pregnancy?” and press “Next”, they will be prompted to fill in details regarding another health care provider who might have information about this pregnancy. Please see a screen shot in “6. Connect us with Another Provider Screen” in this document.

OUTCOME OF PREGNANCY REPORT

Dashboard | Search Reports | Report

Confirm Birthing Parent Information

Name:	AutoXQABARSJ AutoIWPTTGLK	Last 4 SSN:	3147
Birthdate:	10/18/2001	Form Number:	748498228
Medical Record #:		Blood Collection	
Address:	4241 Eagles Parkview Drive Bellflower, CA 90706	Date:	03/20/2024

Get Started

Do you have information about this pregnancy or the outcome of this pregnancy?*

Yes No

← Previous **Next →**

5.3 If users select “Yes” for “Do you have information about this pregnancy or the outcome of this pregnancy?” then they will be asked to answer, “How many fetuses/infants were in this pregnancy?”.

Get Started

Do you have information about this pregnancy or the outcome of this pregnancy?*

Yes No

How many fetuses/infants were in this pregnancy?*

1 2 3 4+ Unknown

← Previous **Next →**

5.3.1 If users select 1 or 2 for “How many fetuses/infants were in this pregnancy?” they will be prompted to a new screen (detailed in “6. Report Screen” of this document) to fill out several more questions after a click on “Next”.

5.3.2 If “Number of Fetuses” is marked as “Unknown”, users will be prompted to enter details for another provider on the “Connect us with Another Provider” screen after a click on “Next”.

Get Started

Do you have information about this pregnancy or the outcome of this pregnancy?*

Yes No

How many fetuses/infants were in this pregnancy?*

1 2 3 4+ Unknown

[← Previous](#) [Next →](#)

5.3.3 If “Number of Fetuses” is marked as 3 or 4+, users will be directed to the “Submit the Report” screen after a click on “Next”. This is because 3 or more fetuses are out of scope for this report.

OUTCOME OF PREGNANCY REPORT

[Dashboard](#) | [Search Reports](#) | [Report](#)

Submit The Report

You reported a pregnancy with 3 or more fetuses/infants, which is beyond the scope of this report.
No additional information is required and you can submit the report now.

[← Previous](#) [Submit Report →](#)

6. Report Screen

Users will land on the Report screen (shown below) to complete and submit the report when “1” or “2” is answered for “How many fetuses/infants were in this pregnancy?”. The red asterisk (*) indicates a required question. Select “unknown” if the answer is unknown.

Scroll down and complete the Pregnancy Information, Fetus/Infant Information, Fetus/Infant Details, Chromosomal Abnormalities/Defects, Neural Tube Defects (NTD), and Other Structural Defects sections. If “Unknown” is selected for any required fields, users will be asked to complete the “Connect Us With Another Provider” screen as abovementioned before the report can be submitted.

“Pregnancy end date or infant birthdate” is a required question, as indicated by a red asterisk (*). Select “Unknown” if the pregnancy end date or infant birthdate is not available.

“Infant/fetus last name” is a required question, as indicated by a red asterisk (*). Select “No” if this information is unavailable.

OUTCOME OF PREGNANCY REPORT

[Dashboard](#) | [Search Reports](#) | [Report](#)


* = required

Pregnancy Information

Do you know the pregnancy end date (EDD) or infant birthdate?*

Date Known Unknown

Date*


MM/DD/YYYY

Fetus/Infant Information

Do you know the fetus(es)/infant(s) last name?*

Yes No

Last Name*

Fetus/Infant Details

Fetus/Infant 1

Sex*

Male Female Unknown

Pregnancy Outcome*

Select ▼

Birth Weight* ⓘ

Grams

Pounds

Unknown

Fetus/Infant 2

Sex*

Male Female Unknown

Pregnancy Outcome*

Select ▼

Birth Weight* ⓘ

Grams

Pounds

Unknown

Chromosomal Abnormalities/Defects

Fetus/Infant 1

Significant chromosomal abnormalities?*

Yes No Unknown

Chromosomal abnormality type (select all that apply):*

▼

Cytogenetic Lab Specimen Number(s) for Chromosomal Abnormalities*

Separate multiple lab specimen numbers by a comma.

Chromosomal Testing Lab*

Select ▼

Fetus/Infant 2

Significant chromosomal abnormalities?*

Yes No Unknown

Chromosomal abnormality type (select all that apply):*

▼

Cytogenetic Lab Specimen Number(s) for Chromosomal Abnormalities*

Separate multiple lab specimen numbers by a comma.

Chromosomal Testing Lab*

Select ▼

Neural Tube Defects (NTD)

Fetus/Infant 1

Neural Tube Defects?*

Yes No Unknown

Select all that apply:*

Fetus/Infant 2

Neural Tube Defects?*

Yes No Unknown

Select all that apply:*

Other Structural Defects

Are there any other structural defects?*

Yes No Unknown

Do you know the date of 1st diagnosis?*

Yes No Unknown

Diagnosis was: *

Prenatal Birth/Postnatal Unknown

Diagnosis Method*

Select

Date of 1st Diagnosis*

MM/DD/YYYY

Fetus/Infant 1

Select all structural defects that apply:*

Fetus/Infant 2

Select all structural defects that apply:*

At any point, users can press the “Save as Draft” button seen in the above and below image. This is a floating button that moves down the page with users as they scroll and enter data. Clicking this will save the Report in the “Your In Progress Reports” section noted earlier.

Invalid data entry or missing data in required fields will trigger error messages upon selecting “Save as Draft” or the “Submit Report” button at the bottom of this Report screen. Error messages will be displayed at the top of the screen.

The screenshot shows the 'OUTCOME OF PREGNANCY REPORT' form in the California Department of Public Health system. The form is titled 'OUTCOME OF PREGNANCY REPORT' and includes a navigation bar with 'Dashboard', 'Search Reports', and 'Report'. A legend indicates that fields marked with an asterisk (*) are required. A red error message at the top of the form states: 'The form could not be submitted for the following reasons:'. Below this message, a list of error messages is displayed, including: 'Enter a valid Last Name for the fetus/infant. Numbers are not accepted.', 'Enter Date in MM/DD/YYYY format.', 'Enter a Date of 1st Diagnosis in MM/DD/YYYY format.', 'Enter a value for Diagnosis Was:', 'Enter a value for Diagnosis Method.', 'Select value(s) for Select all structural defects that apply: for fetus/infant 1.', 'Select a Pregnancy Outcome for fetus/infant 1.', 'Enter a value for Birth Weight [Grams] for fetus/infant 1.', 'Select a Sex for fetus/infant 1.', 'Select an option for Significant chromosomal abnormalities? for fetus/infant 1.', and 'Enter a value for Neural Tube Defects? for fetus/infant 1.'. At the bottom right of the form, there is a 'Save as Draft' button.

Once all data entered is valid and all required fields are complete press “Submit Report” at the bottom of the screen.

The report contains some multiselect dropdown fields. Examples include:

- Chromosomal abnormality type “Select all that apply:”,
- Neural Tube Defects “Select all that apply:”
- Structural defects “Select all structural defects that apply:”

These fields accept multiple data entries based on all the applicable options available for the fetus. Text can also be used to filter down the options within these fields. This example below demonstrates when multiple selections have been made and the text “Turner” is typed in the text box. The text “Turner” filters down the options. This behavior is present in all multiselect dropdowns mentioned on the Report screen.

The screenshot shows a multiselect dropdown field titled 'Chromosomal abnormality type (select all that apply):*'. The field contains two selected items: 'Trisomy 21 (Down Syndrome)' and 'Trisomy 18 (Edwards Syndrome)'. Below the selected items is a text input field containing the text 'Turner'. Below the text input field is a list of options, with 'X (Turner Syndrome)' highlighted, indicating that the text 'Turner' has filtered the options to show only 'X (Turner Syndrome)'.

Certain fields are only available for data entry based on prior selections. This is known as conditional logic. For example, if “Grams” is selected in the Birth Weight field, this triggers the Grams text entry field. Selecting Pounds enables the lbs and oz fields for data entry. Neither the grams nor the pounds field would be visible if “unknown” is selected. The screenshot below illustrates this logic. When “Pounds” is selected, the ‘oz’ field cannot be empty. If the birth weight is 7 pounds, type in 7 in the ‘lbs’ field and ‘0’ in the ‘oz’ field.

The screenshot displays two instances of a form section. The top instance shows 'Pregnancy Outcome*' set to 'Live Birth' and 'Birth Weight*' with 'Pounds' selected. This enables two input fields: 'lbs' containing '7' and 'oz' containing '0'. The bottom instance shows 'Pregnancy Outcome*' set to 'Select' and 'Birth Weight*' with 'Grams' selected. This enables a single input field: 'g' containing '8'.

The “Specify Defects” field is another example of conditional logic. This field only becomes visible if the “Other NTD” option in the ‘Select all that apply:’ field is selected. Note that without selecting this option in the “Select all that apply:” field, the conditional logic to show Specify Defects would not trigger.

This screenshot shows the 'Neural Tube Defects (NTD)' form section for 'Fetus/Infant 1'. It includes radio buttons for 'Neural Tube Defects?*' (Yes, No, Unknown) and a 'Select all that apply:*' dropdown menu with 'Acrania' selected.

This screenshot shows the 'Neural Tube Defects (NTD)' form section for 'Fetus/Infant 1'. It includes radio buttons for 'Neural Tube Defects?*' (Yes, No, Unknown) and a 'Select all that apply:*' dropdown menu with 'Other NTD' selected. Below this, the 'Specify Defects:*' field is visible and contains a text input box with the placeholder text 'Enter ICD-10 Code or type 'unknown''.

7. Connect us With Another Provider Screen

The “Connect us to another Provider” Screen will be prompted when “No” is selected for “Do you have information about this pregnancy or the outcome of this pregnancy?”, or when “Unknown” is selected for “How many fetuses/infants were in this pregnancy?”, or when “Unknown” is selected for any required fields. Users will answer “No” to the first question and leave other fields on this screen blank if they do not have any relevant information about an alternate medical professional who may have more information about the pregnancy. If “Yes” is selected for the first question, proceed to complete as many fields as possible in this section. Include details for an alternate provider who may have answers to the pregnancy outcomes. Please note special characters including underscore are not allowed in email address. Additionally, provide optional comments, if applicable. Press the “Submit Report” button. Users will be directed to the “Report Submitted Successfully” screen, where they can download a PDF copy of the report.

OUTCOME OF PREGNANCY REPORT

[Dashboard](#) | [Search Reports](#) | [Report](#)

Connect Us With Another Provider

We would like to learn more about the outcome of the patient's pregnancy. Please share any information below about any other provider who has cared for this patient.

Other Provider Information

Last Name	First Name
<input type="text"/>	<input type="text"/>

Facility Name

Email	Office Phone Number	Ext.	Fax Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Street Address	Suite/Unit
<input type="text"/>	<input type="text"/>

City	State	Zipcode
<input type="text"/>	CA <input type="text"/>	<input type="text"/>

Comments

Please enter any additional pregnancy outcome information here.

[← Previous](#) [Submit Report →](#)

8. Report Submitted Successfully Screen

Once users complete the report with valid data entries and click “Submit Report”, they will be redirected to the “Report Submitted Successfully” screen. Users will see a message indicating that the data was saved successfully, and the report was submitted to CDPH. They are prompted to download a PDF copy of the report in the leftmost box on the screen. Users will see a warning message noting that this is their only chance to download it. The “Start Another Report” button in the middle box allows them to navigate to the “Search Reports” screen where they can search for or begin another report. The “Return to Dashboard” button on the rightmost box sends users to the Portal Dashboard where they can access other area paths available in Portal outside of Outcome of Pregnancy Reporting.

Once the Confidential Report is submitted, users can download a PDF copy of the report, which can be saved electronically or printed as a hard copy. Depending upon the browser, they might need to allow pop-ups to complete and access the download.

The screenshot shows the 'Report Submitted Successfully' screen. At the top left is the California Department of Public Health logo. The top navigation bar includes 'Prenatal', 'Newborn', and 'Genetic Counseling' dropdown menus. A notification box in the top right corner states 'Your data was saved successfully'. A prominent blue banner reads 'REPORT SUBMITTED SUCCESSFULLY'. Below this, a breadcrumb trail shows 'Dashboard | Search Reports | Report Submitted'. A central message with a green checkmark icon says 'The Report has been submitted electronically to CDPH. No further action required.' Three action boxes are displayed below: 1) 'Download PDF Copy' with a document icon and a green button; 2) 'Start Another Report' with a star icon and a green button; 3) 'Return To Dashboard' with a grid icon and a green button with a right arrow.