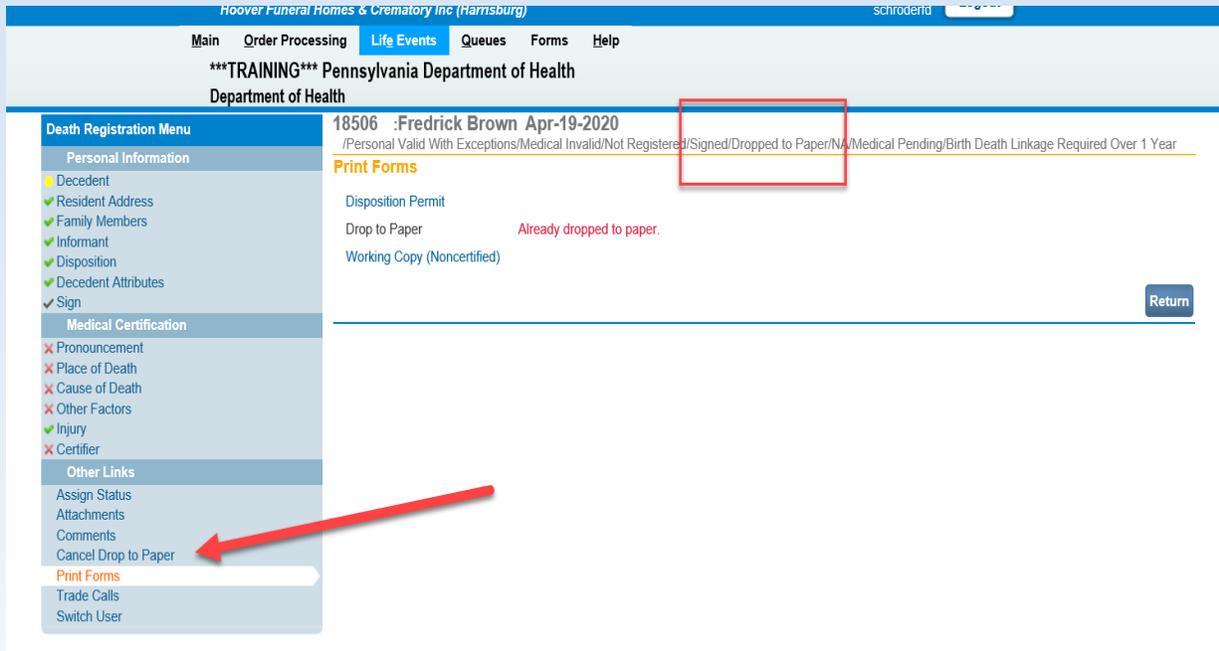


Cancelling Drop to Paper

‘Cancel Drop to Paper’ allows the FD that signed the case to return the case to the status it was prior to dropping to paper. This could be used to correct personal information that was entered incorrectly or if the case was accidentally dropped to paper.

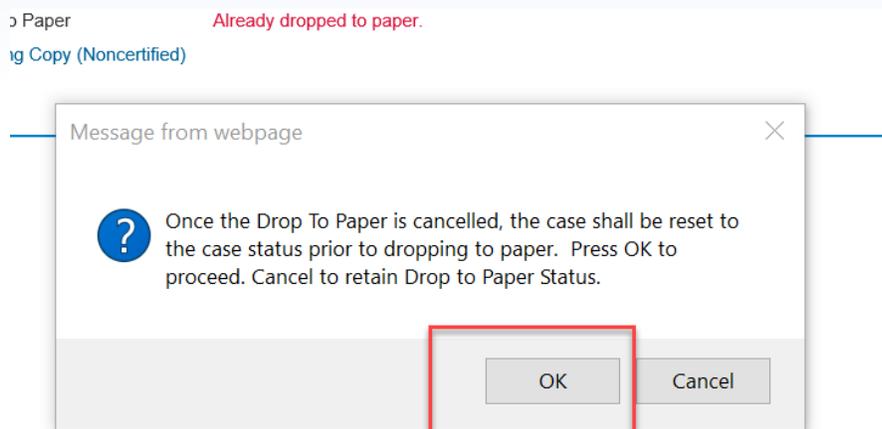
Case has been ‘Signed’ and ‘Dropped to Paper’

Click on ‘Cancel Drop to Paper’ menu link under Other Links



The screenshot shows the EDRS interface for Hoover Funeral Homes & Crematory Inc. The case details for Fredrick Brown (18506) are visible, with a status of 'Dropped to Paper'. The left-hand menu has 'Cancel Drop to Paper' highlighted under the 'Other Links' section.

Popup box appears asking to verify that you want to ‘Cancel Drop to Paper; Click ‘OK’



The popup box contains the following text: "Once the Drop To Paper is cancelled, the case shall be reset to the case status prior to dropping to paper. Press OK to proceed. Cancel to retain Drop to Paper Status." The 'OK' button is highlighted with a red box.

After clicking 'OK' the 'Dropped to Paper' status is no longer on the case. This makes it available to be claimed other users within EDRS or gives you the ability to unsign to the case to change personal information.

*****TRAINING*** Pennsylvania Department of Health**
Department of Health

Death Registration Menu 18506 :Fredrick Brown Apr-19-2020
/Personal Valid With Exceptions/Medical Invalid/Not Registered/Signed/Uncertified/NA/Medical Pending/Birth Death Linkage Required Over 1 Year

Personal Information	Affirmations
<input type="checkbox"/> Decedent	This registration is currently signed.
<input checked="" type="checkbox"/> Resident Address	
<input checked="" type="checkbox"/> Family Members	
<input checked="" type="checkbox"/> Informant	
<input checked="" type="checkbox"/> Disposition	
<input checked="" type="checkbox"/> Decedent Attributes	
<input checked="" type="checkbox"/> Sign	
Medical Certification	
<input checked="" type="checkbox"/> Pronouncement	
<input checked="" type="checkbox"/> Place of Death	
<input checked="" type="checkbox"/> Cause of Death	
<input checked="" type="checkbox"/> Other Factors	
<input checked="" type="checkbox"/> Injury	
<input checked="" type="checkbox"/> Certifier	
Other Links	
Assign Status	
Attachments	
Comments	

[Unsign](#) [Clear](#) [Return](#)