

## Individual Details 管理 画面

**Individual Details** 画面は individual 管理 画面のサブメニューの一つで、individual 管理 画面の Emergency Data Form (EDF), Demographic Report 画面のサブメニューの一つです。

この画面は individual 管理 画面の **IDF Admin** メニューからアクセスできます。この画面は **Individual Details** 画面のサブメニューの一つです。

1. **Admin** メニューから **Care** メニューを選択し、**Individual Demographics** メニューを選択し、**Search** をクリックします。

To Do	General	
Individual	Provider	Preferences   Password Policy
Health	User	New   List   Import from Excel   Search Imported Excel   Assign External System ID   Self Password Reset
Agency	Title	New   List   Import from Excel   Search Imported Excel
Billing	Care	
Admin	Individual Demographics	List   <b>Search</b>   Custom Fields
Agency Reports	Individual Intake	New   Pending Admission Notes   Import from Excel   Search Imported Excel
Individual Home Page		

2. **Individual Search** 画面は **Individual** 管理 画面の individual 管理 画面の **Search** メニューからアクセスできます。

Individual Search

Individual

angl

Q

Social Security Number

Angela Mary

Thabang Motseko

Medicaid Number

Medicare Number

Form ID

Birth Date From

MM/DD/YYYY

To

MM/DD/YYYY

Admission Date From

MM/DD/YYYY

To

MM/DD/YYYY

ID Number

ID Type

- Please Select -

Program (Site)

Search

Entered By

Search

Status

- Please Select -

Clear Selection

Cancel

Search

**Note:** Individual individuals are represented by individual symbols. Individual symbols represent individual symbols.



## Individual Demographic Form (IDF) Admitted ⓘ

[T-Notes](#)

Individual Angela Mary

Photo 1



Photo 1 Date

<b>Title</b>	Miss	<b>Gender</b>	Female
<b>First Name</b>	Angela	<b>Last Name</b>	Mary
<b>Middle Name</b>	Ann	<b>Suffix</b>	N/A
<b>Birth Date</b>	05/01/2010	<b>Goes By</b>	Angela
<b>SSN</b>		<b>Medicaid Number</b>	N/A
<b>E-mail</b>	annmary@gmail.com	<b>Phone Number</b>	1234567890
<b>Race</b>	Filipino	<b>Ethnicity / Hispanic Origin</b>	
<b>Tribe</b>		<b>Class Membership</b>	

### Residential Address

Attention or in care of

**Address** 1118 Roxas Boulevard, corner United Nations Avenue, Ermita, Manila, 1000 Metro Manila, Philippines, Philippines

**Location**

**Primary Phone**

**Secondary Phone**

**Additional Phone**

### Mailing Address

Attention or in care of

**Address** 1118 Roxas Boulevard, corner United Nations Avenue, Ermita, Manila, 1000 Metro Manila, Philippines, Philippines

**Primary Phone**

**Secondary Phone**

**Additional Phone**

[View PDFs](#)

[Cancel](#)

[Back](#)

[SComm](#)

[Mark as Deceased](#)

[Discharge](#)

[Mark as Pending Admission](#)

[Edit](#)

<a href="#">Address List</a>	<a href="#">Advance Directives</a>	<a href="#">Album</a>	<a href="#">Allergy Profile</a>
<a href="#">Assessment List</a>	<a href="#">Attached Files</a>	<a href="#">Case Status</a>	<a href="#">Contact List</a>
<a href="#">Custom Fields</a>	<a href="#">Diagnosis List</a>	<a href="#">Guardian List</a>	<a href="#">Health Profile</a>
<a href="#">Individual Details</a>	<a href="#">Individual Home Page</a>	<a href="#">Individual Status History</a>	<a href="#">Insurance</a>
<a href="#">Pending Admission Notes</a>	<a href="#">Program Enrollments</a>	<a href="#">Shared Contact List</a>	<a href="#">Team Members</a>

#### 4. Individual Details 🔍 📄 📅

<a href="#">Address List</a>	<a href="#">Advance Directives</a>	<a href="#">Album</a>	<a href="#">Allergy Profile</a>
<a href="#">Assessment List</a>	<a href="#">Attached Files</a>	<a href="#">Case Status</a>	<a href="#">Contact List</a>
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#### 5. Individual Details 🔍 📄 📅 **Edit** 🔍 📄 📅

Individual Details Admitted 

## T-Notes

Individual Angela Mary

Photo 2

Photo 2 Date

Hair Color      Black

**Eye Color**      Brown

**Interpreter Needed**

Primary Oral Language Filipino

Primary Written Language	Filipino
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Religion Catholic

**Citizenship** Filipino

### Citizenship Status

### Marital Status

Marital Status Date

Individual's Time Zone Asia/Manila

### Living Arrangement

**Birth Place** Philippines

**Characteristics** gets a bit hyper at times

Guardian of Self      Unknown

Cancel

[Back](#)

Edit

### Address List

## Advance Directives

Album

## Allergy Profile

## Assessment List

### Attached Files

Case Status

## Contact List

## Custom Fields

### Diagnosis List

Guardian List

## Health Profile

Individual Demographic Form (IDF)

[Individual Home Page](#)

### Individual Status History

## Insurance

### Pending Admission Notes

## Program Enrollments

### Shared Contact List

## Team Members

- **individual** **individual** **individual**, **individual**, **individual**, **individual**, **individual**, **individual**

Photo 2

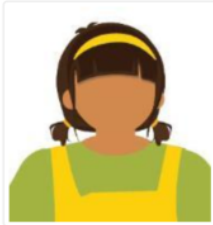


Photo 2 Date

08/01/2020



Height

3

2

Feet

Inch

Weight Range

50

52

From lbs

To lbs

Hair Color

Black

Eye Color

Brown

Interpreter Needed

No

Primary Oral Language

Other

Filipino

Primary Written Language

Other

Filipino

Religion

Buddhist

Citizenship

Filipino

Marital Status

Single

Marital Status Date

MM/DD/YYYY

Admission Date

01/05/2017

Death Date

MM/DD/YYYY

\* Individual's Time Zone

Asia/Manila

Living Arrangement

Living with Parent

Birth Place

Street 1

Street 2

Manila

State

Zip Code

Philippines

City

State

Zip Code

Country

Characteristics

gets a bit hyper at times

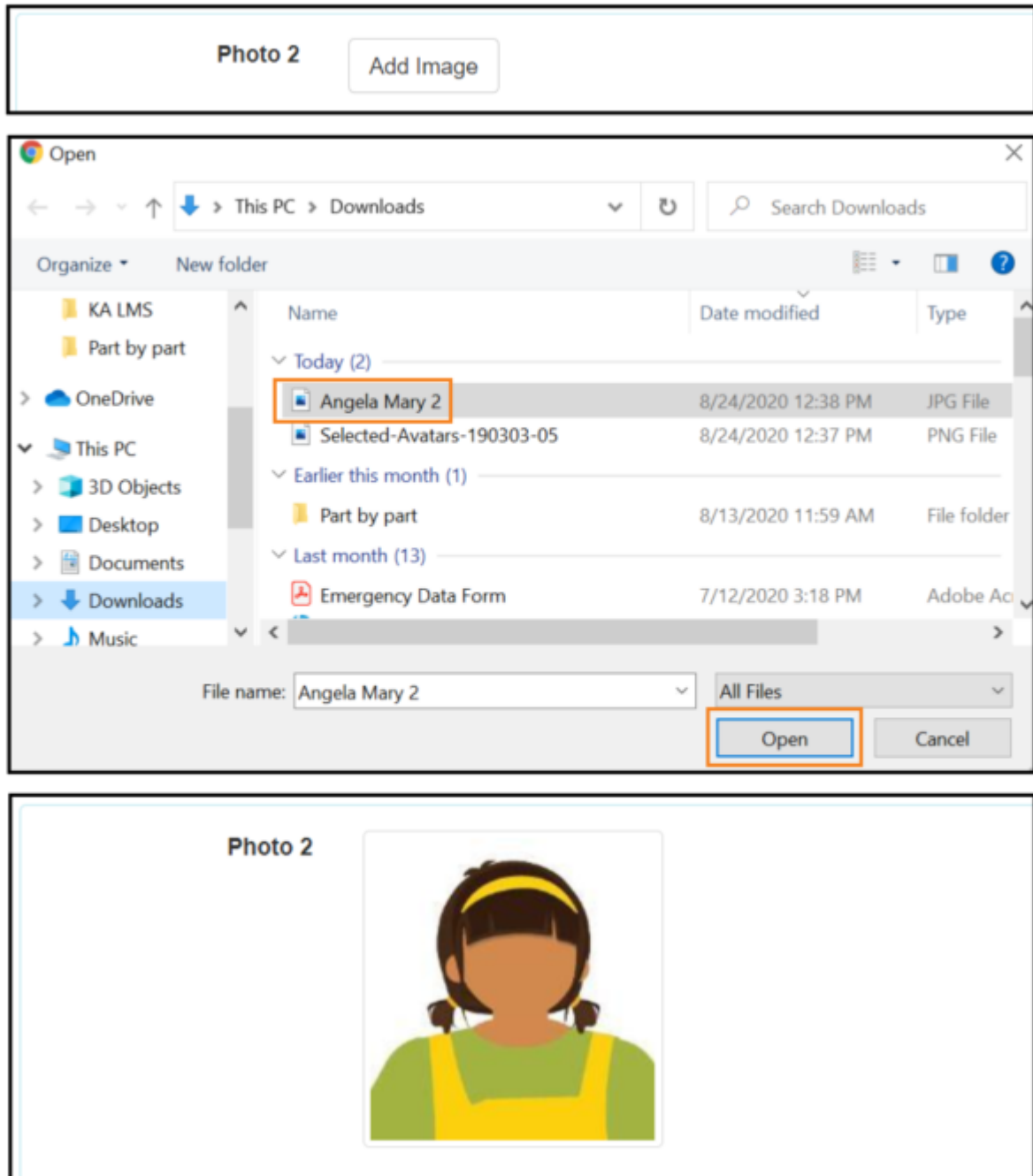
About 2975 characters left

Guardian of Self

Unknown

- **Individual** ☐ **Photo 2** ☐ **Add Image** ☐ **Individual Demographic Form (IDF)** ☐ **Photo 1** ☐ **Photo 2** ☐





**Note:** 請確保上傳的照片為清晰可見的正面半身照

- **Medical Information:** This section allows you to enter information about an individual's medical history, including **Developmental Disability, Intellectual Disability, Blood Type, Emergency Orders, Adaptive Equipment** information.

Medical Information

Developmental Disability

Autism

Autism

Blood Type

A+

Other Medical Information

About 3000 characters left

Intellectual Disability

- Please Select -

- Please Select -

Mild

Moderate

Profound

Severe

Unspecified

Primary Care Physician

Emergency Orders

Mary may have breathing problems. Therefore, she must carry an inhaler.

About 2929 characters left

Adaptive Equipment

She doesn't need any adaptive equipment.

About 2960 characters left

- **Behavior: Behavior Management** This section allows you to enter information about an individual's behavior management, including information about their behavior management plan, behavior management goals, and behavior management strategies.

## Behavior

### Behavior Management

Need to handle her very carefully when she is in a bad mood.

About 2940 characters left

- **Guidelines:** ພຶ ພຶພຶພຶພຶ ພຶພຶພຶພຶພຶພຶພຶ individual ພຶ ພຶພຶພຶພຶພຶພຶພຶ ພຶພຶພຶ ພຶພຶພຶ ພຶພຶພຶພຶພຶພຶພຶ ພຶພຶພຶ ພຶພຶ ພຶພຶ ພຶພຶພຶ ພຶ ພຶພຶພຶ ພຶພຶພຶພຶພຶພຶພຶ, ພຶພຶພຶພຶ, ພຶພຶພຶພຶ, ພຶພຶພຶພຶພຶພຶ, ພຶພຶພຶພຶ ພຶ ພຶພຶພຶພຶ ພຶພຶພຶພຶພຶພຶພຶ

## Guidelines

### Dietary Guidelines

Mary can eat only processed foods

About 2967 characters left

### Eating Guidelines

She needs assistance while eating

About 2967 characters left

### Communication Modality

- Please Select -

### Communication Modality Other

- Please Select -

Communication Device  
Non-Verbal  
Partially Verbal  
Sign  
Verbal  
Other

### Communication Comments

About 3000 characters left

### Mobility

Walks on own

### Mobility Comments

About 3000 characters left

### Supervision

Independent

### Supervision Comments

About 3500 characters left

### Food Texture

Whole or Normal consistency

### Liquid Consistency

Thin

### Toileting Status

Requires Physical Assistance/Equi

### Bathing Status

Requires Support to Bath/Shower

### Mealtime Status

Requires Support to Eat

### Referral Source

About 3000 characters left

☐ Do not notify Family/Guardian as there is written advice that they do not want to be notified for incidents defined as Reportable(Medium notification level), Serious Reportable(High notification level) or have Abuse/Neglect specified.

6. 患者の個人情報、医療情報、検査結果、治療計画、アレルギー情報、**Update** ボタンをクリックして更新

Address List	Advance Directives	Album	Allergy Profile
Assessment List	Attached Files	Case Status	Contact List
Custom Fields	Diagnosis List	Guardian List	Health Profile
Individual Demographic Form (IDF)	Individual Home Page	Individual Status History	Insurance
Pending Admission Notes	Program Enrollments	Shared Contact List	Team Members

患者の個人情報、医療情報、検査結果、治療計画、アレルギー情報、**Update** ボタンをクリックして更新

The form IDF-DEMOTPHL-G7Q29D7EDMULW has been successfully updated

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