

Individual Demographic Form (IDF) - Edit Individual Details

The '**Individual Details**' form contains detailed demographic information of the individual. Information entered in this form appears on the Emergency Data Form (EDF), in the demographic report, and on other reports in the system.

Users assigned with the **IDF** Admin Administrative Role will be able to enter and update information in the **Individual Details** page.

1. On the Admin tab, click on the **Search** link beside **Individual Demographic** under the **Care** section.

To Do	Ger	neral		
Individual	Provider	Preferences Password Policy Archive Preference		
Health		New List Import from Excel		
Agency	User	Search Imported Excel Titles New Title Assign External System ID Self Password Reset		
Admin				
Agency	C	are		
Reports	Individual Demographics	List Search Custom Fields		
Individual Home Page	Individual Intake	New Pending Admission Notes Import from Excel		
Settings	Enrollment	By Program By Individual Import from Excel		



2. The **Individual Search** page will be opened for searching the preferred individual. Type and select the name of the Individual (the Auto Suggestion box will show the full name of the **Individual** upon entering the first 3 letters of the individual's first or last name. Click on the needed individual's name after it appears, and it will then be displayed in the box). Click on the **Search** button at the bottom right of the page.

Individual Search	
Individual	ang Q +
Social Security Number	Angela Mary Thabang Motseko
Medicaid Number	
Medicare Number	
Form ID	
Birth Date From	MM/DD/YYYY 🗰
То	MM/DD/YYYY 🗰
Admission Date From	MM/DD/YYYY 🗰
То	MM/DD/YYYY 🗰
ID Number	
ІД Туре	- Please Select -
Program (Site)	Search
Entered By	Search
Status	- Please Select -
Selection	

Cancel



3. On the **Individual Search** page, click on the name of the Individual, and the **Individual Demographic Form (IDF)** will be presented. Each section of the IDF now has its own page. Users will be able to navigate to each IDF section by using the links at the bottom of the form.

lr	ndividual Sea	arch													
	Filter]											15	✓ Records
	Form ID 💠	Individual	Social Security Number \$	Medicaid Number	Medicare Number	Status All -	Birth Date	Case Status ≑	Entered By ≑	Admitted By \$	Last Updated By ≎	Admission Date \$	Individual ID Number ≑	Time Zone	
	IDF-DEMOTPHL- G7Q29D7EDMULW	Mary, Angela				Admitted	05/01/2010		Rahman, Ferdaus / Supervisor	Rahman, Ferdaus / Supervisor	Rahman, Imran / Teacher	01/05/2017		Asia/Manila	
	Showing 1 to 1 of 1 en	tries	-	•		-		A			-		-	Previous	1 Next

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Individual Demog	graphic Form (IDF) Admitted 0			T-Notes
Individual	Angela Mary			
Photo 1		Photo 1 Date		
Title		Gender	Female	
First Name	Angela	Last Name	Mary	
Middle Name		Suffix		
Birth Date	05/01/2010	Goes By	Angela	
SSN		Medicaid Number		
E-mail		Phone Number		
Race	Filipino	Ethnicity / Hispanic Origin		
Class Membership				
Residential Address				
Attention or in care of				
Address	1118 Roxas Boulevard, corner United Nations Avenue, Ermita, Manila, 1000 Metro Manila, Philippines,			
Location	Philippines			
Primary Phone		Secondary Phone		
Additional Phone				
Mailing Address				
Attention or in care of				
Address	Philippines			
Primary Phone		Secondary Phone		
Additional Phone				
PDF & Printable				
Cancel Back		SComm Mark as Deceased	Discharge Mark as Pending Admission	Edit
Advance Directives	Album	Allergy Profile	Assessment List	
Attached Files	Case Status	Contact List	Custom Fields	
Diagnosis List	Individual Details	Individual Home Page	Insurance	
Pending Admission Notes	Program Enrollments	Shared Contact List	Team Members	



4. Click on the **Individual Details** link from the bottom of the page.

Advance Directives	Album	Allergy Profile	Assessment List
Attached Files	Case Status	Contact List	Custom Fields
Diagnosis List	Individual Details	Individual Home Page	Insurance
Pending Admission Notes	Program Enrollments	Shared Contact List	Team Members

5. The **Individual Details** page of the individual will be opened. At the bottom of the form, click on **Edit** to view the page in **edit** mode

dividual Details Admit	ted 0			T-Notes
Individual Angela	Mary			
Cancel Back				Edit
Advance Directives	Album	Allergy Profile	Assessment List	
Attached Files	Case Status	Contact List	Custom Fields	
Diagnosis List	Individual Demographic Form (IDF)	Individual Home Page	Insurance	
Dending Admission Notes	Program Enrollments	Shared Contact List	Team Members	

• You may enter information in the fields such as Height, Weight Range, Language, Citizenship , Birth Place, Characteristics etc. You can also add a photo and photo date if needed.

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Photo 2				Photo 2 Date	08/01/2020	iii	
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	iii	
Admission Date	01/05/2017	iii		Death Date	MM/DD/YYYY	iii	
* Individual's Time Zone	Asia/Manila	•					
Living Arrangement	Living with Parent	•					
Birth Place							
	Street 1			Street 2			
	Manila	State	~		Philippines	•	
	City S	tate		Zip Code	Country		
Characteristics	gets a bit hyper at times						
	About 2975 characters left						
Guardian of Self	Unknown	•					

• To add images of the **individual**, click on the **Add Image** button beside the 'Photo 2' label. You can browse from your computer and **Open** the image. If Photo 1 has not been uploaded in the **Individual** Demographic Form (IDF), then Photo 2 will be displayed on the **Individual** Home Page.

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Pho	Add Image		
Open $\leftrightarrow \rightarrow \lor \uparrow \downarrow \Rightarrow$ This	is PC > Downloads ~ そ	> Search Downloa	ads
KA LMS Part by part OneDrive	Name	Date modified 8/24/2020 12:38 PM	Type ^
This PC 3D Objects Desktop Documents	 Selected-Avatars-190303-05 ✓ Earlier this month (1) Part by part ✓ Last month (13) 	8/24/2020 12:37 PM 8/13/2020 11:59 AM	PNG File
Downloads Music File nat	Emergency Data Form Angela Mary 2	7/12/2020 3:18 PM	Adobe Ac 🗸 Cancel
Ph	oto 2		



Note: The maximum file size of each photo can be a maximum of 3 MB, and you can only upload .jpg or .jpeg type files.

• **Medical Information:** This section, which is optional, allows you to enter basic information as needed for the individual's medical care. Developmental Disability, Intellectual Disability, Blood Type, Emergency Orders, Adaptive Equipment etc. can be entered under this section.

ledical Information			
Developmental Disability	Autism Autism	ntellectual Disability	- Please Select -
Blood Type	A+ • Prin	nary Care Physician	- Please Select - Mild
Other Medical Information			Moderate Profound Severe
			Unspecified
	About 3000 characters left		//)
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:** The **Behavior Management** field provides space for a brief description of an individual's behavioral concerns and any associated behavior plans.

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Behavior Behavior Management	Need to handle her very carefully when she is in a bad mood.	
	About 2940 characters left	

• **Guidelines:** The 'Guidelines' section, which is optional, contains basic guidelines for providing care on daily living activities. This includes dietary, eating, communication, mobility, supervision, toileting and bathing 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			
	Partially Verbal			
	Sign		12	
	Verbal			
Communication	Other			
Comments				
	About 3000 characters left		li li	
Mobility				
	valks on own			
Mobility Comments				
	About 3000 characters left		li li	
Supervision	About 3000 characters left		li li	
Supervision	About 3000 characters left			
Supervision ipervision Comments	About 3000 characters left Independent			
Supervision Ipervision Comments	About 3000 characters left Independent			
Supervision upervision Comments	About 3000 characters left Independent			
Supervision upervision Comments	About 3000 characters left Independent			
Supervision Ipervision Comments	About 3000 characters left Independent			
Supervision Ipervision Comments	About 3000 characters left Independent About 3500 characters left Whole or Normal consistency	Liquid Consistency	Thin	
Supervision upervision Comments Food Texture Toileting Status	About 3000 characters left Independent About 3500 characters left Whole or Normal consistency Requires Physical Assistance/Equi •	Liquid Consistency Bathing Status	Thin • Requires Support to Bath/Shower •	
Supervision pervision Comments Food Texture Toileting Status Mealtime Status	About 3000 characters left Independent About 3500 characters left Whole or Normal consistency Requires Physical Assistance/Equi Requires Support to Fat	Liquid Consistency Bathing Status	Thin • Requires Support to Bath/Shower •	
Supervision upervision Comments Food Texture Toileting Status Mealtime Status	About 3000 characters left Independent About 3500 characters left Whole or Normal consistency Requires Physical Assistance/Equi Requires Chyport to Eat	Liquid Consistency Bathing Status	Thin • Requires Support to Bath/Shower •	
Supervision upervision Comments Food Texture Toileting Status Mealtime Status Referral Source	About 3000 characters left Independent About 3500 characters left About 3500 characters left Whole or Normal consistency Requires Physical Assistance/Equi Requires Support to Eat	Liquid Consistency Bathing Status	Thin • Requires Support to Bath/Shower •	
Supervision upervision Comments Food Texture Toileting Status Mealtime Status Referral Source	About 3000 characters left Independent About 3500 characters left About 3500 characters left Whole or Normal consistency Requires Physical Assistance/Equi Requires Support to Eat	Liquid Consistency Bathing Status	Thin • Requires Support to Bath/Shower •	
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6. Once the necessary edits are made, click on the **Update** button at the bottom of the form.

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

A success message will be displayed.

The form IDF-DEMOTPHL-G7Q29D7EDMULW has been successfully updated

Back to Form