

OVERS Instructions

Completing online form, Voluntary Acknowledgment of Paternity (45-31)

The electronic AOP form pulls data from the birth certificate and will not be useful to facilities with the business practice of beginning the birth certificate *after* the family has left the facility. We encourage all facilities to examine their current business practices related to intake of birth certificate and AOP information and make changes where possible.

INSTRUCTIONS

1. Begin a new birth certificate record in EBRIS as usual.
2. To maximize the AOP auto-fill utility, make sure the following fields of the birth record are completed before printing the AOP:
 - Child page: Child's name, date of birth
 - Mother page: Mother's current legal name, Mother's name before first marriage (maiden name), Mother's Social Security Number, Mother's birthplace State
 - Marital Status page: Marital status should = "No". Paternity Information should = "Yes"
 - Father page: Father's name, Father's Date of Birth, Father's Social Security Number, Father's birthplace State
3. Select **Print Forms** from the Birth Registration Menu under the grouping 'Other Links'. Click on the link [Paternity - \(45-31 Hospital\)](#) from the **Print Forms** page (A pdf version of the Paternity form will open with the Child and Parent information auto-filled in the TOP portion of the form with the exception of a few fields.)
4. Complete the top portion of the AOP form by entering:

<ul style="list-style-type: none">• Mother's daytime telephone number• Mother's employer• Mother's health insurance status	<ul style="list-style-type: none">• Father's daytime telephone number• Father's present address• Father's employer• Father's health insurance status
--	---
5. Print one copy of the form and complete the bottom portion by hand.
 - All fields **MUST** be completed. Review the form carefully ensuring that all fields are complete and that all dates are correct. Dates for the witness of each signature must match the date of the corresponding parent's signature.
 - You can complete fields above the statement, 'Do Not Sign Until Hospital Witness is Present' either by typing into the pdf or by printing the form and entering the information by hand, in a LEGIBLE script.)
 - If you find an error, do NOT attempt to mark it out or write over it. To insure acceptance of the form start over with a new form. (Please note that you cannot save the typed information as an electronic file. If you need to reprint the form at some later point you will need to re-enter the information.)
6. Make **3** copies of the completed original.
 - Send the original and 1 copy to CHS
 - Give one copy to the father
 - Give one copy to the mother