

immunizations **LINK.LOGIN.LEARN.** 411

hosted by the Missouri Department of Health and Senior Services' Bureau of Immunization Assessment and Assurance
www.health.mo.gov/immunizations

webinar series

Damon A. Ferlazzo, MPA
**Clinical Use and Benefits of State
Immunization Information Systems**
August 21, 2014

What are Immunization Information Systems (IIS)?

- “[...]confidential, population-based, computerized databases that record all immunization doses administered by participating providers to persons residing within a given geopolitical area.”¹
- Sometimes called “Immunization Registries”
- Missouri’s Statewide IIS is known as “ShowMeVax”
- All US states, territories and even some large cities (e.g. Chicago, NYC, LA, DC) have IIS

What are the Purposes of IIS?

- “At the point of clinical care, an IIS can provide consolidated immunization histories for use by a vaccination provider in determining appropriate client vaccinations.” ¹
- “At the population level, an IIS provides aggregate data on vaccinations for use in surveillance and program operations, and in guiding public health action with the goals of improving vaccination rates and reducing vaccine-preventable disease.” ₁

Who Uses IIS?

- Clinics
- Hospitals
- Pharmacies
- Schools
- Child care Facilities
- Public Health
 - Local public health agencies
 - DHSS Division of Community and Public Health

Fast Stats. (as of May 2014)

- Total Clients: 3,826,725
- Total Doses: 34,619,141
- 579 medical provider locations with 3,175 active users
- 481 schools and child care facilities with over 1,643 active users
- 200+ Connections with EMR/EHRs
 - 10 bi-directional connections

What are the benefits to patients?

- Easily tracks immunizations over time and for multiple medical facilities
- Helps ensure patients are properly immunized
 - On schedule
 - Not over immunized
- Makes school immunization verification quick
- Records medical alerts and adverse reactions

What are the benefits to providers?

- Ensures patients are up-to-date
- Helps complete medical records
- Easier to work with patients who are referred or transferred to new medical home
- Coverage reports for quality care measures or grant applications
- Reminder recall reports
- If using EMR/EHR, The Centers for Medicare and Medicaid Services (CMS) Meaningful Use incentive eligibility
- Faster Vaccines for Children (VFC) vaccine order processing and delivery

How are IIS Related to CMS EMR/EHR Meaningful Use?

- CMS is authorized to make incentive payments to eligible professionals (EPs) and eligible hospitals (EHs) demonstrating meaningful use of certified Medicare and Medicaid Electronic Health Records (EHR) technology.

How are IIS and CMS EMR/EHR Meaningful Use Related?

- EPs
 - For Stage 2 of Meaningful Use (MU) ongoing submission of electronic data for immunizations is in the core set for EP's and reporting for cancer and specialty registries is a menu selection.
- EHs
 - The Stage 2 MU requirement for EHs ongoing submission of electronic data for immunizations, syndromic surveillance and electronic laboratory results.

What are the Data Sources for IIS?

- Manual Entry from Web Application
- Vital Records – (hepatitis B birth doses)
- Electronic Medical Records / Electronic Health Records (EMR/EHR) via Health Level Seven (HL7) messages
 - Direct interface or
 - Health Information Networks (Missouri Health Connection)
- Medicaid Billing
- Batch files

Is reporting to an IIS subject to the HIPAA Privacy Rule?

- Per CDC, “No. Reporting of immunizations to an IIS are exempt from the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule since it is considered a public health activity.”²

ShowMeVax

EMR/EHR Interoperability

- Uses HL7 version 2.5.1
- Interfaces with existing EMR/EHR systems
- Bi-directional capability with EMR/EHR
 - Submit & Query

Web Application

- Internet Browser based-application
- Provides similar features to some EMR systems
- Provides several aggregate reports

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Missouri's Statewide Immunization Information System

SHOWMEVAX WEB APPLICATION (NON EMR/EHR ACCESS & USE)

ShowMeVax Web Application Requirements

- PC*
- High Speed Internet
- Internet Explorer*
- Paperwork – Memorandum of Agreement, User Security
- Does not work with mobile devices (smart phones and non-Windows based tablets)

*limited support is supplied for Mac and other browsers

ShowMeVax Web Application Key Features

- Updated immunization schedule guidance
- Online vaccine ordering for Vaccines for Children Program
- Data reports available to providers
- Auto deducting immunization inventory management
- Patient immunization-related medical alerts

Home Page



State of Missouri
DEPARTMENT OF HEALTH AND SENIOR SERVICES

Username: SMV32 [Sign Out](#)

Agency: CASS COUNTY HEALTH DEPARTMENT [Change](#)

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[Immunization Announcements](#)

08/19/2010 2010 Missouri Immunization Conference "Victories and Challenges"

[ShowMeVax Announcements](#)

08/23/2010 Possibly tainted meats sold at Walmart recalled

08/23/2010 Hurricane Danielle suddenly weakened on Tuesday morning, dropping from 100 to 80 mph.

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[Not a VFC Provider? Click here for more information about the VFC Program](#)

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[Immunization Action Coalition](#)

[CDC: Vaccines and Immunizations](#)

[List of Vaccines used in United States](#)

[Vaccine Immunization Schedules](#)

[Catch-up Immunization Scheduler](#)

[VAERS- Vaccine Adverse Event Reporting System](#)

[Inventory items that are Running Low - 25 or less on hand](#) [Records Per Page: 5](#) [Page 1 of 3](#)

Exp Date	Site Name	Vaccine Family	Vaccine Name	Trade Name	Lot Number	NDC Number	On Hand
12/13/2012	DJB TESTING	HEP B	HEP B (3 DOSE) PED/ADC	RECOMBIVAX HB	DJB321	00006-4981-00	10
03/08/2013	DJB TESTING	ZOSTER (SHINGL	ZOSTER VACCINE, LIVE	ZOSTAVAX	DJB987	00006-4963-00	9
06/05/2013	DJB TESTING	HEP B	HEP B ADULT	RECOMBIVAX HB	DJB456	00006-4995-41	9
03/31/2013	DJB TESTING	HEP A	HEP A PED/ADOL	VAQTA	DJB888	00006-4831-41	10
08/30/2012	DJB TESTING	HEP A	HEP A ADULT	VAQTA	DJB777	00006-4096-09	9

[Inventory items that are Expiring in 3 Months](#) [Records Per Page: 5](#)

Exp Date	Site Name	Vaccine Family	Vaccine Name	Trade Name	Lot Number	NDC Number	On Hand	Expires(Mc
01/31/2012	DJB TESTING	HEP B	HEP B (3 DOSE) PE	RECOMBIVAX HE	DJB222	00006-4981-00	3	0
01/31/2012	DJB TESTING	VARICELLA	VARICELLA	VARIVAX	DJB334	00006-4827-00	7	0
01/31/2012	DJB TESTING	HEP B	DTAP/IPV/HEP B	PEDIARIX	DJB444	58160-0811-51	8	0
01/31/2012	DJB TESTING	MMR	MMR	MMR II	DJB555	00006-4681-00	7	0
01/31/2012	DJB TESTING	MENINGOCOCCAI	MENINGOCOCCAL I	MENACTRA	DJB666	49281-0589-05	9	0

Client Search

Client Search

Client Search
My Recent Clients
My Location Recent Clients

Client Search Instructions

☒ **Person Name** Minimum Required Fields: Either Clients Last and First Name or Mothers Maiden Name and Date of Birth)

Last Name :
First Name :

Gender :
Date of Birth : Mon Day Year

Mother's Maiden Name :
Search Type :

☐ **Person Identifier** (Minimum Required Fields: Either Client's DCN or SSN or Client Id)

DCN :
SSN :

Client Id :

Search Result: 500 Records Found
Records Per Page:
Page 1 of 34

Search results exceed more than 500 possible matches. Displaying only the first 500 matches.
Please refine your search criteria to narrow your results.

Client Id	Client Name	Mother's Maiden	Gender	Date of Birth	SSN	DCN	Primary Address
1437582352	WAHOFF, UNKNOWN Primary Name : SMETZER, CAR		FEMALE	01/08/2009			
1441983801	WALTERS, UNKNOWN Primary Name : BRADSHAW, G		MALE	01/17/2009			
2017236	WARREN, UNKNOWN Primary Name : WARREN, UNK						
2017243	WARREN, UNKNOWN Primary Name : WARREN, UNK						
2017245	WARREN, UNKNOWN Primary Name : WARREN, UNK						
2017249	WARREN, UNKNOWN Primary Name : WARREN, UNK						
2017250	WARREN, UNKNOWN Primary Name : WARREN, UNK						
2017251	WARREN, UNKNOWN Primary Name : WARREN, UNK						
2017252	WARREN, UNKNOWN Primary Name : WARREN, UNK						

Personal Information & Demographics

DUCK, ABBY ClientID: 2098820410 DCN: 67579249
VFC Reviewed: Eligible: NO Date of Birth: 09/01/2010

Personal Information Address/Contact Information Family Unit Provider-Client Relation Medicaid Eligibility

Personal Information Instructions:

Type	Primary	First Name	Middle Name	Last Name	Suffix	Delete
PRINCIPAL	Y	ABBY		DUCK		✗
A.K.A.	N	ABIGAIL		DUCK		✗

Add

Mother's Maiden Name: DAISY DUCK Date of Birth: 9/1/2010 15

Gender: FEMALE

Race: ☒ White ☐ Asian
☐ Black or African American ☐ American Indian/Alaskan
☐ Unknown ☐ Pacific Islander

Ethnicity: NON HISPANIC

Special Accommodations/Assistance:
☐ BLIND ☐ HANDICAP ACCESSIBLE
☐ ENGLISH AS SECOND LANGUAGE - NEED INTERPRETER ☐ HEARING IMPAIRED - NEED SIGN INTERPRETER

Edit

DUCK, ABBY ClientID: 2098820410 DCN: 67579249
VFC Reviewed: Eligible: NO Date of Birth: 09/01/2010

Personal Information Address/Contact Information Family Unit Provider-Client Relation Medicaid Eligibility

Personal Information Instructions:

Type	Primary	First Name	Middle Name	Last Name	Suffix	Delete
PRINCIPAL	Y	ABBY		DUCK		✗
A.K.A.	N	ABIGAIL		DUCK		✗

Add

Mother's Maiden Name: DAISY DUCK Date of Birth: 9/1/2010 15

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Special Accommodations/Assistance:
☐ BLIND ☐ HANDICAP ACCESSIBLE
☐ ENGLISH AS SECOND LANGUAGE - NEED INTERPRETER ☐ HEARING IMPAIRED - NEED SIGN INTERPRETER

Apply Cancel

Adding/Deleting Contact Information

DUCK, ABIGAIL ClientID: 2098820410 DCN: 67579249
VFC Reviewed: Eligible: NO Date of Birth: 09/01/2010

Personal Information **Address/Contact Information** Family Unit Provider-Client Relation Medicaid Eligibility Pandemic Flu

Address and Contact Information

Add New Contact

Client ID: 20988

*Primary *Phone Number *Type Sensitive

Telephone 1: YES Extn: HOME NO

Telephone 2: NO Extn: MOBILE NO

Telephone 3: NO Extn: WORK NO

Email: NO NO

Ex:support@oa.mo.gov (or) support@dhss.com

Apply Cancel

DUCK, ABIGAIL

Personal Information **Address/Contact Information** Family Unit Provider-Client Relation

Address and Contact Information Instructions:

View/Manage Addresses Contact Information

Sensitive	Primary	Type	Address	City	State	Zip	Delete
N	Y	MAILING	PO BOX 100	JEFFERSON CITY	MO	65102-0100	✗
N	N	HOME	200 E HIGH ST	JEFFERSON CITY	MO	65101-3207	✗

Add Address Hide History

Sensitive	Primary	Type	Address	City	State	Zip	End Date
N	N	WORK	56 WILDWOOD	JEFFERSON CITY	MO	65109	06/20/2012

Provider Client Relationship

Close Provider Client Relation

Client ID: 396175323
Provider: CASS COUNTY HEALTH DEPARTMENT
Chart Number:
Effective Date: 1/12/2011
*Closed Date: 3/3/2011
*Closed Reason:
MOVED OR GONE ELSEWHERE
OTHER REASON
PARENT/GUARDIAN REQUEST
PROVIDER REQUEST
TRANSFERRED
UNABLE TO LOCATE

Add Provider Client Relation

Client ID: 396175323
Provider: CASS COUNTY HEALTH DEPARTMENT
Chart Number:
*Effective Date: 3/3/2011
Closed Date: <M/d/yyyy>
Closed Reason:
Apply Cancel

- If a relationship already existed for the client, then the only option available is to close.
- After clicking the Close button, user can enter the Closed Date and Closed Reason.

- If a client's relationship is closed, the provider can re-open or open a new relationship by clicking the Add Provider-client Relation button.
- In the Add screens, the only required field is the effective date.

Medicaid Eligibility Information

KIRKLEY, HEAVEN L		ClientID: 2000961	DCN: 63232834	
VFC Reviewed:		Eligible: NO	Date of Birth: 02/20/1993	+
Personal Information	Address/Contact Information	Family Unit	Provider-Client Relation	Medicaid Eligibility
Medicaid Eligibility Instructions:				
Status: CLOSED		Status Date:	Refreshed Date: 12/29/2009	Edit VFC Information
Parent/Guardian Medicaid Case Information:				
DCN:	9450834	Status:	UNKNOWN	
Phone:		Address:	2896 US HIGHWAY 65	
City:	URBANA	State:	MO	Zip: 65767
Client's Medicaid Dates:				
Medicaid Eligibility Begin Date	Medicaid Eligibility Ending Date	Level of Care		
12/02/2009				
10/01/2009	12/01/2009			
04/08/2009	09/14/2009			
04/01/2009	04/07/2009			
12/30/2008	03/31/2009			
05/01/2007	12/29/2008			
Client's Managed Care (Medicaid Only):				
Begin Date	Ending Date	Enroll Plan	Plan Number	PCP Number
04/13/1996	12/31/1998	HEALTHCARE USA	818101305	
05/08/1999	11/09/1999	HEALTHCARE USA	818101305	
06/30/2005	03/30/2007	HEALTHCARE USA	818101305	
06/26/2007	08/21/2008	MISSOURI CARE	818920407	
12/19/2008	03/19/2009	MISSOURI CARE	818920407	
07/15/2009	09/14/2009	MISSOURI CARE	818920407	
VFC Eligible: NO				

VFC Eligibility Information

KIRKLEY, HEAVEN L		ClientID: 2000961	DCN: 63232834	+
		VFC Reviewed: 3/3/2011	Eligible: NO	
Personal Information	Address/Contact Information	Family Unit	Provider-Client Relation	Medicaid Eligibility

Medicaid Eligibility	
Status: CLOSED	
Parent/Guardian M	
DCN: 945083	
Phone:	
City: URBANA	

Edit VFC
Client ID: 2000961
VFC Status
Race: WHITE
Medicaid: Insured?
VFC Status: NO Under insured?

Client's Medicaid Dates:		
Medicaid Eligibility Begin Date	Medicaid Eligibility Ending Date	Level of Care

Family Unit With Responsible Persons

DUCK, ABIGAIL		ClientID: 200212953		DCN: 63237157																																																																																							
		VFC Reviewed:		Eligible: NO																																																																																							
				Date of Birth: 02/01/2012																																																																																							
Personal Information		Address/Contact Information		Family Unit																																																																																							
		Provider-Client Relation		Medicaid Eligibility																																																																																							
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<div> <div>Assign the Current Client as Responsible Person</div> <div>Add a Responsible Person</div> </div>																																																																																											

INVENTORY

Viewing and Printing Inventory Items

DOH-CENTRAL OFF

Site Inventory Instructions

Step 1: Choose a Site

317 FUND SHELF 221
Manage Site
Add Site

Step 2: Set Search Filters (Optional)

☒ Show Active
☐ Show Depleted
☐ Show Expired
Filter by Vaccine: ALL

Search Result: 11
Records Per Page: 15
Page 1 of 1

Vaccine	Trade Name	Lot # ▲	NDC Number	Unit	Exp Date	On Hand	Manufacturer	Trans Report
DTAP	TRIPEDIA	1234567	11111-1111-23	0.5	4/7/2012	10	SANOPI PASTEUR	
DTAP	ACEL-IMMUNE	ABC	11111-1111-11	0.5	4/8/2012	8	WYETH	
DTAP	DAPTACEL	ABCDE	11111-1111-12	0.5	4/11/2012	10	SANOPI PASTEUR	
TYPHOID	TYPHIM VI	BSK171	49281-0790-20	0.5	4/1/2013	20	SANOPI PASTEUR	
TYPHOID	TYPHIM VI	BSK272	49281-0790-51	0.5	4/1/2013	20	SANOPI PASTEUR	
TYPHOID	VIVOTIF BERNA	BSK393	58337-0003-01	0.5	4/1/2013	20	BERNA	
HEP B (4 DOSE) DIALYSIS/IMML	RECOMBIVAX HB	BSK909	00006-4992-00	1.0	4/1/2013	20	MERCK	
DTAP	ACEL-IMMUNE	D12	11111-1111-11	0.5	4/12/2012	13	WYETH	
INFLUENZA, PR FREE	FLUZONE	FLU345	49281-0010-10	0.5	3/8/2013	10	SANOPI PASTEUR	
DTAP	ACEL-IMMUNE	S123	11111-1111-11	0.5	4/12/2012	12	WYETH	
INFLUENZA, LIVE FOR INTRANA	FLUMIST	TEST12	66019-0108-10	0.2	9/1/2011	19	MEDIMMUNE	

Add Inventory
Show Inactive Items

IMMUNIZATIONS

Immunization Record

DUCK, ABILGAIL ClientID: 396175323 DCN: 67579249
VFC Reviewed: 7/20/2011 Eligible: YES Date of Birth: 9/1/2010

Multiple Alerts View Medical History

Other Clients in Family Unit:

Immunizations Immunization Record:

Common Vaccines:

DTP/DT			
POLIO	10/31/2010	7/20/2011	*PARENTAL REFUSAL
HIB	10/31/2010	7/20/2011	7/20/2011
HEP B	9/1/2010	8/15/2011	9/15/2011
PNEUMOCOCCAL	7/20/2011		
ROTAVIRUS			*MEDICAL EXEMPTION FROM 12/1/2010 TO PRESENT*
MMR	2/9/2011		
VARICELLA			*HAD CHICKENPOX 10/5/2011*
HEP A			
INFLUENZA			
MENINGOCOCCAL			*MEDICAL EXEMPTION FROM 12/1/2010 TO PRESENT*
HUMAN PAPILLOMAVIRUS (HPV)			
ZOSTER (SHINGLES)			

Travel Vaccines:

Other Vaccines:

Add New Immunization Add Historical Immunization(s)

User may expand/collapse the list to see all vaccines

If alerts exist, you can view & navigate from here to Medical History Screen

Print

If other family members exist, you can switch between their immunization records from here.

Adding New Immunizations

Immunizations Immunization Schedule View Medical History

Add New Immunization from Inventory

* Entered By: CASS COUNTY HEALTH DEPARTMENT

* Select Inventory Site: DJB TESTING

Filter by Family: ALL Records Per Page: 5 Page 1 of 3

Vaccine	Trade Name	Manufacturer	Lot #	Unit of Measure	Expiration	Doses On Hand
DTAP	DAPTACEL	SANOFI PASTEUR	DJB111	0.5	1/31/2013	9
HEP B (3 DOSE) PEDI/ADOL	RECOMBIVAX HB	MERCK	DJB333	0.5	1/31/2012	3
HEP B (3 DOSE) PEDI/ADOL	RECOMBIVAX HB	MERCK	DJB321	0.5	12/13/2012	10
VARICELLA	VARIVAX	MERCK	DJB334	0.5	1/31/2012	7
DTAP/IPV/HEP B	PEDIARIX	GLAXOSMITHKLINE	DJB444	0.5	1/31/2012	8

(Click on a row above to select a Vaccine)

Cancel

Other Vaccines:

Add New Immunization Add Historical Immunization

Add New Immunization from Inventory

* Entered By: CASS COUNTY HEALTH DEPARTMENT

* Select Inventory Site: DJB TESTING

Vaccine: DTAP/IPV/HEP B
Trade Name: PEDIARIX
Lot Number: DJB444

Manufacturer Name: GLAXOSMITHKLINE
On Hand: 8
Select Another

* Date Administered: 1/12/2012 15

* Delivery Method: INTRAMUSCULAR

* Administered By:

* Shot Site:

Vaccine Event:

DELTOID LEFT
DELTOID RIGHT
VASTUS LATERALIS LEFT

Apply Cancel

Adding Historical Immunizations

DUCK, LUEY ClientID: 200212953 DCN: 63234342
VFC Reviewed: Eligible: NO Date of Birth: 8/15/2010

Immunizations Immunization Schedule View Medical History

Add Historical Immunizations

Selected Vaccine: Vaccine Name: DTAP
Family Name: DTP/TD
Trade Name: DAPTACEL
Manufacturer: SANOFI PASTEUR
Unit of Measure: 0.5
[Select a different vaccine](#)

* Entered By: COLUMBIA-BOONE CO HD

Administered By:

Historical Service Provider:

* Date(s) Administered:

Other Vaccines:

CLINICAL APPLICATION

Immunization Schedule

DUCK, ABILGAIL ClientID: 396175323 DCN: 67579249
VFC Reviewed: 7/20/2011 Eligible: YES Date of Birth: 9/1/2010

Multiple Alerts View Medical History

Other Clients in Family Unit:

Immunizations Immunization Schedule View Medical History

Immunizations Instructions:

Immunization Record:

Common Vaccines:

Vaccine	Next Dose	Next Dose Date	Min Date	Overdue	Recommendation	Dose Validity
DTP/DT	10/31/2010	12/22/2010	7/20/2011			
POLIO	10/31/2010	7/20/2011	*PARENT			
HIB	10/31/2010	7/20/2011	7/20/2011			
HEP B	9/1/2010	8/15/2011	9/15/2011			
PNEUMOCOCCAL	7/20/2011					
ROTAVIRUS	*MEDICAL EXEMPTION FROM 12/1/2010					
MMR	2/9/2011					
VARICELLA	*HAD CHICKENPOX 10/5/2011*					
HEP A						
INFLUENZA						
MENINGOCOCCAL	*MEDICAL EXEMPTION FROM 12/1/2010 TO PRESENT*					
HUMAN PAPILLOMAVIRUS (HPV)						
ZOSTER (SHINGLES)						

Travel Vaccines:

Other Vaccines:

Add New Immunization Add Historical Immunization(s)

DUCK, ABILGAIL ClientID: 396175323 DCN: 67579249
VFC Reviewed: 7/20/2011 Eligible: YES Date of Birth: 9/1/2010

Multiple Alerts View Medical History

Other Clients in Family Unit:

Immunizations Immunization Schedule View Medical History

Immunization Schedule Instructions:

Immunization Schedule:

Vaccine	Next Dose	Next Dose Date	Min Date	Overdue	Recommendation	Dose Validity
DTP/DT	4	1/18/2012	1/18/2012	2/28/2012	DUE	
POLIO	3	8/17/2011	8/17/2011	9/1/2011	OVERDUE	
View ACIP Recommendations						
HIB	3	8/17/2011	8/17/2011	8/17/2011	OVERDUE	
HEP B	3	11/10/2011	11/10/2011	11/11/2011	OVERDUE	
PNEUMOCOCCAL	2	8/17/2011	8/17/2011	8/18/2011	OVERDUE	
ROTAVIRUS					COMPLETE	
MMR	1	9/1/2011	9/1/2011	11/30/2011	OVERDUE	
VARICELLA					HAD DISEASE	
HEP A	1	9/1/2011	9/1/2011	10/1/2011	OVERDUE	
INFLUENZA	1	9/1/2011	9/1/2011	10/1/2011	OVERDUE	
MENINGOCOCCAL					UP TO DATE	
HUMAN PAPILLOMAVIRUS (HPV)					UP TO DATE	
ZOSTER (SHINGLES)					UP TO DATE	

ACIP Recommendation

Summary of ACIP Recommendations for Childhood and Adolescent Immunization for POLIO

- Give to children at ages 2m, 4m, 6-18m, 4-6yrs.
- May give dose #1 as early as age 6wks.
- Not routinely recommended for U.S. residents age 18yrs and older (except certain travelers).

OK

Show Recommendations for Adult Immunization

Vaccine Schedule / Dose Validity

DUCK, LUEY ClientID: 200212953 DCN: 63234342
VFC Reviewed: Eligible: NO Date of Birth: 8/15/2010

Immunizations **Immunization Schedule** View Medical History

Immunization Schedule Instructions:

Immunization Schedule:

Vaccine	Next Dose	Next Dose Date	Min Date	Overdue	Recommendation	Dose Validity
DTP/DT	4	11/13/2011	8/24/2011	2/11/2012	OVERDUE	?
POLIO	2	3/25/2011	3/25/2011	3/26/2011	OVERDUE	?
HIB	1	11/13/2011	11/13/2011	2/11/2012	OVERDUE	?
HEP B					COMPLETE	?
PNEUMOCOCCAL	1	10/14/2010	9/26/2010	11/13/2010	OVERDUE	?
ROTAVIRUS					COMPLETE	?
MMR	1	8/15/2011	8/15/2011	11/13/2011	OVERDUE	?
VARICELLA	1	8/15/2011	8/15/2011	11/13/2011	OVERDUE	?
HEP A	1	8/15/2011	8/15/2011	9/14/2011	OVERDUE	?
INFLUENZA	1	9/1/2011	9/1/2011	10/1/2011	OVERDUE	?
MENINGOCOCCAL					UP TO DATE	?
HUMAN PAPILLOMAVIRUS (HPV)						
ZOSTER (SHINGLES)						

Click Row to show CDC Rule if available. Click row again to collapse.

Immunization Schedule Instructions:

Dose Validity

HEP B

Service Date	Vaccine Name	Valid? *	Next Dose	
08/15/2010	HEP B (3 DOSE) PED/ADOL	YES	Next Dose Date	
10/17/2010	HEP B (3 DOSE) PED/ADOL	YES	Min Due	
02/25/2011	DTAP/IPV/HEP B	YES	Overdue	
			Recommendation	COMPLETE

* This column indicates if the dose was considered as valid or invalid by immunization scheduler according to ACIP recommendations.

OK

Age inappropriate vaccine (DTaP given to adult)

Shot administered after maximum age

Maximum age for this vaccine is 2555 days.
Are you sure you want to continue?

OK Cancel

Add New Immunization

* Select Inventory

Lot Number: 123456

DEPARTMENT

Manufacturer Name: GLAXOSMITHKLINE
On Hand: 14
Select Another

* Date Administered: 5/13/2014 15

* Administered By: DF

Vaccine Event:

* Delivery Method: INTRAMUSCULAR

* Shot Site: DELTOID LEFT

Apply Cancel

Please wait...
Retrieving Records

Too closely spaced (hep. B)

Add New Immunization from Inventory

* Entered By: COLUMBIA-BOONE COUNTY HEALTH DEPARTMENT

* Select Inventory: **Shots too closely spaced**

The shot is too closely spaced to other existing similar shot(s).
Are you sure you want to continue?

OK Cancel

Tr: GLAXOSMITHKLINE
Lot: 3
Select Another

* Date Administered:
* Administered By: DF
Vaccine Event:
* Shot Site: DELTOID LEFT

INTRAMUSCULAR

Apply Cancel

Please wait...
Retrieving Records

Medical Alerts

DUCK, DONALD	ClientID: 100000018003	DCN: 64674297
	VFC Reviewed:	Eligible: NO
		Date of Birth: 4/1/1959

This patient is allergic to EGGS.

Other Clients in Family Unit:

Immunizations Immunization Schedule View Medical History

Immunizations Instructions:

Immunization Record:

Common Vaccines:

DTAP/DTP	
TDAP/TD	4/1/2000 4/1/2014
POLIO	
HIB	
HEP B	
PNEUMOCOCCAL	
ROTAVIRUS	
MMR	
VARICELLA	
HEP A	
INFLUENZA	
MENINGOCOCCAL	
HUMAN PAPILLOMAVIRUS (HPV)	
ZOSTER (SHINGLES)	

Travel Vaccines:

IG Vaccines:

Other Vaccines:

Add New Immunization Add Historical Immunization(s)

Next Dose Reminder Recall Reports

Name and Date of Birth	Phone	Address	Email
------------------------	-------	---------	-------

DUCK, DAFF D

573-000-000

123 Main Street

Small Town MO 65550

Client Reminder Recall

Next Due Date	Overdue Date	Shot Family	Next Dose Number
05/24/2014	08/22/2014	RUBELLA	1
05/24/2014	08/22/2014	MUMPS	1
05/24/2014	08/22/2014	MMR	1
08/08/2014	08/22/2014	HIB	1
06/06/2014	06/07/2014	HEP B	3
05/24/2014	08/22/2014	VARICELLA	3
05/24/2014	06/23/2014	HEP A	1
05/24/2014	08/22/2014	MEASLES	1

BUNNY, BUGS

573-000-000

123 Main Street

Small Town MO 65550

Client Reminder Recall

Next Due Date	Overdue Date	Shot Family	Next Dose Number
06/05/2014	09/03/2014	MMR	1
06/05/2014	09/03/2014	HIB	1
06/05/2014	07/05/2014	HEP A	4
06/05/2014	09/03/2014	VARICELLA	1
06/05/2014	09/03/2014	MEASLES	1

Additional Reports

- Vaccine Tally Sheet
- Doses Administered by Inventory Site, Vaccine Name, Trade Name and Age Group
- Doses Administered by Vaccine Name and Age Group (Historical)
- Doses Administered by Vaccine Name and Age Group (From HL7 Only)
- Client Listing
- Immunization Data by Vaccine Series
- Immunization Data by Vaccine Type and Summary of Vaccine Coverage By Age Group

Questions / Discussion

immunizations **LINK.LOGIN.** 411 **LEARN.**

hosted by the Missouri Department of Health and Senior Services' Bureau of Immunization Assessment and Assurance
www.health.mo.gov/immunizations

webinar series

Clinical Use and Benefits of State Immunization Information Systems

ETC.

Resources:

- Four self-paced learning modules:
 - <http://ShowMeVaxU.com>
- Missouri Public Health Meaningful Use Page:
 - <http://health.mo.gov/atoz/mophie>
- Centers for Disease Control & Prevention Meaningful Use Page:
 - <http://www.cdc.gov/EHRmeaningfuluse/>
- Centers for Disease Control & Prevention Immunization Information Systems Page:
 - <http://www.cdc.gov/vaccines/programs/iis/>

References

1. About Immunization Information Systems,
Centers for Disease Control and Prevention
<http://www.cdc.gov/vaccines/programs/iis/about.html>
2. IIS Frequently Asked Questions
<http://www.cdc.gov/vaccines/programs/iis/resources-refs/faq.html#Q8>