

The Washington, DC Immunization Registry System User Manual

A guide to using the Washington DC Immunization Registry System
(revised 03/23/07)

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Section I: Starting the Registry

To use the Immunization Web Registry system, you must first connect to the Internet. Once you are connected to the Internet, point your web browser to D.C. Immunization Program's home page at <https://immunization.dcgov.org/irswebapp/home.jsp> (make sure that there is an s at the end of *https*).

Your web browser should now look like this:



Immunization Homepage

Under “Database Access,” click on the word “Registry.” This will take you to a new window that will allow you to log into the registry. Each user should have been given a unique *User Name*, *Password*, and *Context*. You will need to type this information into the appropriate box. (Note: The password is case sensitive, so the password must be typed with the correct lower case and capitalization.) Once you have entered all of the information, then click on the “Login” button. This will log you into the registry and take you to the search page to search for immunization records.

Please refer to the help section at the end of this manual if you get an error message when trying to log in.

Login Screen

Section II: Searching the Registry for an Immunization Record

You can search for a record using the patient's *last name, first name, middle name, date of birth, WIC number, Medicaid number, Social Security number, DCPS Id*, or any combination of these. Please refer to section 3, "[Searching Tips and Techniques](#)," to learn about the easiest and most effective ways of searching the Immunization registry.



The screenshot shows the 'Immunization Registry System' search interface. It features a title bar with the system name in a stylized font. Below the title bar, the text 'Please enter your search criteria below:' is displayed. The search criteria are organized into a vertical list of input fields, each with a label to its left: 'Last Name:', 'First Name:', 'Middle Name:', 'Birth Date (mm/dd/yyyy):', 'WIC #:', 'Medicaid #:', 'SSN:', and 'DCPS:'. Each label is followed by a white rectangular input box. At the bottom of the form, there are four buttons: 'New', 'Clear', 'Search', and 'Logout', all rendered in a blue, italicized font.

Search Box

Search Record

To search for a patient's record, type in the information that you will use for the search into the appropriate boxes. Once the information is typed into the boxes, then click on the "Search" button to begin the search. For instance, typing *Green* into the last name box and then clicking on the "Search" button will list all of the records in the registry whose last name is *Green*. However, it will also list all records whose last name begins with *Green*, such as *Greene* or *Greenwood*. Since the results are sorted alphabetically by last name, all of the *Green*'s will be listed first, followed by the *Greene*'s and then the *Greenwood*'s.



Search Button

The *Last Name, First Name, and Middle Name* boxes are not case sensitive, so it does not matter if the characters typed into the search boxes are capital or lowercase letters. The *Date of Birth* must be in the format mm/dd/yyyy with a 4 digit year and with forward slashes separating the month, day, and year. The *Medicaid* box has an 8 digit restriction and the *Social Security* box has a 9 digit restriction with no dashes separating the number. The *WIC* and *DCPS* boxes do not have digit restrictions.

Immunization Registry System

Search Logout

Click the last name to view the details.

ID	First Name	Last Name	Middle Name	DOB DATE
1	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
2	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
3	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
4	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
5	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
6	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
7	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
8	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
9	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
10	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
11	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980
12	DELOSSANTOS	DELOSSANTOS	DELOSSANTOS	04/02/1980

Search Results

Never use spaces or any symbols (such as hyphens, apostrophes, or accents marks) in a search. Spaces are never used in the registry, and symbols are used *only* to hyphenate two last names. Using a space or a symbol in a search will produce no matching records. Simply type the name without any spaces or symbols, regardless of how strange it may look. For instance, the last name *de los Santos* is listed in the registry as *Delossantos* and the first name *D' Von* is listed as *Dvon*.

If a search produces more than 200 matches, only the first 200 matched records will be listed. If a search produces no matches, then no records will be listed. Resulting records from a search are listed alphabetically by last name, then first name, and finally by middle name.

Clear Fields

To clear existing fields on the search screen, simply click on the “Clear” button. This will give you blank fields for a new search.



Add/Create New Record

To create a new immunization record, simply click on the “New” button at the bottom left of the search box. This will allow you to add a new person’s record into the registry.



Section III: Searching Tips and Techniques

What is the best way to search for a record?

It is strongly recommended that you begin a search by using *only* the patient's date of birth. Searching by a patient's first name can be inaccurate because of variations in spelling. For instance, if you search for a patient named *Britany Doe*, you will not find the record if that person is in the registry under *Brittany Doe*. Last names can also be misleading, as many patients use two last names. If you use the last name to search for a patient named *John Smith*, you will not find him if he is in the registry under the name *John Doe-Smith*. The best way to find a record is to perform a search with only the patient's date of birth, which will pull up every patient's record whose birth date matches the birth date of the patient you are searching for. The matching records are sorted by last name, so it is easy to find a particular record. If you do not see the patient under his/her last name, then look at all of the search results to see if the patient is listed with either a hyphenated name or with a different last name.

What if I do not see the record after searching with the birth date?

Occasionally, dates get mixed up on forms and a patient might be mistakenly entered into the registry under a wrong birthday. For instance a person born 08/02/1996 might be in the registry under 02/08/1996, especially if that person is from a country where the date is written with the day first and then the month. If you do not see the patient under the birth date that you have, then it is recommended that you perform a new search using the first few letters of the last name and the first few letters of the first name. By using only the first two or three letters, you will be more likely to avoid problems with alternate spellings (such as Brittany and Britany) than if you used the entire name.

Section IV: Viewing an Immunization Record

To view a patient's immunization record, click on the last name of the patient whose record you would like to view. (The last name will be blue and underlined.) This will open the patient's immunization record which is composed of several different sections, such as *Demographics*, *Immunization*, and *Disease History*.



The top section of the immunization record gives buttons and links that allow you to perform several functions, such as save, print, fax, set defaults.

Save Data or Changes

To save data or changes to a patient's immunization record, click on the "Save" button on the upper left corner of the top section of the web page. This will allow you to save all changes made to the immunization record. (Note: Always click the "Save" button before proceeding to next screen).



Save Button

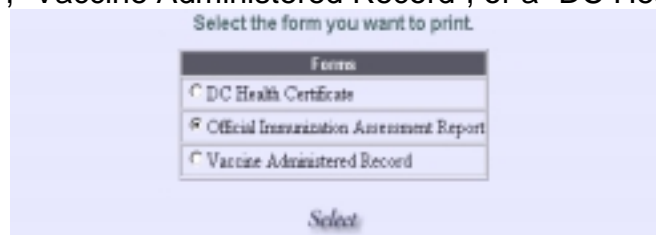
Print a Record

To print a patient's immunization record, click on the "Print" button on the patient record. This will bring up a window for you to select which type of report you would like to have printed.



Print Button

To choose the type of printout you want, you can select an "Official Immunization Assessment Report", "Vaccine Administered Record", or a "DC Health Certificate."



Print Form Page

This will print the entire Immunization record as an “Official Immunization Assessment Report”, “Vaccine Administered Record”, or a “DC Health Certificate.”

Official Immunization Assessment Report
District of Columbia – Department of Health – Immunization Reports
Voice 202-576-7130 Fax 202-576-6418

Last Name: 222111TEST
First Name: 222111CASE
Middle Name: 222111TESTCASE
Date of Birth: 09/06/1993
Sex: Male Female

DCVax	Start Date	End Date	Notes
DTaP	01/04/2000	06/01/2000	
Tdap	08/03/2000		
MM			
MMV			
MMV2			
MMV3			
MMV4			
MMV5			
MMV6			
MMV7			
MMV8			
MMV9			
MMV10			
MMV11			
MMV12			
MMV13			
MMV14			
MMV15			
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MMV34			
MMV35			
MMV36			
MMV37			
MMV38			
MMV39			
MMV40			
MMV41			
MMV42			
MMV43			
MMV44			
MMV45			
MMV46			
MMV47			
MMV48			
MMV49			
MMV50			

Disease Name	History	Date of Onset	Estimated Date of Onset
Varicella			

Based on the information listed above, as of 08/15/2006, this record suggests the following immunization assessment:
 Cvraxim®: **None to 2006**
 Dtap®: **None to 2006**
 Aclis Cavaxim®: **None to 2006**
 Dtapaxim®: **None to 2006**

*Vaccines that are shown in red and underlined are required by DC children/schools. Others are recommended only.

Official Immunization Report

DISTRICT OF COLUMBIA DEPARTMENT OF HEALTH
IMMUNIZATION PROGRAM
VACCINE ADMINISTERED RECORD

PROVIDER INFORMATION: Name: _____ Address: _____ Telephone: _____

PATIENT INFORMATION: Patient ID Number: _____ Patient Name: 222111TEST 222111CASE 222111TESTCASE Date of Birth: 09/06/1993 Sex: Male Female Race/Ethnicity: White Non-Hispanic Black Hispanic Asian or Pacific Islander Other

Parent or Guardian Name: _____ Telephone: Home Del. Home Address: _____ Ward: _____

DCVax	Start Date	End Date	Notes
DTaP	01/04/2000	06/01/2000	
Tdap	08/03/2000		
MM			
MMV			
MMV2			
MMV3			
MMV4			
MMV5			
MMV6			
MMV7			
MMV8			
MMV9			
MMV10			
MMV11			
MMV12			
MMV13			
MMV14			
MMV15			
MMV16			
MMV17			
MMV18			
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MMV32			
MMV33			
MMV34			
MMV35			
MMV36			
MMV37			
MMV38			
MMV39			
MMV40			
MMV41			
MMV42			
MMV43			
MMV44			
MMV45			
MMV46			
MMV47			
MMV48			
MMV49			
MMV50			

Vaccine Administered Record

DISTRICT OF COLUMBIA CHILD HEALTH CERTIFICATE

Part 1: Child's Personal Information. Parent/Guardian: Please complete Part 1 clearly and completely & sign Part 6 below.

Child's Last Name: 222111TEST Child's First & Middle Name: 222111CASE Date of Birth: 09/06/1993 Sex: M F Race/Ethnicity: White Non-Hispanic Black Non-Hispanic Hispanic Asian or Pacific Islander Other

Parent or Guardian Name: _____ Telephone: Home Del. Home Address: _____ Ward: _____

Emergency Contact: None Home Del. City/State (Other than D.C.): _____ Zip Code: _____

School or child care facility: Medical Private Insurance None Other: _____ Primary Care Provider (PCP): _____

Part 2: Child's Health History, Examination & Recommendations. Health Provider: Form must be fully completed.

DATE OF HEALTH EXAM: _____ WT: _____ HT: _____ IN: _____ CM: _____ BP: _____ / _____ NML: _____ HGB / HCT: _____ (Please use mm Hg)

HEALTH CONCERNS	REFERRED or TREATED	HEALTH CONCERNS	REFERRED or TREATED
Oral-Oral Health <input type="checkbox"/> None <input type="checkbox"/> YES <input type="checkbox"/> Referred <input type="checkbox"/> Under Rx	Language/Speech <input type="checkbox"/> None <input type="checkbox"/> YES <input type="checkbox"/> Referred <input type="checkbox"/> Under Rx	Vision <input type="checkbox"/> None <input type="checkbox"/> YES <input type="checkbox"/> Referred <input type="checkbox"/> Under Rx	Hearing <input type="checkbox"/> None <input type="checkbox"/> YES <input type="checkbox"/> Referred <input type="checkbox"/> Under Rx
Autism <input type="checkbox"/> None <input type="checkbox"/> YES <input type="checkbox"/> Referred <input type="checkbox"/> Under Rx	Development <input type="checkbox"/> None <input type="checkbox"/> YES <input type="checkbox"/> Referred <input type="checkbox"/> Under Rx	Behavioral/Emotional <input type="checkbox"/> None <input type="checkbox"/> YES <input type="checkbox"/> Referred <input type="checkbox"/> Under Rx	Learning/Attention <input type="checkbox"/> None <input type="checkbox"/> YES <input type="checkbox"/> Referred <input type="checkbox"/> Under Rx
Neurologic <input type="checkbox"/> None <input type="checkbox"/> YES <input type="checkbox"/> Referred <input type="checkbox"/> Under Rx			

ANNUAL DENTIST VISIT: Age 3 and older: Has the child seen a Dentist/Oral Provider within the last year? YES NO Referred

A. Significant health history, conditions, communicable illness, or restrictions that may affect school, childcare, sports or camp.
 NONE YES, please detail: _____

B. Significant allergies or health conditions that may require emergency medical care at school, childcare, camp, or sports activity.
 NONE YES, please detail: _____

DC Health Certificate

Fax a Record

To fax a patient's immunization record, click on the “Fax” button on the patient record. This will allow you to fax out a patient's immunization record via fax.



Fax Button

Choose the type of form you want to fax, type in the recipient's name, and select the appropriate fax number you want to fax to.

Select the form you want to fax.

Forms	
<input type="radio"/>	DC Health Certificate
<input checked="" type="radio"/>	Official Immunization Assessment Report
<input type="radio"/>	Vaccine Administered Record

Recipient	
Name:	<input type="text"/>

Fax Numbers	
<input type="radio"/>	Other
<input type="radio"/>	CLOSED - DC DOH MOH Healthy Start 2 (202-562-5084)

Select

Fax Page

Perform a Previous Search

To return to the results from your previous search, click on the “Previous Search” link on the upper right corner to the top section of the web page. This will take you back to your previous search results for review.

[Previous Search Results](#)

Previous Search Link

Configure Default Values

To set default values, click on the “Configure My Default Values” link on the top right section of the web page. This will allow you to set static values for an account on which you are currently working. These settings will be automatically inserted onto each record until you manual change it. (Note: Remember to click the “Save” button before proceeding to next screen).

[Configure My Defaults](#)

Configure Defaults Link

Save

User Defaults	
Assessed By:	<input type="text"/>
Assessment Date:	<input type="text"/>
Vaccinator:	(Leave original value. Click here to change.)
Grade:	<input type="text"/>
School:	(Leave original value. Click here to change.)
Head Start:	(Leave original value. Click here to change.)
Daycare:	(Leave original value. Click here to change.)
WIC Site:	(Leave original value. Click here to change.)
Clinic:	(Leave original value. Click here to change.)
Doctor:	(Leave original value. Click here to change.)
Insurer:	(Leave original value. Click here to change.)
Outreach Event:	(Leave original value. Click here to change.)

Default Value Page

Use Default Values

To use default values, click on the “Use Default Values” link on the top left section of the web page. This will allow you to insert default values automatically. (Note: Remember to click the “Save” button before proceeding to next screen).

A screenshot of a blue rectangular button with the text "Use Default Values" in a light blue font.

Default Value Link

Perform New Search

To perform a new search, click on the “Search” button on the right top section of the web page. This will give you a blank screen for a new search. Type the search information into the appropriate boxes and click the “Search” button.

A screenshot of a light blue rectangular button with the text "Search" in a darker blue font.

Search Button

The Middle section of the immunization record gives the patient’s name, date of birth, and age in the following format: *Last, First Middle - Date of Birth - Age*. Below this information is a current assessment of the patient’s immunization record. When the record is selected, the immunizations in the registry that the patient has received are analyzed using the current D.C. immunization requirements. Any immunizations that are overdue and due for the patient are listed next to *OVERDUE* and *DUE* and *boxed in red*. Immunizations that are not required but may be recommended by a physician are listed next to *OVERDUE*, *DUE*, and *ALSO CONSIDER displayed in blue*. If the patient is fully up to date on his/her immunizations, then the *OVERDUE* and *DUE* lists will be blank.

The main section of the immunization record is comprised of different “pages” with corresponding “tabs.” To explore each page, simply click on the corresponding “tab”.

The Demographics Page

When an immunization record is selected, it automatically opens to the *Demographics* page. This page lists the last name, first name, middle name, birth date, gender, and other key information of the patient. To enter information to this page, click in the appropriate field and type in the information. (Note: Remember to click the “Save” button before proceeding to next screen).

The screenshot displays the 'Immunization Registry System' interface. At the top, there are navigation links: 'Home', 'New', 'Delete', 'Print', 'Run', 'Search', and 'Export'. Below these are links for 'Printout Search Results' and 'Customize My Layout'. The patient information shown includes: '2211782F, 22117CAB, 2211782F DABE - OMB/190 - 12 years, 11 months', 'ID NUMBER: [REDACTED] [REDACTED] [REDACTED]', 'DABE Management, Reg A', 'ALSO CONSIDER', and 'PENDING'. A note states: '*Fields that are bolded are required by the children's rules. Others are recommended only.' The main form is divided into three sections: 'Personal Information' (Last Name, First Name, Middle Name, Birth Date, Gender), 'Address' (Address, City, State, Zip), and 'Contact Information' (VAB, Gender, Race, Ethnicity, Employment, Birth Date, Home Phone, Work Phone, Ext., Assessment Date, Call Pref. Exp., Call Pref. Thru).

Demographic Page

The Immunization Page

To view the patient's actual immunization record, click on the "Immunization" tab. The vaccine types are listed on the left of the page, and the dates that these vaccines were given are listed to the right of each vaccine type. Please note that similar vaccine types (such as DTP, DTaP, DT, Td, DTP-Hib, and DTaP-Hib) are not necessarily listed together, so at first it may not be obvious if a patient has received all of his/her immunizations. You will probably need to scroll down the page to view the entire immunization record. (Note: To view where the immunization was given, simply click on the dose itself.)

In the illustration below, the patient has received 2 TD's and 1 TdaP. According to the assessment, the patient is overdue for Hep B, MMR, and IPV. The patient is also eligible for Meningococcal and Hep A vaccinations.

Immunization Registry System

[New](#) [Delete](#) [Print](#) [Fax](#) [Search](#) [Logout](#)
[Previous Search Results](#)
[Configure My Defaults](#)

[Use Default Values](#)

222111TEST, 222111CASE 222111TESTCASE - BDOB/1990 - 12 years, 11 months

OVERDUE: **[Hep B] [MMR] [IPV]**
 DUE: Meningococcal, Hep A
 ALSO CONSIDER:
 EXEMPTION(S):

**Vaccines that are boxed are required by DC childcare/schools. Others are recommended only.*

Demographics | **Immunization** | Guardian | Enrollments | Medical Home | Exemptions | Out Reach | Disease | IIC

Type	1	2	3	4	5
Click here to add a new shot. (Or click a vaccine in the "Type" column to add a new shot for that vaccine.)					
Click here to delete the selected shots.					
DTP					
DTaP					
DT					
Td		<input type="checkbox"/> OUI10000	<input type="checkbox"/> OUI1A000		
TdP		<input type="checkbox"/> OUI30000			
Tetanus Toxoid					
Diphtheria Toxoid					
Permeic					
DTP-Hib					
DTaP-Hib					
Hib					
Hib-HepB					
Hepatitis B					
DTaP-HepB-IPV					
OPV					
IPV					
MMR					
Mening					

Sample Immunization Record

Add a Shot/Immunization Date

To add a shot or an immunization date to the patient's immunization record, click on the "Add a new shot" link or click a vaccine in the "Type" column to add a new shot for that vaccine. This will open up the "shot information" page. Insert the appropriate and provided information. (Note: Remember to click the "Save" button before proceeding to next screen).

[Click here to add a new shot.](#)
[Add a Shot Link](#)

[Save](#)

[Use Default Vaccinator](#)

Shot Information	
Vaccination Name:	<input type="text" value="DTP"/>
Vaccination Date:	<input type="text"/>
Vaccine Source:	<input type="text" value="<unknown>"/>
Immunization Site:	<input type="text" value="<unknown>"/>
Vaccine Manufacturer:	<input type="text" value="<Unknown>"/>
Vaccine Lot #:	<input type="text" value="<other>"/> <input type="text"/>
VIMs Given:	<input type="checkbox"/>
VIM Publication Date(s):	Click to select the VIMs.
VIMs Published Date*:	Click to select the vaccinator.
Vaccinator:	Click to select the vaccinator.
VFC Account PIN:	<input type="text"/>
Reaction Description:	<input type="text"/>

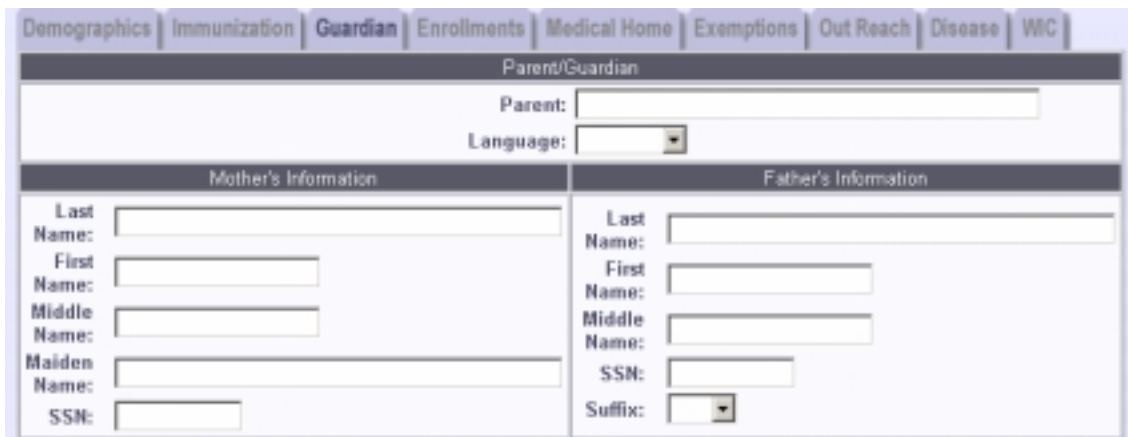
Delete a Shot/Immunization Date

To delete a shot or immunization date from the patient's immunization record, put a check next to the left side of the vaccine you want deleted and click on the "Delete the selected shots" link. (Note: Remember to click the "Save" button before proceeding to next screen).

[Click here to delete the selected shots.](#)
Delete a Shot Link

The Guardian Page

To view the patient's parent/guardian name, click on the "Guardian" tab. The parent/guardian name and other key information are displayed. To enter parent/guardian information, click in the appropriate field and type in the data. (Note: Remember to click the "Save" button before proceeding to next screen).

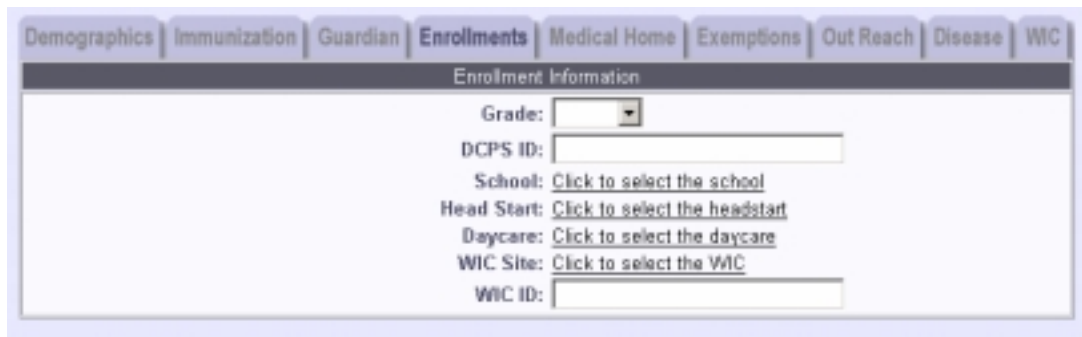


The screenshot shows a web-based form titled "Guardian Page". At the top, there is a navigation bar with tabs for "Demographics", "Immunization", "Guardian", "Enrollments", "Medical Home", "Exemptions", "Out Reach", "Disease", and "WIC". The "Guardian" tab is selected. Below the navigation bar is a header "Parent/Guardian". Under this header, there are two input fields: "Parent:" and "Language:". Below these are two columns: "Mother's Information" and "Father's Information". The "Mother's Information" column contains fields for "Last Name:", "First Name:", "Middle Name:", "Maiden Name:", and "SSN:". The "Father's Information" column contains fields for "Last Name:", "First Name:", "Middle Name:", "SSN:", and "Suffix:". Each field is represented by a text input box or a dropdown menu.

Guardian Page

The Enrollment Page

This page records the affiliations that a patient has with an educational institution that has a provider identifier. The provider identifier includes a listing of schools, day cares, and head starts. It also consists of the patient's current grade and WIC site. To enter an educational institution, click in the appropriate field and either type in the data or click on the appropriate link and select an educational institution. (Note: Remember to click the "SAVE" button before proceeding to next screen).



The screenshot shows a web-based form titled "Enrollment Page". At the top, there is a navigation bar with tabs for "Demographics", "Immunization", "Guardian", "Enrollments", "Medical Home", "Exemptions", "Out Reach", "Disease", and "WIC". The "Enrollments" tab is selected. Below the navigation bar is a header "Enrollment Information". Under this header, there are several input fields and links: "Grade:" with a dropdown menu, "DCPS ID:" with a text input box, "School:" with a link "Click to select the school", "Head Start:" with a link "Click to select the headstart", "Daycare:" with a link "Click to select the daycare", "WIC Site:" with a link "Click to select the WIC", and "WIC ID:" with a text input box.

Enrollment Page

The Medical Home Page

This page records the patient's medical providers and any medical ID numbers. The providers include listings of clinics, doctors' offices, and insurers throughout the District of Columbia. To enter a medical provider, click in the appropriate field and select/enter data. (Note: Remember to click the "Save" button before proceeding to next screen).

Demographics	Immunization	Guardian	Enrollments	Medical Home	Exemptions	Out Reach	Disease	WC
Clinic Information								
Clinic: Click to select the clinic								
Clinic Number: <input type="text"/>								
CNMC ID: <input type="text"/>								
Georgetown Van ID: <input type="text"/>								
New Clinic Number: <input type="text"/>								
Upper Cardozo ID: <input type="text"/>								
Insurer Information								
Insurer: Click to select the insurer								
Advantage ID: <input type="text"/>								
Aetna ID: <input type="text"/>								
Alliance ID: <input type="text"/>								
Amerigroup ID: <input type="text"/>								
CCHP ID: <input type="text"/>								
CIGNA ID: <input type="text"/>								
Chartered ID: <input type="text"/>								
GWIHHP ID: <input type="text"/>								

Medical Home Page

The Exemption Page

This page records a patient's exemption due to medical contraindications or religious beliefs. If a patient has an exemption, then the name of the disease is shown along with the exemption type, the reason for exemption, the expiration date, the report status, and the approval status.

Antigen	Exemption Type	Reason	Permanent	Expiration Date	Reported By	Reported By Title	Reported Date	DOH Approved By	DOH Approved By Title	DOH Approved Date
Click here to add a new exemption.										
Click here to delete the selected exemptions.										
Anthrax	M	Allergy to vaccine		01/31/2003	CTINID	Mother	01/20/2003	JCKL:DI	CPNP	01/20/2003
Measles	M	Receipt of blood product		01/01/2002	Doctor	MD (Physician)	02/10/2002	JCKL:DI	CPNP	02/10/2002
Diphtheria	R	Religious belief		06/30/2003	parent	Mother	03/10/2003	jc	CPNP	03/30/2003

Exemption Page

The Outreach Page

This page records when and where a patient visited an outreach site. To add an outreach event to the patient's record, click on the link "Click here to add a new outreach event". Then select the appropriate outreach event from the drop-down list.

222111TEST, 222111CASE 222111TESTCASE - 09/06/1993 - 13 years, 3 months

OVERDUE: **Hep B**, **MMR**, **IPV**
DUE: Meningococcal, Hep A
ALSO CONSIDER: Flu
EXEMPTION(S):

***Vaccines that are boxed are required by DC childcare/schools. Others are recommended only.**

Demographics | Immunization | Guardian | Enrollments | Medical Home | Exemptions | **Out Reach** | Disease | WIC

#	Event Date	Event Name
Click here to add a new outreach event.		

Outreach Page

[Click here to add a new outreach event.](#)

Select

Outreach Event:

NOTE: Only the outreach events which the person has not already attended and which fall after the person's birth date are shown.

Outreach Event:

NOTE: Only the outreach events which the person has not already attended and which fall after the person's birth date are shown.

- Aetna (03/23/2006)
- CNMC Generations Pro (09/01/2005)
- Hur. Katrina - Louis (09/01/2005)
- Hur. Katrina - Missi (09/01/2005)
- Hur. Katrina - Alaba (09/01/2005)
- DelMarva (04/08/2004)
- NIS 2003 (02/25/2003)
- MAA_Advantage (12/13/2002)
- DCPS Tuition Grant (09/01/2002)
- GPRA 2001 (12/31/2001)
- STD HepB Outreach (06/26/2001)
- GPRA 2000 (12/31/2000)
- GPRA 1999 (12/31/1999)
- GPRA 1998 (12/31/1998)
- CNMC 1998 Back to Sc (08/29/1998)
- CNMC 1997 Back to Sc (08/23/1997)

The Disease History Page

This page records a patient's history of diseases that would influence the patient's need to receive certain vaccines, such as varicella. If a patient has had an immunization-preventable disease, then the name of the disease is shown along with the word "Positive." If the exact date of the onset of the disease is known, then it appears under "History Date." Otherwise, the estimated month and year of the disease are given. When possible, the title (Physician, Mother, Father, Legal Guardian) of the person who verified the disease history is given along with his/her name.

222111TEST, 222111CASE 222111TESTCASE - 09/06/1993 - 13 years, 3 months

OVERDUE: **MMII** **MMII** **MMII**

DUE: Meningococcal, Hep A

ALSO CONSIDER: Flu

EXEMPTION(S):

*Vaccines that are boxed are required by BC children/schools. Others are recommended only.

Demographics | Immunization | Guardian | Enrollments | Medical Home | Exemptions | Out Reach | **Disease** | WC

#	Disease	History	Date of Disease Onset	Estimated Month of Disease Onset	Estimated Year of Disease Onset	Name of Diagnoser/Reported	Diagnosed Reported By	Delete
Click here to add a new disease history.								
Click here to delete the selected disease history records.								
1	Varicella	Positive			1999	maas	Mother	<input type="checkbox"/>

Disease History Page

Add Disease History

To add a disease history to the patient's immunization record, click on the "Click here to add a new disease history" link at the top middle section of the immunization record. This will allow you to select the disease name, history type, and the diagnoser information. (Note: Remember to click the "SAVE" button before proceeding to next screen).

[Click here to add a new disease history.](#)

Add Disease Link

Disease History Information

Disease Name:

History:

Date of Disease Onset:

Estimated Month of Disease Onset:

Estimated Year of Disease Onset:

Name of Diagnoser/Reported:

Diagnosed Reported By:

Delete Disease History

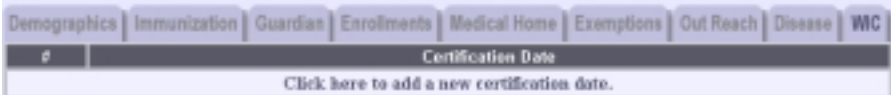
To delete a disease history from the patient's immunization record, put a check in the box to the far right of the disease and then simply click on the "Click here to delete the selected disease history record" link at the top middle section of the immunization record.

[Click here to delete the selected disease history records.](#)

Delete Disease Link

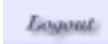
The WIC Page

This page records where a patient visited a WIC site. To add a certification date, click on the “Click here to add a new certification date” link and enter the date. (Note: Remember to click the “Save” button before proceeding to next screen).



Section 9: Exiting the Registry

When you have finished using the registry, click the button labeled “Logout” (next to the “Search” button). You will then go to a new web page that will inform you that you have been logged out of the system. This is the proper way to exit the registry.



Logout Button

You can also exit the registry by simply closing the Internet browser. This will also log you out of the system.

While you are logged into the registry, you may visit other web sites without being automatically logged out. You can return to the Immunization web site after visiting an outside site and still be able to search for records. However, the registry will automatically log you out if your account is idle for a certain length of time (i.e. no new search is performed or no new patient information is viewed).

If you are logged out, you can restart the registry at any time by following the steps described in section 1, “Starting the Registry.”

Thank you for your interest in our Washington DC Immunization Registry System. We hope that you will enjoy using this system.