

Education School module Reports Only



Every Child Deserves a School Nurse



Education Module Agenda

- ◆ Logging into NMSIIS
- ◆ Patient Module
- ◆ Immunization Module
 - Printing Official Immunization Records
- ◆ Education Module Overview
- ◆ School Nurse Reports
- ◆ Exemptions

Logging In To NMSIIS

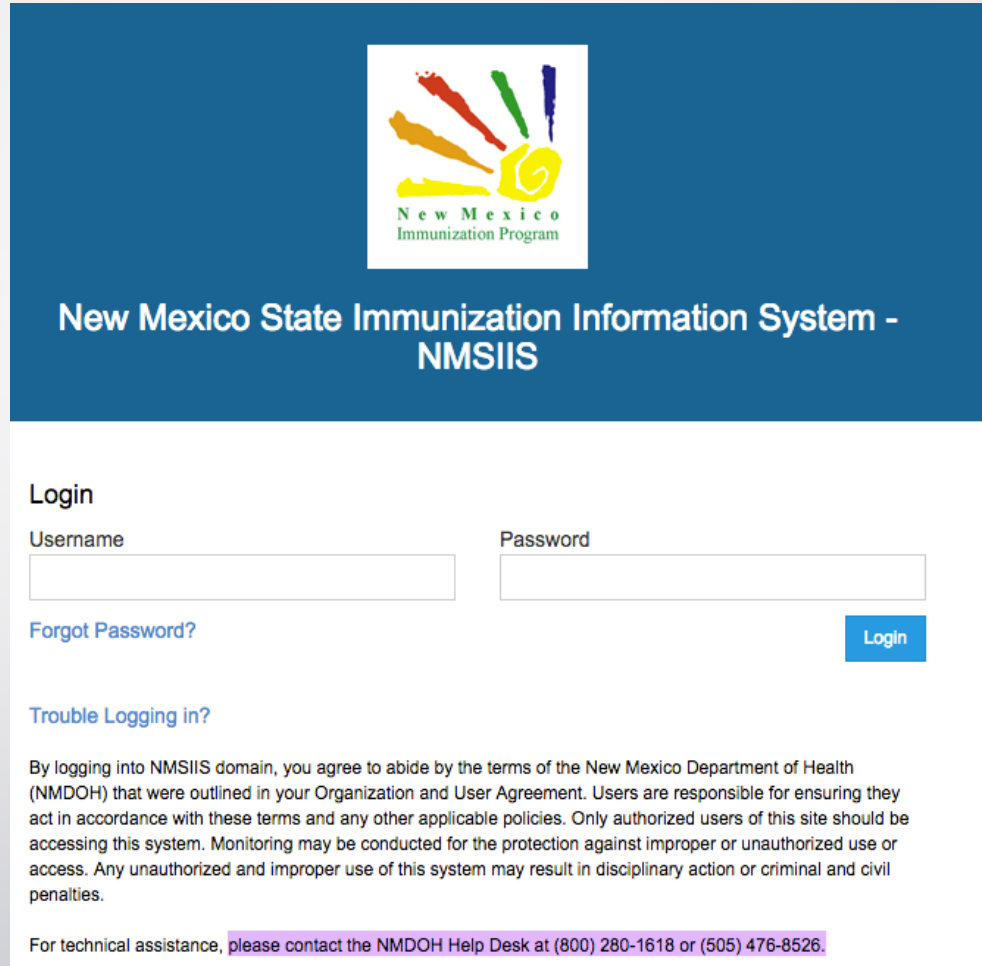
- Enter your Username and Temporary password as supplied by the NMSIIS team.
- Since this is your first time logging into NMSIIS, you will be prompted to change your password and set your security questions.
- If you forget your password you can reset your password after answering your security questions.

• **Please remember your password and security questions**

• **If you cannot log in or have technical issues.**

**There is contact information for:
NMDOH-Help Desk**

800-280-1618 or 505-476-8526



The image shows a screenshot of the NMSIIS login page. At the top, there is a blue header with the New Mexico Immunization Program logo, which features a stylized sun with rays in red, orange, yellow, green, and blue. Below the logo, the text reads "New Mexico State Immunization Information System - NMSIIS". The main content area is white and contains a "Login" section with two input fields for "Username" and "Password". Below these fields are links for "Forgot Password?" and a blue "Login" button. There is also a link for "Trouble Logging in?". At the bottom, there is a disclaimer text and a footer with contact information for technical assistance.

New Mexico State Immunization Information System - NMSIIS

Login

Username

Password

[Forgot Password?](#) [Login](#)

[Trouble Logging in?](#)

By logging into NMSIIS domain, you agree to abide by the terms of the New Mexico Department of Health (NMDOH) that were outlined in your Organization and User Agreement. Users are responsible for ensuring they act in accordance with these terms and any other applicable policies. Only authorized users of this site should be accessing this system. Monitoring may be conducted for the protection against improper or unauthorized use or access. Any unauthorized and improper use of this system may result in disciplinary action or criminal and civil penalties.

For technical assistance, please contact the NMDOH Help Desk at (800) 280-1618 or (505) 476-8526.

Creating Password

1. Please create a new password for your account. It must contain: A minimum of eight (8) characters
 - A combination of upper and lower case letters
 - At least one (1) number. (0-9)
 - At least one special character. (Ex. #, %, *, !, \$, etc.)
 - * Passwords must be changed a minimum of **3** times before re-use.
2. Enter your new password into the “New Password” box and again in the “Confirm New Password” box.

Change Password

Please enter your username and password and a new password (and confirmation) to change your password.
Click the 'Update' button to continue...

New Password

Username	Existing Password
<input type="text" value="THALL2"/>	<input type="text"/>
New Password	Confirm New Password
<input type="text"/>	<input type="text"/>

On your first log in, you will be immediately taken to the following screen.

Please enter the password that is given to you by NMSIIS team member under “Existing Password” box.

Security Questions

This gives you the ability to reset your own password if you forgot it.

You must answer at least 5 questions.

Question	Answer
What is your mother's maiden name?	<input type="text"/>
What was the name of your first pet?	<input type="text"/>
What city or town does your nearest sibling live?	<input type="text"/>
What is your father's middle name?	<input type="text"/>
What was the name of you elementary school?	<input type="text"/>
What was the last name of your 1st grade teacher?	<input type="text"/>
Who was the person you had your first kiss with?	<input type="text"/>
What did you want to be when you grew up?	<input type="text"/>
Who was your childhood hero?	<input type="text"/>

- You will need to answer at least five (5) of the security questions. You may answer more if you prefer, but you must at least answer five (5) of the questions.
- When you have created a new password and answered at least five (5) security questions, you will need to click the “**Update**” button in order to save the changes.

Education Home Screen

1. Select **Provider**
2. Select **Clinic**
3. Currently selected **Provider/Clinic**
4. Current **User**
5. **Log Out** link

The screenshot shows the NMSIIS Education Home Screen. The top navigation bar is dark blue and contains the NMSIIS logo, a location pin icon, the text 'SANTA FE PUBLIC SCHOOLS, SANTA FE PUBLIC SCHOOLS, 642', a magnifying glass icon, 'PATIENT SEARCH', a 'Support' link, and a user profile icon labeled 'CLINIC22'. Below the navigation bar, the main content area is white. On the left, there is a 'Default Provider/Clinic' section with two dropdown menus. The first dropdown is labeled 'Provider *' and has 'SANTA FE PUBLIC SCHOOLS' selected. The second dropdown is labeled 'Clinic *' and also has 'SANTA FE PUBLIC SCHOOLS' selected. Below this is a 'Login History' section with a list of login events: '10/5/2016 8:47:30 AM - SUCCESSFUL LOGIN', '9/6/2016 10:59:10 AM - SUCCESSFUL LOGIN', '3/3/2016 4:29:38 PM - ACCOUNT DISABLED', '3/3/2016 4:29:26 PM - ACCOUNT DISABLED', and '3/2/2016 8:56:10 AM - SUCCESSFUL LOGIN'. At the bottom left, there is a 'News' section. On the right side of the screen, there is a user menu with a blue information icon and the following links: 'Log Out', 'Change Password', 'Password Questions', 'User Defaults', and 'User Vaccine Defaults'. Red callouts with arrows point to various elements: '3' points to the 'Default Provider/Clinic' header, '1' points to the 'Provider *' dropdown, '2' points to the 'Clinic *' dropdown, '4' points to the 'CLINIC22' user profile icon, and '5' points to the 'Log Out' link.

NMSIIS SANTA FE PUBLIC SCHOOLS, SANTA FE PUBLIC SCHOOLS, 642 PATIENT SEARCH Support CLINIC22

Default Provider/Clinic

Provider * SANTA FE PUBLIC SCHOOLS

Clinic * SANTA FE PUBLIC SCHOOLS

Login History

10/5/2016 8:47:30 AM - SUCCESSFUL LOGIN
9/6/2016 10:59:10 AM - SUCCESSFUL LOGIN
3/3/2016 4:29:38 PM - ACCOUNT DISABLED
3/3/2016 4:29:26 PM - ACCOUNT DISABLED
3/2/2016 8:56:10 AM - SUCCESSFUL LOGIN

News

Log Out
Change Password
Password Questions
User Defaults
User Vaccine Defaults

Education Home Screen (cont.)

1. NMSIIS Modules
2. User Login History
 - The last five (most recent) login attempts will be displayed so the user can review it for accuracy. If they are not familiar with the date/time then they may want to reset their password.
3. Notifications
4. News

The screenshot displays the Education Home Screen interface. On the left is a blue sidebar menu with the following items: Home, Patients, Immunizations, Education, Inventory, and Reports. A red circle with the number '1' is placed over the 'Education' menu item. The main content area on the right is white and contains several sections. At the top is the 'Default Provider/Clinic' section with two dropdown menus, both set to 'SANTA FE PUBLIC SCHOOLS'. Below this is the 'Login History' section, which lists five login attempts with dates and times, including successful logins and account disabled events. A red circle with the number '2' is placed over the 'Login History' header, and a red circle with the number '3' is placed over the first entry in the list. Below the login history is the 'Notifications' section, which displays a yellow warning triangle icon and the text 'There are currently no pending notifications.' Below that is the 'News' section, which is currently empty. A red circle with the number '4' is placed over the 'News' header. Pink arrows point from the numbered circles to their respective elements in the interface.

Education Home Screen (cont.)

NMSIIS 📍 SANTA FE PUBLIC SCHOOLS, SANTA FE PUBLIC SCHOOLS, 642 🔍 PATIENT SEARCH 🎧 Support 👤 CLINIC22 ▾

Default Provider/Clinic

Provider/Clinic : SANTA FE PUBLIC SCHOOLS, SANTA FE PUBLIC SCHOOLS

- Log Out
- Change Password
- Password Questions
- User Defaults
- Clinic Vaccine Defaults
- User Vaccine Defaults

- User Defaults
- Change Password
- Password Questions
- User Defaults
- Clinic Vaccine Defaults
- User Vaccine Defaults

Helpful Tips

- Use the Modules menu to navigate between modules/screens.
- Click a Module with a + sign to expand the menu and view the screens within the module.
- Once expanded, click a Module with a – sign to collapse the menu.
- **Avoid** using the browser back and forward buttons.
- Mandatory Items/Required Fields are in **BOLD** and have a **RED ***
Required Field Headers will appear in **BOLD**

For example below "**Street#**" is required but "Prefix" is not:

Mailing Address

Street # *	Prefix	Street Name *	Type	Suffix	Unit #	P.O. Box
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
City *		Out of State City	County *		Out of State County	
<input type="text"/>		<input type="text"/>	<input type="text"/>		<input type="text"/>	
State *		Country		Zip Code *		
<input type="text"/>		<input type="text"/>		<input type="text" value="99999-9999"/>		<input type="text"/>

Patient Search

- On the left side of the page, click on the “+” sign next to the patients module for your search option to appear.
- The Previous Criteria button allows you to pull up the most recent search you performed without re-entering the criteria.
- Enter your search criteria and select the search button to find any matching patients.
 - Note: Unique numbers (e.g., Patient ID) require an exact match

Patient Search ?

Links ▼

Search Criteria

Patient ID	Identifier Type	Identifier Value			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Last Name	First Name	Middle Name	DOB	Gender	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>	<input type="text"/>	<input type="text"/>
Birth Info					
Mother Last Name	Mother First Name	Mother Middle Name	Mother Maiden Name		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
Father Last Name	Father First Name	Father Middle Name			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Previous Criteria		Clear		Search	



Home

Patients +




Search


Patient Search Results

1. You can hover over the **Patient Demographic** Button to see Patient Preview with some information about the patient. You can also Double-click a record to view **Patient Demographics**, or select a record and click a button to navigate to the respective screen.

2. If the record is not found, click to create a **New Patient** in the registry.

Search Results - 13 record(s)

ID	Name	Insurance	VFC	Gender	DOB	Action
8079	SIMPSON, BART 123 SIMPSON LN SANTA FE, NM 87503	CAID: 1234566	1	M	03/29/2007	
8081	SIMPSON, BART 123 SIMPSON LN EDGEWOOD, NM 87015	CAID: 1234789	1	M	03/29/2007	
8086	SIMPSON, BART 124 SIMPSON LN SANTA FE, NM 87501	CAID: 123344	1	M	03/29/2007	

You may add a new patient by clicking the 'New Patient' button. 

1

2

Patient Preview

SIMPSON, BART

ID: 8086 DOB: 03/29/2007 Gender: M
Patient Eligibility: CENTENNIAL CARE (MEDICAID) <19 YRS
Mailing Address: 124 SIMPSON LN SANTA FE, NM 87501
Physical Address: 124 SIMPSON LN SANTA FE, NM 87501
Primary Contact: MARGE SIMPSON
Mother's Name: MARGE
Default Clinic: DR POISON IVY

- Demographics
- Immunizations
- Duplicates
- Education
- Events
- Exemptions
- Local IDs
- Notes
- Precautions / Contraindications
- Programs

Adding New Patient

1. Complete required fields: **Last Name, First Name, Date of Birth (DOB), and Gender.**
2. Click **Create.**

Add

Last Name *	First Name *	Middle Name	Generation
<input type="text" value="SIMPSON"/>	<input type="text" value="BART"/>	<input type="text" value="M"/>	<input type="text" value=""/>
DOB *	Gender *	SSN	
<input type="text" value="03/15/2013"/>	<input type="text" value="MALE"/>	<input type="text" value="999-99-9999"/>	
Mother Maiden	Mother First		
<input type="text" value=""/>	<input type="text" value=""/>		

Add

Last Name *	First Name *	Middle Name	Generation
<input type="text" value="SIMPSON"/>	<input type="text" value="BART"/>	<input type="text" value="M"/>	<input type="text" value=""/>
DOB *	Gender *	SSN	
<input type="text" value="03/15/2013"/>	<input type="text" value="MALE"/>	<input type="text" value="999-99-9999"/>	
Mother Maiden	Mother First		
<input type="text" value=""/>	<input type="text" value=""/>		

Possible Duplicates

The following patients have been found with similar criteria. If any of the following record(s) are the patient you are trying to create, select the patient below.

ID	Name	Insurance	VFC	Gender	DOB	Action
2346235	SIMPSON, BART M			M	03/15/2013	<input type="button" value="Demographics"/>

3. Possible duplicate patients are identified.
4. If the patient is not in the possible duplicates list, click **Proceed with Create.**

Adding New Patient (cont.)

1. Complete required fields on **Demographics** screen.
 - Record up to 3 sources of health insurance
 - **Mailing Address** and **Physical Address** are required
2. Click **Update**.

REMEMBER: The more information you give us the better it is for your client. This ensures they have a complete and accurate Immunization record.

Patient Demographics ? i

Cancel ↑ Links ⚙ Update ▾

Alias

Last Name First Name Middle Name Generation

Sources of Health Insurance

Health Insurance Source (identify up to three) Insurance ID or Number Date Last Verified Primary?

Contact Information

Home Phone Cell Phone Message Phone Work Phone

E-mail

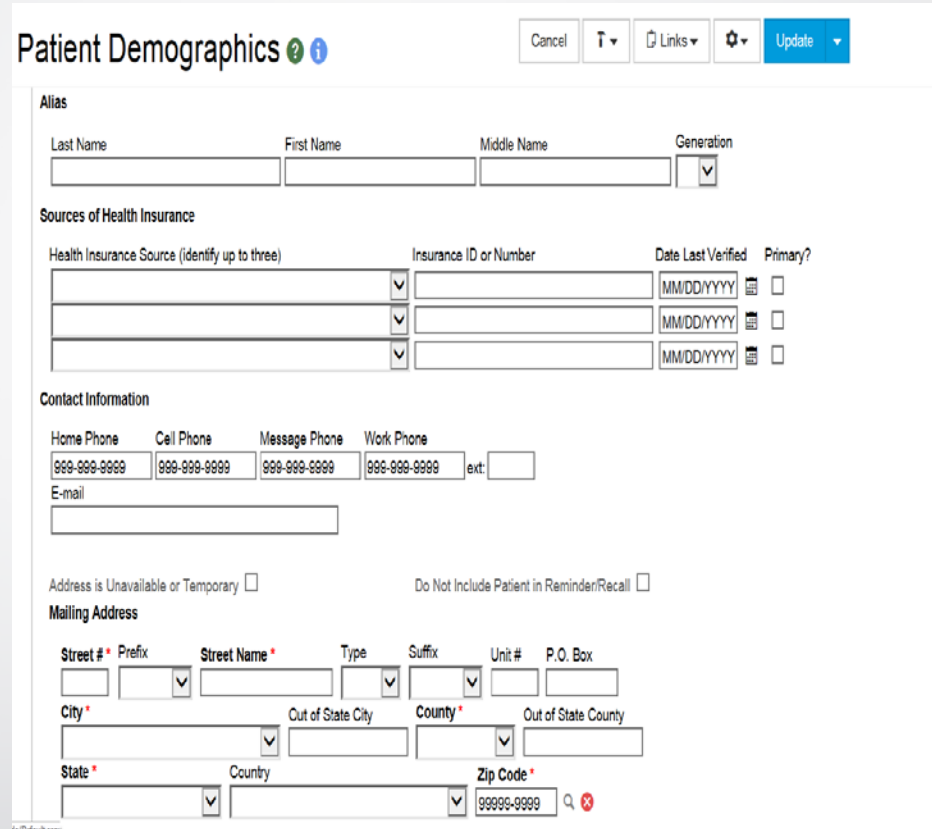
Address is Unavailable or Temporary Do Not Include Patient in Reminder/Recall

Mailing Address

Street # * Prefix Street Name * Type Suffix Unit # P.O. Box

City * Out of State City County * Out of State County

State * Country Zip Code *



Adding New Patient (cont.)

When entering your client's address it will ask you for mailing as well as physical address.

Extra features:

1. Ability to copy address from mailing to physical with a click of a button.
2. Magnifying glass icon. Allows you to search for the client's correct postal location and can auto fill some sections for you. (ie. City, County, State and Zip Code)
3. "Out of City" and "Out of State County" options are used when a client does NOT have NM Immunization documentation.

The screenshot displays a web form for entering patient addresses, divided into two main sections: Mailing Address and Physical Address. Each section contains the same set of input fields: Street #, Prefix, Street Name, Type, Suffix, Unit #, P.O. Box, City, Out of State City, County, Out of State County, State, Country, and Zip Code. The Zip Code field in both sections contains the placeholder '99999-9999' and includes a magnifying glass icon and a red 'X' icon. Below the input fields, there are four buttons: 'Copy Mailing Address To Physical Address', 'Clear Mailing Address', 'Copy Physical Address To Mailing Address', and 'Clear Physical Address'.

Patient Duplicates

If your patient has a duplicate record you will now be able to flag the records in question for a member of NMSIIS to review and then merge.

To flag a record you will need to:

1. Click **Demographics** drop down option
2. Click **Duplicates**

You will then be directed to another screen to complete this process

Search Criteria

Patient ID Identifier Type Identifier Value

Last Name First Name Middle Name DOB Gender

SIMP x BAR MM/DD/YYYY

Birth Info

Mother Last Name Mother First Name Mother Middle Name Mother Maiden Name

Father Last Name Father First Name Father Middle Name

Search Results - 2 record(s)

ID	Name	Insurance	VFC	Gender	DOB	Action
2	SIMPSON, BART			M	03/06/2009	<input type="button" value="Demographics"/> <input button"="" type="button" value="Demographics"/> <input type="button" value="Immunizations"/>

Patient Duplicates (cont.)

1. Search for duplicate patient.
2. Enter **Comments**.
3. Click **Add to Duplicates**.
4. Compare patients.
 - You will be able to view the files that are needing to be merged but you will not be able to merge them yourself.

📁 **SIMPSON, BART M** ID: 2346236 DOB: 03/15/2013 AGE: 3Y 6M 0D GENDER: M

Patient Duplicates ⓘ

View

Duplicates Already Identified

Patient						Identified By	📄	+	?	View
ID	Last	First	Middle	Gender	DOB					
2336081	SIMPSON	BART	M	M	01/01/1999	FELICIA MARTINEZ				

Search for Additional Duplicates

🔍 ✕

Comments *

Add To Duplicates

Immunization Module



- [Print Official Immunization Record](#)

Immunization History

1. Vaccine name.
2. Dose number in series.
3. Date vaccine given.
4. Patient age at vaccination.
5. Clinic administering immunization.
6. Click to recommend immunizations.

1 Vaccine	2 Dose	3 Date	4 Age	5 Clinic				
DTaP / TD / Tdap								
DTaP-HepB-IPV (Pedia	1	11/01/2011	12Y 10M 0D	PR	H	-	?	Update
Polio								
DTaP-HepB-IPV (Pedia	1	11/01/2011	12Y 10M 0D	PR	H	-	?	Update
Hib								
Hib (PRP-OMP; pedvax	0	09/01/2011	12Y 8M 0D	PR	H		?	Update
Pneumococcal								
PCV13	1	06/01/2011	12Y 5M 0D	PR	H		?	Update
Hep A								
Hep A, UF	1	!	01/01/1999 0Y 0M 0D	PR	H		?	Update
Hep B								
DTaP-HepB-IPV (Pedia	1	11/01/2011	12Y 10M 0D	PR	H	-	?	Update
Influenza								
Influenza Nasal UF	1	10/10/2015	16Y 9M 9D	PR	H		?	Update
<input type="button" value="Recommend"/> 6 <input checked="" type="checkbox"/> Auto-Populate Add Vaccines Screen								

Patient Level Reporting



- Patient Reports
- Informational Documents

Reports Overview

- Nearly all reports are rendered as a PDF
 - Most PDF versions provide totals and subtotals
 - You can choose to extract the report using a delimiter such as “,” or “|”
- Reports are grouped into categories
- Most reports appear in a new window
- Make sure your internet browser is **NOT** blocking pop-ups!
- Users are assigned a reporting level security
 - **Unrestricted:** ALL Providers & Clinics in Registry
 - **Provider Level:** Only Providers associated to the user and Clinics within those Providers
 - **Clinic Level:** Only Clinics associated to the user

Common Search Criteria

- Provider/Clinic
 - Defaults to the Provider/Clinic selected on *Home* screen
 - Can be changed depending on user security
- Date Ranges
 - Vaccination Date Range
 - Patient DOB Date Range

Reports Module Overview

Reports Only (School)

Patient

[IZ History/Risk/Recommendations](#)
[Official Immunization Record](#)
[Vaccine Documentation/Consent Form](#)

Forms / Informational Documents

[ACIP Child and Adolescent Immunization Schedule](#)
[ACIP Child and Adolescent Catch-up Immunization Schedule](#)
[ACIP Adult Immunization Schedule](#)
[Provider and Clinic Information](#)
[Clinic Contact Listing](#)
[Product Listing](#)
[Vaccine Information Statements \(VIS\)](#)

New Mexico Forms and Documents

[NMSIIS Program Updates - September 21, 2016](#)
[NMSIIS SYSTEM UPDATES - September](#)
[NMSIIS Organization Agreement](#)
[NMSIIS Training Request](#)
[NMSIIS Certificate of Exemption](#)
[NMSIIS Guide for veiwng Certificates of Exemption](#)
[NMSIIS User Agreement](#)

School Nurse

[Immunization Rates \(School Version\)](#)
[Patient Reminder/Recall \(School Version\)](#)
[Patients with Notes](#)
[Student Grade Advancement](#)
[Student Roster](#)
[Student Unenrollment](#)
[Students with Active Exemptions](#)

Printing Immunization Record

In the **Reports Module**:

1. Use the lookup tool to search for a patient.
2. Clear the currently selected patient.
3. Generate the patient's Immunization Record.
4. Return to the **Reports** home screen.

Official Immunization Record

Enter the selection criteria and click "Run Report" or click "Cancel" to return to the previous page.

Report Selection Criteria

SIMPSON, BART (2336081)

1



2

3

Run Report

4

Cancel

Printing Immunization Record through Patient Demographic Page

- On the left side of the page, click on the “+” sign next to the patients module for your search option to appear.
- The Previous Criteria button allows you to pull up the most recent search you performed without re-entering the criteria.
- Enter your search criteria and select the search button to find any matching patients.
 - Note: Unique numbers (e.g., Patient ID) require an exact match



The screenshot shows the 'Patient Search' interface. On the left is a blue sidebar with a logo for the 'New Mexico Immunization Program' (a hand with colorful fingers) and three menu items: 'Home', 'Patients' (with a plus sign), and 'Search'. The main content area is titled 'Patient Search' and includes a 'Links' dropdown. Below the title is a 'Search Criteria' section with the following fields:

Patient ID	Identifier Type	Identifier Value
<input type="text"/>	<input type="text"/>	<input type="text"/>

Last Name	First Name	Middle Name	DOB	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="MM/DD/YYYY"/>	<input type="text"/>

Birth Info

Mother Last Name	Mother First Name	Mother Middle Name	Mother Maiden Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Father Last Name	Father First Name	Father Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

At the bottom of the search criteria section are two buttons: 'Previous Criteria' and 'Search' (with a blue background). There is also a 'Clear' button next to the 'Search' button.

Printing Immunization Record

through Patient Demographic Page

1. Highlight and double click on your patient record.
2. Click on the Links Drop down Arrow and Click Official Immunization Record.

Search Results - 1 record(s)

ID	Name	Insurance	VFC	Gender	DOB	Action
2409508	SIMPSON, BART M	1			01/01/1999	? Demographics ▾

 **SIMPSON, BART M** ID: 2409508 DOB: 01/01/1999 AGE: 17Y 9M 5D GENDER:

Patient Demographics ? i

Cancel **2** Links ▾ ⚙ ▾ Update

Official Immunization Record

Edit



Immunization Record



Generates an immunization record for a patient

- Output includes:
 - Clinic Name and Address
 - Patient ID, Name, Gender, Date of Birth.
 - List of the patient's vaccinations, including date and vaccine type.
- A new pop up window will display your Official Immunization Record and you can print a copy.

View.aspx
1/1

New Mexico Immunization Record
Official Document

Registro de Inmunización
Documento Oficial

Invalid Dose. Minimum age/interval not met.
Dose determined invalid by provider

Vaccine/Vacuna	Date Given Dada en la Fecha MM/DD/YYYY	Age at Imm. Edad Cuando Imm.	Doctor or Clinic Doctor o Clínica
DTaP / TD / Tdap			
1	DTaP-HepB-IPV (Pedia)	11/01/2011	12Y 10M 0D PR
2			
3			
4			
5			
Polio			
1	DTaP-HepB-IPV (Pedia)	11/01/2011	12Y 10M 0D PR
2			
3			
4			
Hib			
1	Hib (PRP-OMP; pedvax)	09/01/2011	12Y 8M 0D PR
2			
3			
4			
Pneumococcal			
1	PCV13	06/01/2011	12Y 5M 0D PR
2			
3			
4			
Rotavirus			
1			
2			
3			
Hep A			
1	Hep A, UF	01/01/1999	0Y 0M 0D PR
2			
Hep B			
1	DTaP-HepB-IPV (Pedia)	11/01/2011	12Y 10M 0D PR
2			
3			
MMR			
1			
2			
Varicella (CPOX)			
1			
2			
Meningococcal			
1			
2			
HPV			
1			
Other			
1			

Name/Nombre: BART M SIMPSON

Date of Birth/Fecha de Nacimiento: 01/01/1999

Gender/Genero: M

New Mexico WebIZ ID#: 2336081

Date of Next Vaccination/Fecha de Proxima Vacuna: 09/15/2016

Present this record at each medical visit.
Presente este documento durante sus visitas medicas.

Immunization Provider:
POISON IVY CLINIC
123 HARLEY QUINN DR
P.O. BOX 456
DIXON, NM 87527
505-476-3672

Allergies/Precautions/Contraindications
Alergias/Precauciones/Contraindicaciones:
History of Chicken Pox. Severe allergic reaction to gelatin

Vaccine Reactions / Reacciones contra Vacunas:
11/01/2011:DTaP-HepB-IPV (Pedia)

Comments	
Date	Note

Vaccines Refused	
Date	Note
10/10/2009	REFUSED DTaP, UF FOR REASON: 'Parental refusal'. REFUSAL CREATED VIA HL7 INTERFACE.

Vaccine/Vacuna	Date Given Dada en la Fecha MM/DD/YYYY	Age at Imm. Edad Cuando Imm.	Doctor or Clinic Doctor o Clínica
Influenza			
1	Influenza Nasal UF	10/10/2015	16Y 9M 0D PR
2			
3			

Print Date 9/15/2016 2:35:37PM

Page 1 of 1

Informational Documents

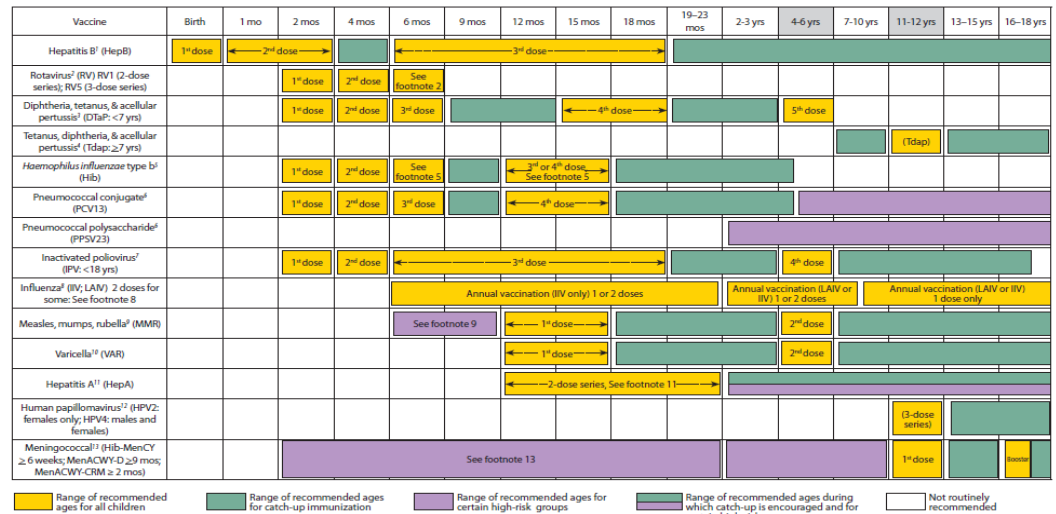
ACIP Immunization Schedules

- ACIP Child and Adolescent Immunization Schedule
- ACIP Child and Adolescent Catch-up Immunization Schedule.
- ACIP Adult Immunization Schedule

Figure 1. Recommended immunization schedule for persons aged 0 through 18 years – United States, 2015.

(FOR THOSE WHO FALL BEHIND OR START LATE, SEE THE CATCH-UP SCHEDULE (FIGURE 2)).

These recommendations must be read with the footnotes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars in Figure 1. To determine minimum intervals between doses, see the catch-up schedule (Figure 2). School entry and adolescent vaccine age groups are shaded.



This schedule includes recommendations in effect as of January 1, 2015. Any dose not administered at the recommended age should be administered at a subsequent visit, when indicated and feasible. The use of a combination vaccine generally is preferred over separate injections of its equivalent component vaccines. Vaccination providers should consult the relevant Advisory Committee on Immunization Practices (ACIP) statement for detailed recommendations, available online at <http://www.cdc.gov/vaccines/hcp/acip-recs/index.html>. Clinically significant adverse events that follow vaccination should be reported to the Vaccine Adverse Event Reporting System (VAERS) online (<http://www.vaers.hhs.gov>) or by telephone (800-822-7967). Suspected cases of vaccine-preventable diseases should be reported to the state or local health department. Additional information, including precautions and contraindications for vaccination, is available from CDC online (<http://www.cdc.gov/vaccines/recs/vac-admin/contraindications.htm>) or by telephone (800-CDC-INFO [800-232-4636]).

This schedule is approved by the Advisory Committee on Immunization Practices (<http://www.cdc.gov/vaccines/acip/>), the American Academy of Pediatrics (<http://www.aap.org>), the American Academy of Family Physicians (<http://www.aafp.org>), and the American College of Obstetricians and Gynecologists (<http://www.acog.org>).


NOTE: The above recommendations must be read along with the footnotes of this schedule.

Informational Documents

Vaccine Information Statements (VIS)

- View (and print) PDF versions of VIS
- Option to display ALL vaccines or CHILD vaccines only







Vaccine Information Statement (VIS)

Click on a vaccine information sheet icon to view the corresponding file or click "Cancel" to return to the previous page. 

View

Cancel

Show: CHILD VACCINES ▾

VIS Name	Effective Date	End Date	Language	
DT, ped				
<i>DTaP,DT</i>	<i>05/17/2007</i>		<i>ENGLISH</i>	
<i>DTaP,DT</i>	<i>05/17/2007</i>		<i>SPANISH</i>	
DTaP				
<i>DTaP,DT</i>	<i>05/17/2007</i>		<i>ENGLISH</i>	
<i>DTaP,DT</i>	<i>05/17/2007</i>		<i>SPANISH</i>	
DTaP (Daptacel)				
<i>DTaP,DT</i>	<i>05/17/2007</i>		<i>ENGLISH</i>	
<i>DTaP,DT</i>	<i>05/17/2007</i>		<i>SPANISH</i>	

Education module



- Education Module Overview
- School Nurse Reports
- Exemptions

Education module

- Click to add a new school enrollment for the patient.
- Click to view and/or update an existing school enrollment.

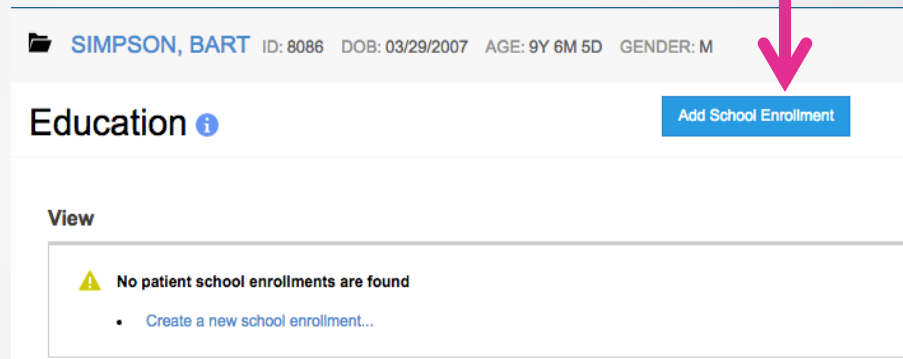
SIMPSON, BART ID: 8086 DOB: 03/29/2007 AGE: 9Y 6M 5D GENDER: M

Education ⓘ [Add School Enrollment](#)

View

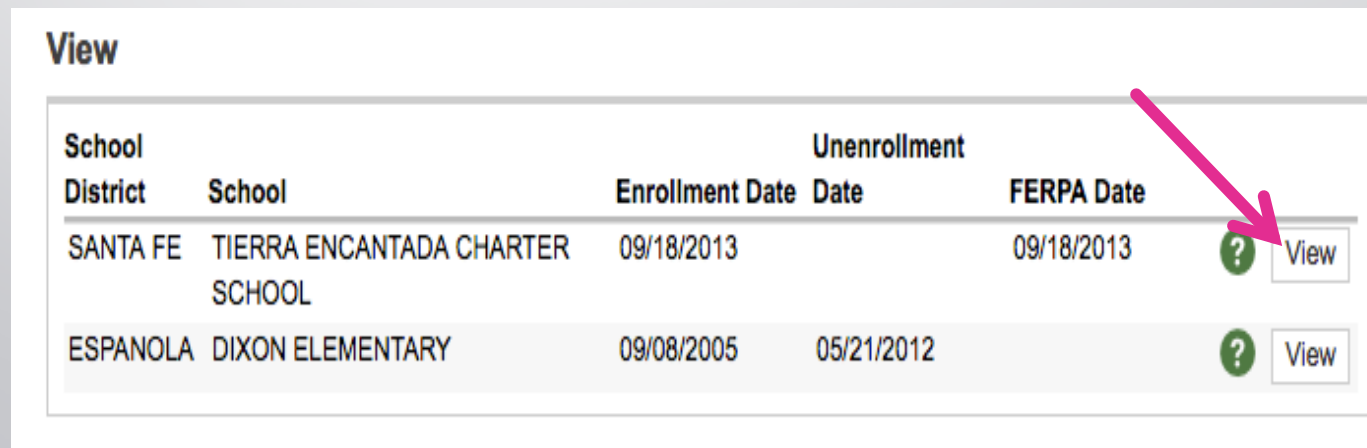
⚠ No patient school enrollments are found

- [Create a new school enrollment...](#)



View


School District	School	Enrollment Date	Unenrollment Date	FERPA Date	
SANTA FE	TIERRA ENCANTADA CHARTER SCHOOL	09/18/2013		09/18/2013	? View
ESPANOLA	DIXON ELEMENTARY	09/08/2005	05/21/2012		? View





Education Screen (cont.)

Add school enrollment

- Select a **School District**.
- Select a **School** within the **School District**.
- Select an **Author** (user).
- Enter the **Enrollment Date**.
- Click the “**Create**” Button and the student’s school information is saved.
- **A user can only edit enrollments at a school to which a user is associated.**

 **SIMPSON, BART** ID: 8086 DOB: 03/29/2007 AGE: 9Y 6M 5D GENDER: M



Education   Cancel Create

Add

School District *


School *

Author *
FELICIA MARTINEZ

Student ID **Enrollment Date ***  **Unenrolled Date**  **Grade Level**

Comments

FERPA Consent

Date  Method Relationship

Education Screen (cont.)

School Nurse Reports

Immunization Rates

Calculates percent of student patients up-to-date on recommended immunizations
View coverage rates by antigen(s) or by vaccine series
Results are based on the Recommender, thus, invalid doses are not counted

- Identify student patients not up-to-date
- Please be sure when generating this report you enter all fields necessary to conduct a proper search.

Report Selection Criteria

School District *

(ALL SCHOOL DISTRICTS) ▼

School *

(ALL SCHOOLS) ▼

Report Type

- Appropriate Statistics Summary
 Patients not Properly Immunized Detail

Doses By Vaccine Series

Vaccine Series Dose Presets

▼

DTaP/Tdap *

0

Hepatitis A *

0

Hepatitis B *

0

HIB *

0

HPV *

0

Influenza *

0

Meningococcal *

0

MMR *

0

Pneumococcal *

0

Polio *

0

Rotavirus *

0

Varicella *

0

Tdap (Or Pertussis Containing) *

0

Age Range

From:

Through:

UOM:

MONTHS ▼

As Of Date Range *

From:

MM/DD/YYYY

Through:

MM/DD/YYYY

Grade Range

From

Through

Compliance By

Age

MONTHS ▼

Or Date

MM/DD/YYYY

Exclude Patients with Less than 2 non- Influenza/H1N1-09 Vaccinations?

Count both valid and invalid doses (i.e., Do not run Recommender to validate immunization history)?

Run Report

Cancel

School Nurse Report (cont.)

Patient Reminder / Recall

Generate a list of student patients due and/or overdue for vaccinations
Choose from a variety of search criteria to target students included in the reminder/recall.

Reminder/recall runs are processed nightly.

Patient Reminder/Recall (School Version)

Choose filters for existing Reminder/Recall Runs. Click "View" to see the details of the Reminder/Recall run or select a specific Reminder/Recall Run and click the applicable button to view extracts, reports, etc.

Add Reminder/Recall Run



View

School District

(ALL SCHOOL DISTRICTS)



School

(ALL SCHOOLS)





Cancel



No records found

Exemptions

ID	Name	Insurance	VFC	Gender	DOB	Action
8086	SIMPSON, BART 124 SIMPSON LN SANTA FE, NM 87501	CAID: 123344	1	M	03/29/2007	  Demographics

You may add a new patient by clicking the 'New Patient' button.

New Patient

- Demographics
- Immunizations
- Duplicates
- Education
- Events
- Exemptions
- Local IDs
- Notes
- Precautions / Contraindications
- Programs

Patients that have an exemption will have a gray flag icon next to their NMSIIS file information.

- Click the demographic drop down tab
- Click Exemptions

It will take you to your patient's exemption information.

Exemptions (cont.)

View

Vaccine Group	Exemption Reason	Precautions / Contraindications	Begin Date	End Date	Status	
Hep B	Religious Exemption with Affidavit		10/04/2016	05/04/2017	ACTIVE	? View

You will be able to review your patient's:

- Vaccine Group
- Exemption Reason
- Precautions/contraindications
 - If the exemption is for medical reasons, the associated precaution and/or contraindication is automatically added to the patient record.
- Begin Date
- End Date
- Status

Exemptions do not affect recommended vaccines and are only used for reporting purposes.

Exemptions (cont.)

Who is responsible for Providing School with Approved Exemption Form?

- It is the parents responsibility is to submit a copy of the Approved Exemption Form to the school for their child's file.
- As a School Nurse you may also do a Print Screen if this is acceptable.

Please reference your schools Policies and Procedures and what is acceptable documentation for Student Exemptions.

Exemption Report

Reports Module:

- Section: School Nurse
- Report: Students with Active exemptions.

Be sure to enter your search criteria before clicking **“Run Report”**.

A pop up window will appear with your results.

Students with Active Exemptions

Enter the selection criteria and click the 'Run Report' button. i

Report Selection Criteria

School District *
(ALL SCHOOL DISTRICTS) ↓

School *
(ALL SCHOOLS) ↓

Exemption Reason
(ALL) ↓

Report Type
 Statistical Summary
 Student View

Grade Range
From ↓ Through ↓

*Students without a grade level assigned are not included in the report.

Vaccine Groups

Available		Selected (If none are selected default is ALL)
DTAP / TD / TDAP	>>	
H1N1-09	>	
HEP A	>	
HEP B	>	
HIB	<	
HPV	<	
INFLUENZA	<	
MENINGOCOCCAL	<	
MMR	<	
OTHER	<	
PNEUMOCOCCAL	<	

Begin Date Range
From Date To Date

Include Inactive?

Output Type PDF EXTRACT - Delimiter: |

Run Report **Cancel**

Thank You for attending the training

We are here to help

Please call us at **Phone #: 505-476-8526** or **1-800-280-1618**

(Please press option 1 during regular business hours and option 4 for after hours and weekends.)

- Above is the phone number for the Help Desk system. Any problems you may encounter on NMSIIS and/or any questions that may pop up can be addressed by submitting a ticket.
- Make sure you give a detailed description of the issue so that we can resolve the problem promptly.
- Please remember to associate a valid email account and phone number to your ticket