### New Mexico Immunization Information System (NMSIIS)

**NMHealth** 

Monthly Inventory Management Guide

### Learning Objectives

MHealth

By the end of this course, you should be able to:

- Know how to use the Inventory module.
- Understand On-Hand Inventory.
- Define what Reconciliations are.
- Know how to add inventory.
- Know how to make an inventory adjustment
- Know how to transfer inventory
- Know how to place an order.
- Receive a vaccine order.
- Process for returning vaccines

### **Inventory Module**







By expanding "Vaccines" you will be able to access different functions of the Inventory Module.

Third Party Notices





### **On-Hand Inventory**

The Inventory On-Hand Screen is a quick way to view all the inventory items On-hand at every Inventory Location within your organization.



Next click on "Filter" on the right-hand side of the screen. Now the

screen will display your organizations Inventory On-Hand screen. On-Hand screen will show every current vaccine listed on the Locate your Inventory Location on the Inventory Location drop-down screen. providers inventory location. Vaccine Inventory On-Hand dd New Invento Vaccine Inventory On-Hand G Learn More Filter Options Filter Options Inventory Location Status Inventory Location ON-HAND INV: COWBOYS PEDIATRICS (552 ON-HAND Funding Source INV: BEHR: ALAMOSA PUBLIC HEALTH OFFICE INV: BEHR: ANTHOUNY PUBLIC HEALTH OFFICE Filter INV: BEHR: ARTESIA PUBLIC HEALTH OFFICE INV: BEHR: BELEN PUBLIC HEALTH OFFICE INV: BEHR: BLOOMFIELD PUBLE HEALTH OFFICE INV: BEHR: CARLSBAD PUBLIC HEALTH OFFICE INV: BEHR: CHAPARRAL PUBLIC HEALTH OFFICE Doses On Expiring Vaccine (Brand) Location Mfo NDC Lot No Funding Source Hand Soon Audit Action INV: BEHR: CIBOLA PUBLIC HEALTH OFFICE INV: BEHR: CLOVIS PUBLIC HEALTH OFFICE Clear INV: BEHR: COLFAX PUBLIC HEALTH OFFICE INV: BEHR: COMMUNITY WELLNESS PROGRAM INV: BEHR: CUBA PUBLIC HEALTH OFFICE INV: COWBOYS PEDIATRICS (552 DTAP-HEPB-IPV (PEDIA (PEDIARIX (0.5 ML X 10 SV) SKE 58160-0811-52 08/30/2026 **BIENDED** 2 Action -INV: BEHR: DEXTER PUBLIC HEALTH OFFICE INV: BEHR: DONA ANA HATCH PUBLIC HEALTH OFFICE INV: COWBOYS PEDIATRICS (552 MMRV (PROQUAL RI ENDER 2 Action + INV: BEHR: EAST MESA PUBLIC HEALTH OFFICE INV: BEHR: ESTANCIA PUBLIC HEALTH OFFICE INV: BEHR: FORT SUMNER PUBLIC HEALTH OFFICE INV: BEHR: GRANTS PUBLIC HEALTH OFFICE howing 1 to 2 of 2 entries INV: BEHR: HEP A OUTBREAK REGION 1 + Previous 1 Next -

### **On-Hand Inventory**

By clicking on the Status dropdown, providers can click onto the depleted/Expired or Expiring Soon. Once changing the "Status", providers must click on "Filter" to officially change into the screen specified.

- Depleted/Expired screen will have all vaccines that have expired or have been depleted within the providers inventory location.
- As soon as a vaccine expires it automatically moves from the providers On-hand inventory onto the Depleted/Expired inventory.

- Expiring soon screen will show any vaccines that will be expiring 3 months or less.
- All, Expiring soon vaccines will show up on the providers On-hand with a clock symbol () next to the vaccine until the vaccine expires.

Vaccine Inventory On-Hand 🚯 Learn More	Add New Inventory	Vaccine Inventory On-Hand 1 Learn More	Add New Inventory
		Eitter Ontions	_
Vaccine     Funding Source	▼ Filter -	Inventory Location INV: COWBOYS PEDIATRICS ({ \rightarrow Vaccine Vacc	Ţ Filter ▼
↓       Vaccine       ↓       ↓       Lot       ↓       Exp       ↓       Funding       ↓       Doses       On-       ↓       Expiring       ↓         Location       (Brand)       Mfg       NDC       No       Date       Source       Hand       Soon	Audit Action	▲       Vaccine       ↓       ↓       Lot       ↓       Exp       ↓       Funding       ↓       On-         Location       (Brand)       Mfg       NDC       No       Date       Source       Hand	Expiring Soon Audit Action
	Clear		Clear
INV: MMRV MSD 00006- 123456 11/25/2024 BLENDED 15 COWBOYS ( <i>PROQUAD</i> ) 4171- PEDIATRICS 00	Action -	INV:         HEP B,         SKB         58160-         0123ABC         01/02/2025         BLENDED         8           COWBOYS         PED/ADOL         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-         0820-	Action      ✓
Showing 1 to 1 of 1 entries ← F	Previous 1 Next→	Showing 1 to 1 of 1 entries	← Previous 1 Next →



### **On-Hand Inventory**

To view specific options, providers must click on "Filter" to officially change onto the screen needed.



- Vaccines option will allow providers to specify which vaccine a provider may be looking for.
- If a provider is not looking for a specific vaccine, the vaccine option can be left blank, and all vaccines will be listed.

Vaccine Inve	entory On-H	and	i La	earn More	•				Add Ne	w Inventory
Filter Optic is										
Inventory Location		Statu	s							
INV: COV BOYS	PEDIATRICS (: V	0	I-HAN	ID			~			
	-	Eurod								
Vaccine	~	- Tunu	ng Sou	ice			~			
	-						-			
ADENOVIBUS T	YPF 4								7	Filter 👻
ADENOVIRUS, T	YPE 7									
ANTHRAX IG										
ANTHRAX PEP										
ANTHRAX PREP	AND PEP	Lot	÷	Exp	4	Funding 🚖	Doses On-	Expiring 💧		
L BCG		No		Date		Source	Hand	Soon	Audit	Action
CHIKUNGUNYA	LIVE									
COVID BIV (MOD	0 6M<6Y)									Clear
COVID BIV (PFR	6M<5Y)									
IN COVID BIVALEN	T (PFR 12+)	XP	125	08/30/2	2026	BLENDED	4		2	Action -
P COVID BIVALEN	T (PFR 5-11)								•	
( <sup>5</sup> COVID MRNA BI	VALENT(MOD)									
COVID TRIS-SU	C (PFR 12+)									
IN COVID TRIS-SUC	C (PFR 5-12)	012	завс	01/02/2	2025	BLENDED	8	0	0	Action
COVID-19 (MOD	) 12+YRS							-		/ caon -
(5 COVID-19 (MOD)	) 6M-11Y									
COVID-19 (MOD	) 6MO - <6YR									
COVID-19 (NVX)	12+YRS									
COVID-19 (PFR)	12+YRS	-								
Showing 1 to 2 of 2 entrie	es	_								

Funding Source option, allows providers to toggle between different Funded inventory locations. This drop-down may look different for certain providers as not every provider has all Funding sources listed below.

Filter Options			
Inventory Location	Status		
Vaccine	ON-HAND	*	
×		~	
	317 ADULT		▼ Filter ▼
	BLENDED		

### Adding New Inventory

- The vaccine Inventory On-Hand also has the option for providers to manually Add New Inventory into their Inventory location.
- Click on Add New Inventory on the top right-hand side of the screen.

	Invento	ry On	-Hand	d 🔒 Lear	rn More			<b></b>	Add Nev	w Inventory
Filter Option:	S									-
Inventory Locati	on		s	Status			_			
INV: COWE	BOYS PEDIA	TRICS (	~	ON-HAND		~				
Vaccine			F	unding Source	e		7			
			~			~				
									₹	Filter 👻
Location	Vaccine 🝦 (Brand)	Mfg	NDC ×	Lot 🝦 No	Exp 🝦 Date	Funding Source	Doses On- Hand	Expiring Soon	Audit	Action
Location	Vaccine (Brand)	Mfg	NDC	Lot $\stackrel{\mathbb{A}}{\forall}$	Exp Date	Funding ÷ Source	Doses On- Hand	Expiring 🛓 Soon	Audit	Action
Location Location	Vaccine (Brand) DTAP- HEPB-IPV (PEDIARIX (0.5 MLX 10 SYR)	Mfg	NDC +	Lot No	Exp Date 08/30/2026	Funding Source	Doses On- Hand 4	Expiring 🗍	Audit ?	Action Clear Action

 On this screen complete all the required fields with a red astrix.

1/26/2024 HH:MM AM/PM (HH:MM A/P)	
~	
✓	
	1/26/2024 HH:MM AM/PM (HH:MM A/P)



### Adding Vaccine Inventory

- Enter the effective date for the inventory adjustment. By default, the system will populate the date field.
  - From the list of values provided, select the Inventory Location for which an adjustment is to be made.
  - Choose the vaccine, manufacturer, NDC, and brand needing to be added from the list of values.
  - Input the lot number and Expiration Date shown on the vial. If NMSIIS sends a flag about a matching lot number, make sure it is the correct lot number before allowing it to combine. If the lot number doesn't match continue with entering the new lot number.
  - Funding Source will depend on what program provided the vaccines. Ex. Pediatric will be "Blended".
  - Doses Adjusted; is the amount of vaccine the provider has on-hand for the specific inventory being added.
- Once all the information has been entered, click on Create at the top right-hand side of the screen.

Va	accine Inventory	Dearn More	Cancel	Create	•
	/iew				
	Date/Time * Inventory Location *	11/26/2024 04:13 PM (HH:MM A/P) SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552 V			
	Vaccine   Mfg   NDC   Brand *	DTAP (DAPTACEL)   PMC   49281-0286-10   DAPTACEL (0.5 ML X 10 VIALS)			~
	Lot Number *	123ABC			
	Expiration Date *	05/25/2026			
	Funding Source *	BLENDED V			
	Doses Adjusted *	20			
	Container Id				
	Comments			/i	

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### Vaccine Inventory On-Hand

### Action Drop-down

NMHealth

- The action drop-down can be located on the right side of the screen next to each individual vaccine.
- This option is used for specifics for each individual vaccine listed.

Vaccine Inve	entory On-Ha	and 🔒	Learn More						A	dd New Inven	itory
Filter Options											-
Inventory Location	s	itatus									
INV: COWBOYS	PEDIATRIC V	ON-HAND		~							
Vaccine	F	unding Source									
	~			~							
										▼ Filter	-
Location V	/accine (Brand)	Mfg	NDC \$	Lot No	Exp 🔶 Date	Funding Source	Doses On- Hand	Expiring Soon	Audit	Action	
										Clear	
INV: COWBOYS D PEDIATRICS (552 (// (AGGREGATE S	DTAP-HEPB-IPV (PEDIA PEDIARIX (0.5 ML X 10 SYR)	SKB	58160- 0811-52	XP125	08/30/2026	BLENDED	4			Action -	]
REPORTER)								-	EDIT	STMENT	
INV: COWBOYS F PEDIATRICS (552 (1 (AGGREGATE 1 REPORTER)	HEP B, PED/ADOL 'ENGERIX B (0.5 ML X 10 SYR))	SKB	58160- 0820-52	0123ABC	01/02/2025	BLENDED	8	0	TRAN	ISFER	
									TRAN	ISACTIONS	
Showing 1 to 2 of 2 optri	ioc										
Showing 1 to 2 of 2 entit	16.0								← Previo	us 1 N	lext →

### Vaccine Inventory On-Hand Edit Option



- The "Edit" option on the "Action" dropdown allows providers to correct or edit a lot number, expiration date or funding source. As soon as everything has been corrected click on the Update button.
- This option is used for specifics for each individual vaccine.





### Vaccine Inventory On-Hand Adjustment Option

All adjustments must be made prior to physical count; this will cause the adjustment to fall within the current reconciliation timeframe.

Action -

EDIT

ADJUSTMENT

TRANSFER

TRANSACTIONS

INQUIRY

- Enter the "Date/Time" for the adjustment.
- For VFC providers the drop-down "Reason" to be used for wasted vaccines are, Vaccine wastage-Broken vial/Syringe, Vaccine wastage-Drawn into Syringe not administered. No other option should be chosen for VFC.

**Note:** The options with "Private" adjustments are only for those providers still reconciling their privately purchased inventory.

- Click on the drop-down for "Modification" and select subtract.
- Click on "Doses Adjusted" and type in the number of doses wasted.
- Container ID field can be left blank.
- Type in the reason for waste on the "Comments" section.
- Last click on the "Create" button on the top right side of the screen to complete the adjustment.

Note: The comments field will accommodate up to 250 characters

Not all providers will have the option to complete adjustments, if you don't have this option to adjust, contact your regional coordinator.

accine Invento	Cancel	Creat
Add		
Date/Time *	12/03/2024 🔄 08:00 AM (HH:MM A/P)	
Inventory Location *	INV: COWBOYS PEDIATRICS (552	
Vaccine   Mfg   NDC *	DTAP-HEPB-IPV (PEDIA   SKB   58160-0811-52	
Lot Number *	XP125	
Expiration Date *	08/30/2026	
Funding Source *	BLENDED	
Doses On-Hand *	4	
Reason *	VTRCKS - BROKEN VIAL/SYRINGE	
Modification *	SUBTRACT V	
Doses Adjusted *	1	
Container Id		
Comments *	SYRINGE FELL ON THE FLOOR AND BROKE.	
Clear		



### Vaccine Inventory On-Hand Transfer Option



In certain circumstances you may need to transfer inventory.

Transferring inventory entails moving vaccine doses from one inventory location to another. Transfers must be initiated in the system by the provider who is sending their vaccines to the other location. VFC providers are required to notify Regional Coordinators of all transfers of publicly funded vaccines.

Complete all information. The image to the right, is just a sample to show the fields needing to be filled out.

- Date/Time- Double click and the current date/time will populate.
- Inventory Location- Provider receiving transfer
- Doses Transferred- Number of doses being transferred
- Authorized By- Person transferring
- Inventory Picked By- Person transferring
- Inventory Picked Date- Transfer Date
- QA Approved Date- Person approving transfer
- Shipped Date- Date of transfer
- Comments- (If needed)
- Last click on **"Create"** on the top right corner to complete transfer.

? Action -
EDIT
ADJUSTMENT
TRANSFER
INQUIRY
TRANSACTIONS

dd	
Date/Time *	12/05/2024 🔄 🛛 🛛 (HH:MM A/P)
Source Inventory Location	ON You must enter time in the format: HH:MM AM/PM.
nventory Location	INV: NEW RECON TEST LOCATION
Vaccine   Mfg   NDC	DTAP-IPV (KINRIX)   SKB   58160-0812-52
Lot Number	H5648
Expiration Date	10/25/2025
Funding Source	BLENDED
	20
Joses On-Hand	20
Container Id REMINDER: You must	notify the VFC Program of all transfers of publicly-funded vaccine <i>before</i> the transfer occurs.
Doses On-Hand Container Id REMINDER: You must Destination Inventory Lo Inventory Location *	notify the VFC Program of all transfers of publicly-funded vaccine <i>before</i> the transfer occurs. cation SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552
Doses On-Hand Container Id REMINDER: You must Destination Inventory Lo Inventory Location *	notify the VFC Program of all transfers of publicly-funded vaccine before the transfer occurs. cation SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552
Doses On-Hand Container Id REMINDER: You must Destination Inventory Lo Inventory Location * Doses Transferred *	Image: control of all transfers of publicly-funded vaccine before the transfer occurs.         Image: control of all transfers of publicly-funded vaccine before the transfer occurs.         Image: SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552         Image: Ima
Container Id REMINDER: You must Destination Inventory Lo Inventory Location * Doses Transferred * Equivalent Cases	Image: state of the state
Doses On-Hand Container Id Destination Inventory Lo Inventory Location * Doses Transferred * Equivalent Cases Authorized By	Interpretation         Interp
Container Id REMINDER: You must Destination Inventory Lo Inventory Location * Doses Transferred * Equivalent Cases Authorized By Inventory Picked By	Enotify the VFC Program of all transfers of publicly-funded vaccine before the transfer occurs. cation   SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552     10   (The quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as 'Received'.)   MOUSE, MICKEY ()
Container Id REMINDER: You must Destination Inventory Lo Inventory Location * Doses Transferred * Equivalent Cases Authorized By Inventory Picked By Inventory Picked Date	Enotify the VFC Program of all transfers of publicly-funded vaccine before the transfer occurs. cation   SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552     10   (The quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as Received.)   MOUSE, MICKEY ()   12/05/2024
Container Id REMINDER: You must Destination Inventory Lo Inventory Location * Doses Transferred * Equivalent Cases Authorized By Inventory Picked By Inventory Picked Date QA Approved By	Image: Structure of the VFC Program of all transfers of publicly-funded vaccine before the transfer occurs. Image: SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552         Image: SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552         Image: Image
Container Id REMINDER: You must Destination Inventory Lo Inventory Location * Doses Transferred * Equivalent Cases Authorized By Inventory Picked By Inventory Picked Date QA Approved By QA Approved Date	Enotify the VFC Program of all transfers of publicly-funded vaccine before the transfer occurs. cation   SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552     10   (The quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as Received.)   MOUSE, MICKEY ()   MOUSE, MICKEY ()   12/05/2024   TEST, LYNNE (DOCTOR OF MEDICINE)
Container Id REMINDER: You must Destination Inventory Lo Inventory Location * Doses Transferred * Equivalent Cases Authorized By Inventory Picked By Inventory Picked Date QA Approved By QA Approved Date Shipped Date	Image: construction       Image: construction         SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552         Image: comparison of all transfers of publicly-funded vaccine before the transfer occurs.         Image: comparison of all transfers of publicly-funded vaccine before the transfer occurs.         SJHP: COWBOYS PEDIATRICS - INV: COWBOYS PEDIATRICS (552         Image: comparison of the quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as Received'.)         Image: comparison of the quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as Received'.)         Image: comparison of the quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as Received'.)         Image: comparison of the quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as Received'.)         Image: comparison of the quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as Received'.)         Image: comparison of the quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as Received'.)         Image: comparison of the quantity will be immediately decremented from the Source Inventory Location and added to the Destination Inventory Location when marked as Received'.)         Image: comparison of the qua

**Note:** Prior to transferring vaccines providers must ensure lot numbers/Expiration dates and all information for the vaccine is correct prior to transferring.

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### Vaccine Inventory On-Hand Receiving Transfer



The location receiving a transfer will need to accept the vaccine into a specified inventory location.

- Provider receiving an inventory transfer will need to go into their On-Hand Inventory location.
- A blue hyperlink will appear, indicating "There is a Pending Inventory Transfer."

**Note:** All inventory transfers must be accepted as soon as possible, as this will hold both providers from reconciling inventory.

Filter Options										
A There is 1 Pe	ending Inventory Transf	er.								
Inventory Location		Status								
	~	ON-HAND	)	~						
Vaccine		Funding Sourc	e							
	~			~						
										<b>Filter</b>
							Doses			
Location	Vaccine (Brand)	≜ ₩fg	NDC	Lot ≜ No	Exp ∲ Date	Funding Source	Doses On- Hand	Expiring $\frac{4}{7}$ Soon	Audit	Action
Location *	Vaccine (Brand)	Åy Mfg Åy	NDC +	Lot No	Exp Arrow Date	Funding Source	Doses On- Hand	Expiring Arrows	Audit	Action
Location	Vaccine (Brand) DTAP-HEPB-IPV (PED (PEDIARIX (0.5 ML X 1 SYR)	Mfg Mfg	NDC	Lot No XP125	Exp Date 08/30/2026	Funding Source	Doses On- Hand 4	Expiring Soon	Audit	Action Clear Action -

### Vaccine Inventory On-Hand Receiving Transfer

- Once the provider receiving the inventory clicks on the Blue Hyperlink the page below will pop-up with all vaccines being transferred to their inventory location.
- The receiving provider will need to click on "Received" for each vaccine in order for the vaccine to transfer into their inventory location.

**Note-** Provider receiving vaccines must match lot numbers/expiration dates etc. to ensure that all information for the vaccine being transferred to them is correct, prior to receiving transfer.

									Cano
ending Inc Vaccine	oming Doses	Inventory	Transfers Transfer Date	S Lot	Funding Source	Mfg	Source Location		
Receiving Loc	ation: I	NV: COWBOY	S PEDIATRIC	S (552					
DTaP-IPV (Kinrix) (Kinrix (0.5 mL x 10 syr))	10	58160-0812-5	2 12/05/2024	H5648	BLENDED	SKB	INV: NEW RECON TEST LOCATION	?	Receive
anding Out	tgoing	lnventory	Transfers	\$					

- NMHealth
- The pop-up below will populate after clicking on "Received" for each vaccine.
- By double clicking in the Date/Time fields, the current date and time will populate into the field.
- Next click on "OK" for vaccines to update and reflect the transfer.

		Cancel
Pending Incoming	Receive Transfer	×
VaccineDosesReceiving Location:1DTaP-IPV10(Kinrix) (Kinrix(0.5 mL x 10syr))	Pending Inventory         Enter the actual date/time the inventory was received.         Received Date *       Time *         12/05/2024       Image: Open constraints         OK       Cancel	Received
Pending Outgoing		Cancel
		15



### Vaccine Inventory On-Hand Receiving Transfer

 Provider receiving vaccines can now go back into their On-Hand inventory and locate the newly transferred vaccines.

Vaccine Inventory On-Hand 🚯 Learn More									F	Add New Inventory
Filter Options										-
		Status								
Vaccine		Funding Source		~						
	~	_		~						
										▼ Filter ▼
Location	Vaccine (Brand)	Mfg	NDC \$	Lot ≑ No	Exp Date	Funding Source	Doses On- Hand	Expiring 🝦 Soon	Audit	Action
										Clear
INV: COWBOYS PEDIATRICS (552 (AGGREGATE REPORTER)	DTAP-HEPB-IPV (PEDIA (PEDIARIX (0.5 ML X 10 SYR)	SKB	58160- 0811-52	XP125	08/30/2026	BLENDED	4		?	Action -
INV: COWBOYS PEDIATRICS (552 (AGGREGATE REPORTER)	DTAP-IPV (KINRIX) (KINRIX (0.5 ML X 10 SYR)	SKB	58160- 0812-52	H5648	10/25/2025	BLENDED	10		3	Action -
INV: COWBOYS PEDIATRICS (552 (AGGREGATE REPORTER)	HEP B, PED/ADOL (ENGERIX B (0.5 ML X 10 SYR))	SKB	58160- 0820-52	0123ABC	01/02/2025	BLENDED	8	0	8	Action -

### Vaccine Inventory On-Hand Inquiry



• Click on **"Run Report"** on the top right-hand side of the screen.

The Inventory Transaction Inquiry will allow providers to Run a Report specifically to individual vaccines and, will show all adjustments made from when the provider received the vaccine to when the last dose is administered or returned.



ventory Transaction Inquiry	Learn More		Can	Icel Run Repo
Report Selection Criteria				
Provider : SIHP: COWBOYS PEDIATRICS				
TO SELECT A PROVIDER, BEGIN TYPING THE	PROVIDER NAME			×
Inventory Location				
INV: COWBOYS PEDIATRICS (552)	~			
Vaccine	Funding Source			
DTAP-IPV (KINRIX)	BLENDED	~		
Manufacturer				
GLAXOSMITHKLINE (FORMERLY SMITHKLINE BEE	CHAM)	~		
Lot Number Batch Name				
H5648 🗸				
Expiration Date Range	Transaction D	ate Range		
From: 10/25/2025 🖪 Through: 10/25/2025	From: MM/D	D/YYYY	Through: N	IM/DD/YYYY
Output Type   PDF  HTML  EXCEL  EXTR	ACT - Delimiter:	,		

### Vaccine Inventory On-Hand Inquiry

- Inventory transactions Inquiry for vaccines will timestamp with the persons name who created the transaction.
- The first transaction will always be on the top of the 1<sup>st</sup> page then as other transactions are made; they will follow down the page until the last transaction is completed.
- The number of doses will show on the right side of each transaction.
   Doses Net is the doses being added or subtracted. If the number in doses net is in parenthesis that means it is being subtracted, but if the number is not in parenthesis the number is being added.

ا <b>NM</b>	IHealth	New Mexico Statewide Immunization Information System (NMSIIS) Inventory Transaction Inquiry							Dec	ember 10, 20	24	
l	لــــر											
Provider = 3 SmithKline	SJHP: COWBOYS PEDIATRICS, Inv Beecham), Lot = 0123ABC, From Ex	entory Location = INV: COWBOYS PEI p Date = 01/02/2025, Through Exp Dat	DIATRICS (552), e = 01/02/2025	Vaccine = Hep B, ped/a	dol, Fundin	g Source = BLENDE	D, Manufactu	ırer = GlaxoSmit	hKline (former	y		
Trans ID	Src Inventory Location	Dest Inventory Location	Trans Date	Vaccine	Mfg	NDC	Lot No	Fund Src	Exp Date	Туре	Doses Net C	Change
16989	INV: COWBOYS		08/29/2024	Hep B, ped/adol	SKB	58160-0820-52	0123ABC	BLENDED	01/02/202	5 ADJ	8	8
Deverage	PEDIATRICS (552)		0.28.00 AM					Adjustment	Desser	Add In	itial Inventory	
Created	By: SAMANTHA SANCHEZ	on 08/29/2024 09:30:21	Comme	ents:				Adjustment	Reason:	Auum	uai inventory	
Updated	By: SAMANTHA SANCHEZ	on 11/26/2024 10:44:50										
17001	INV: COWBOYS		11/01/2024	Hep B, ped/adol	SKB	58160-0820-52	0123ABC	BLENDED	01/02/202	5 ADJ	8	16
Bauaraal	PEDIATRICS (552)		12:00:00 48	,				Adjustment	Descent	Patura	Evoired Vaca	ine
Reversal	IU: Bui CAMANTHA CANCHEZ :	- 44/04/0004 42:26:54	12:00:00 AN		CALLY G			Adjustment	Reason:	Return	Expired vacc	ane
Updated	By: SAMANTHA SANCHEZ	on 11/26/2024 10:44:50	Comme	Ints. AUTOMATIN	UALLI G	ENERATED BI	THE VAC	JINE KETOK	N SCREEN			
17000	INV: COWBOYS		11/01/2024	Hep B, ped/adol	SKB	58160-0820-52	0123ABC	BLENDED	01/02/202	5 ADJ	<mark>(8)</mark>	8
	PEDIATRICS (552)											
Reversal	ID:		1:36:00 PM					Adjustment	Reason:	Return	Expired Vaco	ine
Created Updated	By: SAMANTHA SANCHEZ of By: SAMANTHA SANCHEZ	on 11/01/2024 13:36:00 on 11/26/2024 10:44:50	Commo	ents: AUTOMATIO	CALLY G	ENERATED BY	THE VACO	CINE RETUR	N SCREEN	FOR V	ACCINE	
opullou	<b></b>			RETORNE		74.5						
								Transaction	Type Total:	5		
								INV ADJ				
								Add In	itial Invento	ry		8
								Return	Expired Va	accine		0
												0
								Total	Net Chan	ige		8

NMHP

### Vaccine Inventory On-Hand Transactions



- Transactions will show quantity of vaccines that are being added or subtracted.
- The Action section will often allow you to reverse a transaction if it is placed as a wastage.
- By reversing a Transaction, the quantity being reversed will automatically fall back into the providers on-hand inventory.

Item Inventory Informat	tion							
Vaccine HEP B, PED/ADOL	Lot Num 0123A	ber \BC	Expiration 01/02/2	Date		Doses On-Hand		
NDC 58160-0820-52		Funding Source BLENDED			Manufacturer GLAXOSMIT	THKLINE (FORMERLY	SMITHK	LINE BE
Total Transactions	Total Vac		Total Adju:	stments		Total Transfers		
ld 🖕 Reversal Id 🖕	Adjustment Reason	Reconciliation Bucket	Å	Transaction Type	Quantity 🍦	Transaction Date	Audit	Action
17001	RETURN EXPIRED VACCINE	INVENTORY RETURNED/EXPIRED/	RECALLED	INV ADJ	8	11/01/2024, 12:00 AM	?	
17000	RETURN EXPIRED VACCINE	INVENTORY RETURNED/EXPIRED/	RECALLED	INV ADJ	-8	11/01/2024, 1:36 PM	8	
16989	ADD INITIAL INVENTORY	VACCINE RECEIVED		INV ADJ	8	08/29/2024, 9:28 AM	9	

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### Reconciliation

The inventory reconciliation feature provides a spreadsheet-based view to assist in the process of reconciling the inventory transactions in the system with the actual inventory that is on-hand in your refrigerator/Freezer. As inventory is added, adjusted, administered, and transferred, the system automatically summarizes data.

nventory	Vaccine	Inventory R	econciliation	Ð	🗘 Links 🗸	Add Reconciliation
Vaccines						
On-Hand						
	Search (	riteria				
Reconciliation						
Vaccine Orders	Info: W	hen searching for recond	iliations, the Begin Date R	ange applies only to lega	cy reconciliatio	ns. The
Vaccino Poturne	End/Ph reconci	ysical Count Date Rang iations based on the new	je will return legacy reconci Physical Count Date.	liations based on the lega	acy End Date a	ind new
vaccine Returns			-			
				Inventory	Location	Reconciliation
	Inventory	Location VBOYS PEDIATRICS (5)	52)	✓ (ALL)	~	(ALL)
	Begin Dat	e Range	,	End/Physical Count Da	ate Range	(12)
	From: N	IM/DD/YYYY 🖪 Throu	ıgh: MM/DD/YYYY 🖪	From: MM/DD/YYYY	Through:	MM/DD/YYYY
	Sort by					
	Audit I	Date (descending) () Inv	ventory Location, Begin Dat	e (descending)	_	
	Previou	s Criteria				Clear Search
	Reconci	iation Search Res	ults - 1 record(s)			
	Status	Description	Count Date/Time	Authorized Du		
	INV: COW	BOYS PEDIATRICS (55	2) (Aggregate Reporter) -	552		
	Open	DECEMBER RECON	12/11/2024 10:00:00	LYNNE TEST		? View
			AM			

- This screen allows providers to go back and review closed reconciliations.
- By clicking on the Begin Date Range From date and Through date then click on "Search"
- Any reconciliations left "Open" for a long time, provider should go into the reconciliation and Delete it on the "Update" dropdown. Providers should then recreate a new reconciliation.
- Once a Reconciliation is completed and closed providers can only go into the completed reconciliation and "View" it. No changes can be made to a closed reconciliation.

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#### Vaccine Inventory Reconciliation

Links - Add Reconciliation

#### Search Criteria

Info: When searching for reconciliations, the Begin Date Range applies only to legacy reconciliations. The End/Physical Count Date Range will return legacy reconciliations based on the legacy End Date and new reconciliations based on the new Physical Count Date.

Inventory Location	Inventory Location Status	Reconciliation Status
POISON IVY PEDS	✓ (ALL) ✓	(ALL) 🗸
Begin Date Range From: MM/DD/YYYY Through: MM/DD/YYYY	End/Physical Count Date Range From: MM/DD/YYYY E Throug	h: MM/DD/YYYY
Audit Date (descending)	ate (descending)	
Previous Criteria		Clear Search

#### Reconciliation Search Results - 8 record(s)

Status	Description	Count Date/Time	Authorized By		
POISON IN	/Y PEDS - NM1009				
Closed	DECEMBER RECON	12/11/2024 10:00:00 AM	TESTER USER	?	View
Closed	3/20/241	3/20/2024 3:09:00 PM	MICKEY MOUSE	?	View
Closed	V23.6	7/5/2023 10:14:00 AM		?	View
Closed	TEST	2/1/2023 2:59:00 PM		?	View
Closed	TEST	11/12/2018 12:50:00 PM	FELICIA VALDEZ	?	View
Closed	NOV2	11/12/2018 10:04:00 AM	JOSHUA MARTINEZ	?	View
Closed	NOV	11/9/2018 9:52:00 AM	JOSHUA MARTINEZ	?	View
Closed	TEST RECON	11/6/2018 9:24:00 AM	FELICIA VALDEZ	?	View
		AM			L

# NMHealth

### **Viewing Past Reconciliations**

This screen will allow providers to view all past Reconciliations submitted during the date range selected.

- Start by ensuring you're on the correct Inventory location.
- Choose the date ranges from-Through
- Click on search button on the right side of the screen.
- Click on the View button to go into the Reconciliation.
- If any Reconciliations are left "In-Work", go into the Reconciliation and delete it, especially if its an old Reconciliation.
- All Reconciliations must be completed the same day of the physical count and the order.

### Reconciliation



- To add a new reconciliation, click on "Add Reconciliation" on the top right-hand side of the screen. Vaccine Inventory Reconciliation 🗘 Links 🗸 Add Reconciliation Search Criteria Info: When searching for reconciliations, the Begin Date Range applies only to legacy reconciliations. The End/Physical Count Date Range will return legacy reconciliations based on the legacy End Date and new reconciliations based on the new Physical Count Date. Inventory Location Reconciliation Inventory Location Status Status (ALL) (ALL) × (ALL) 🗸 Begin Date Range End/Physical Count Date Range Through: MM/DD/YYYY 🖪 From: MM/DD/YYYY F Through: MM/DD/YYYY F From: MM/DD/YYYY Sort by Audit Date (descending) Inventory Location, Begin Date (descending) Previous Criteria Clear Search
  - Locate your providers Inventory Location on the Inventory Location dropdown then click on "Next on the right-hand side of the screen.

nventory Locations *	Cancel Next
INV: COWBOYS PEDIATRICS (552)	Y

### Reconciliation Pre-Check Results



 If an error occurs on the pre-check list <u>Do not click on</u> <u>Resolve</u>, *click* on <u>Cancel</u> and go into the location where the problem is occurring to resolve the issue.  Once the Pre-Check Results show a green check mark the provider may now "Proceed" to open a new reconciliation.

Pre-Che	ck Results	×
Ø	No Open Reconciliation for this inventory location	
Ø	No Returns in Process for this Clinic	
Ø	No Rejected Returns outstanding for this Clinic	
0	Expired Inventory at this inventory location, prior to previous Count Date/Time.	Resolve
⊘	No Vaccines Added but not Administered	
Ø	No Pending Inventory Transfers	
	No Pending VTrcks Shipment	
		Cancel



### Reconciliation Aggregate Reporter

NMHealth

Aggregate reporters, are data exchange providers who submit data via the providers EHR's.

ventory Location: INV: COWBOYS PEDIAT	RICS (552)					
escription: * DECEMBER RECON	Authorized By:	TOR OF M 🗸 🛉	Status: * OPEN		~	
Dunt Date: *         Count Time: *           2/11/2024         10:50 AM         Image: Count Time: *	Last Count Date/Time:		Last Order Date: 09/04/2024	<b>iii</b>		
						A
ccine Inventory Reconciliation	on 👔 🚯		Ca	ncel Links 🗸	Update 👻	ir
	Г					P
entory Location: INV: COWBOYS PEDIATRICS	; (552)				-	W
scription: *	Authorized By:		Status: *			tł
ECEMBER RECON	TEST, LYNNE (DCCT		OPEN		Ť	• T
unt Date: * Count Time: * 2/11/2024	Last Count Date/Time:		Last Order Date: 09/04/2024			с
rentory by Doses					·	C to
rentory by Doses	Summe y	Aggregate Physical Administ Count	Inventory Acceptal Difference Inv. Difference	e Action	Audit	• C ta • V
rentory by Doses escription	Summa y	Aggregate Physical Administ Count	Inventory Acceptal Difference Inv. Difference	e Action	Audit	• C ta • V b
rentory by Doses escription LENDED DTaP-HepB-IPV (Pedia (Pediarix (0.5 mL x 10 syr) SK 311-52 • XP125 • 08/30/2026	Summa y 18 • 58160-	Aggregate Physical Administ Count	Inventory Difference Difference 0	Action Action Action	Audit	C to V b tl
ventory by Doses lescription LENDED . DTaP-HepB-IPV (Pedia (Pediarix (0.5 mL x 10 syr) SK 811-52 • XP125 • 08/30/2026 DTaP-IPV (Kinrix) (Kinrix (0.5 mL x 10 syr)) SKB • 581 5648 • 10/25/2025	Summe y (B • 58160- (60-0812-52 • )	Aggregate Administ Physical Count	Inventory Difference 0 0 0	Action  Action  Action  Action  Action	Audit ?	C to V b tl d c

- Description, Authorized By, Count Date/Count Time, must all be completed prior to clicking on "Create" on the top right side of the screen.
- Aggregate Reporters will see a reconciliation as shown on the image to the bottom left.
  - Providers will see two columns the 1<sup>st</sup> is to report all doses which were Aggregate Administered within the time-frame of the reconciliation.
- The 2<sup>nd</sup> column is the Physical Count which will be the On-hand count of vaccines in the providers office.
- Once you have entered all inventory click on "Update" on the top right corner.
- When a reconciliation is completed check for discrepancies between the ending number in you balanced reconciliation and the actual on-hand inventory; if any are found, document the discrepancies and contact your regional coordinator if VFC or contact the help desk at 1-833-882-6454.

### Reconciliation Manual Reporter

A provider that logs into NMSIIS and enters patient and vaccine information directly into the registry.

accine Inventory Reconciliation				Cancel Create		
Inventory Location: POISON IVY PEDS					<b>\</b> .	Descrip
Description: * DECEMBER RECON	Authorized By: USER, TESTER (DOCT	OR OF MEDICINE 🗸 🛉	Status: * OPEN	~		Time, n
Count Date: *         Count Time: *           12/11/2024         ■         10:00 AM         ②	Last Count Date/Time: 12/11/2024 10:00:00 AM		Last Order Date: 10/28/2024			"Create
						Manual
accine Inventory Reconciliation			Cancel	Links 🗸 Update 🗸	•	As provi
						automa
Inventory Location: POISON IVY PEDS				-	le - L	Provide
Description: *	Authorized By:		Status: *			will he t
DECEMBER RECON	USER, TESTER (DOCT	OR OF MEDICINE 🗸 🛉	OPEN	*		
Count Date: * Count Time: *	Last Count Date/Time:		Last Order Date:		II -	Unce yo
12/11/2024 🗎 10:00 AM 🧿	3/20/2024 3:09:00 PM		10/28/2024			top righ
					ll c .	When a
Inventory by Doses						betweer
Description	Summary	Physical Inventory	Acceptable Action	Audit		and the
		Count Difference	Inv. Difference			the disc
BLENDED				<b>^</b>		
1. DTaP (Infanrix (0.5 mL x 10 syr)) SKB • 58160-0810-52 • ZX45 01/01/2027	59P• Σ	4	C Action	•	"	VFC or (
2. Hep A, adult (Havrix (10 pack - 1 dose T-L syringes, No Need 58160-0826-52 • H258L • 02/20/2025	le)) SKB • Σ	7 -3	🖉 Action 👻	0		
3. Hep A, ped/adol, 2D (Havrix (0.5 mL x 10 syr)) SKB • 58160-( H5646 • 02/25/2025	D825-52 • Σ	3 -2	Action -	8	Γ	
4. Hep B, ped/adol (Recombivax (0.5 mL x 10 syr)) MSD • 0000 TE ST123 • 03/11/2025	6-4093-02 · Σ	3 0	Action -	0		

- Description, Authorized By, Count Date/Count Time, must all be completed prior to clicking on "Create" on the top right side of the screen.
- Manual Reporters will see a reconciliation as shown below. As providers are administering vaccines doses will automatically be pulled from the On-Hand Inventory. Providers will see 1 column when reconciling. Physical Count will be the On-hand count of vaccines in the providers office.
- Once you have entered all inventory click on Update on the top right corner.
  - When a reconciliation is completed check for discrepancies between the ending number in you balanced reconciliation and the actual on-hand inventory; if any are found, document the discrepancies and contact your regional coordinator if VFC or contact the help desk at 1-833-882-6454.

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### **Reconciliation Completed**



- Vaccine Inventory Reconciliation @ Cancel Links 🗸 Update Close Reconciliation Inventory Location: POISON IVY PEDS Description: \* Authorized By: Status: \* USER, TESTER (DOCTOR OF MEDICINE V DECEMBER RECON OPEN Last Count Date/Time: Last Order Date Count Date: \* Count Time: \* 12/11/2024 誧 10:00 AM Θ 3/20/2024 3:09:00 PM 10/28/2024 旨 Inventory by Doses Description Summary Physical Inventory Acceptable Action Audit Count Difference Inv. Difference BLENDED 1. DTaP (Infanrix (0.5 mL x 10 syr)) SKB • 58160-0810-52 • ZX459P ? Σ 0 8 Action • 01/01/2027 2. Hep A, adult (Havrix (10 pack - 1 dose T-L syringes, No Needle)) SKB 0 Ø ? Σ 10 Action 58160-0826-52 · H258L · 02/20/2025 3. Hep A, ped/adol, 2D (Havrix (0.5 mL x 10 syr)) SKB • 58160-0825-52 • 0 Ø 2 Σ 5 Action -H5646 • 02/25/2025 4. Hep B, ped/adol (Recombivax (0.5 mL x 10 syr)) MSD • 00006-4093-02 • 8 Ø Σ 0 Action -3 TEST123 · 03/11/2025
- Once all line items are correct and complete click on update to save your work on the reconciliation.
- If all is correct click on the drop-down adjacent to the Update button and click on Close Reconciliation.
- By clicking on the drop-down button adjacent to Update there is also a Delete button. Reconciliations can only be deleted if the reconciliation Status reads Open.

- The "Inventory Difference" for all line items should read 0.
- Be sure to go through one last time to ensure all inventory is correct.

#### **Reconciliation Completed**

The pop-up as shown to the right will appear to
ask if you would like to continue to close the
Reconciliation, click "OK" to continue or cancel
to go back to the opened reconciliation.



Vaccine Inventory Reconciliation	<b>?</b> 1					Cancel	Links 🗸	
Inventory Location: POISON IVY PEDS							-	
Description: *	Authorized By:	Authorized By: Status: *						
DECEMBER RECON	USER, TESTER (DOC	CTOR OF MEDI	CINE 🗸 🛉	CLOSE	D		~	
Count Date: *         Count Time: *           12/11/2024         Image: Count Time: *	Last Count Date/Time: 3/20/2024 3:09:00 PM			Last Order	Date: )24			
Inventory by Doses								
Description	Summary	Physical Count	Inventory Difference	Acceptable Inv. Difference	Action	Audit		
BLENDED							•	
1. DTaP (Infanrix (0.5 mL x 10 syr)) SKB • 58160-0810-52 • Z) 01/01/2027	x459P•Σ	8	0		Action -	0		
2. Hep A, adult (Havrix (10 pack - 1 dose T-L syringes, No Ne 58160-0826-52 • H258L • 02/20/2025	eedle)) SKB •	10	0	0	Action -	0	- 8	
3. Hep A, ped/adol, 2D (Havrix (0.5 mL x 10 syr)) SKB • 5816 H5646 • 02/25/2025	i0-0825-52 • <b>Σ</b>	5	0	Ø	Action -	0	- 11	
4. Hep B, ped/adol (Recombivax (0.5 mL x 10 syr)) MSD • 00 TEST123 • 03/11/2025	0006-4093-02 • <b>Σ</b>	3	0	0	Action -	0		

# Once a Reconciliation is closed, it cannot be re-opened or edited.

### Vaccine Orders

The Vaccine Inventory Order Screen is a quick way to view all the vaccine orders for every clinic within your organization.

nventory 🗧	Vaccine Orders
Vaccines 📃	
On-Hand	
Reconciliation	Search
Vaccine Orders	Clinic Order Status Order Type
Vaccine Returns	(ALL) ~ (ALL) ~ (ALL) ~
	Order Date Range     Date Submitted to VTrckS Date Range       From:     08/25/2024     Image: Through: 11/25/2024     Image: Through: 11/25/2024
	Previous Criteria Clear Search
	Previous Criteria Clear Search

- By changing the Order Date Range, you can click on "Search" and look at past orders submitted for approval or approved.
- The top right-hand side of the Orders screen is where providers will click to "Add New Vaccine Order".



### **Viewing Past Orders**

This screen will allow providers to view all past orders submitted during the date range selected.



- Orders "Rejected" can be viewed and notes from the program will explain the reason for a rejected order.
- All "Approved" orders will show two dates the 1<sup>st</sup> date is the date the order was placed by the provider; the 2<sup>nd</sup> is the date the order is submitted to VTrcks.
- If an order has been submitted to VTrcks providers can anticipate with that date when their order will arrive by looking at the Vaccine Shipping days located in NMSIIS Reports.
- Orders need to be placed the same day of your inventory reconciliation so that the number of doses administered are accurate.

accine Order	rs <sub>i Learn More</sub>				Add New	Vaccine Order
earch						
Clinic	Order Status		Order Type			
(ALL)	✓ (ALL)		✓ (ALL)	~	]	
Order Date Range			Date Submitted	to VTrckS Date	Range	
From: 09/12/2024	🔄 🖪 Through: 1	2/12/2024	From: MM/DI	D/YYYY 🖪 Thre	ough: MM/DD	/YYYY 🔳
Previous Criteria					Clear	Search
				Date		
				Submitted to	Order	
Order Number	Order Date	Order Status	Order Type	VTrck S	Detail	
POISON IVY CLINIC -	NM1009					
20241212NM100901	12/12/2024	REJECTED			<b>†</b> ()	View
20241028NM100901	10/28/2024	APPROVED		10/30/2024	<b>†</b> 8	View



### **Creating Orders**



 The top right-hand side of the Orders screen is where providers will click to "Add New Vaccine Order".

/accine Ord	ers 🔒	Learn More		Add New Vaccine Order
Search				
Clinic		Order Status	Order Type	
(ALL)	~	(ALL)	✓ (ALL)	~
Order Date Rang	е		Date Submitted to VTrckS	S Date Range
From: 08/25/20	24 🔳	Through: 11/25/2024	From: MM/DD/YYYY	Through: MM/DD/YYYY
Previous Criter	ia			Clear Search

 Locate your providers Inventory Location on the Clinic dropdown then click on "Next on the right-hand side of the screen.

accine Order 🕤 Learn More	Cancel	Next
Add - Select Clinic		
Clinic *		
POISON IVY CLINIC		~

### **Creating Orders**

- On the bottom right-hand side of the screen click on the "check box" to certify all Shipping information is correct.
- Click on "Next" to go to the Order.

firm	1 Shipping Information					
	Clinic: POISON IVY CLINIC (N	M1009)				
	Email: FELICIA.MARTINEZ2@	STATE.NM.US				
	Phone: 505-476-3672					
	Primary Shipping Contact					
	Name:	MICKEY MOU	JSE			
	Phone:	505-012-3456	5			
	Fax: Email:	MICKEYMOL	JSE@DOH NM	GOV		
			0			
	Shipping Address					
	123 HARLEY QUINN DR					
	DIXON, NM 87527					
	DIXON, NM 87527					
	DIXON, NM 87527 Delivery Information				-	
	DIXON, NM 87527 Delivery Information	Delivery	/ Time 1	Delivery	r Time 2	
	DIXON, NM 87527 Delivery Information Day Of Week	Delivery From	/ Time 1 To	Delivery	7 Time 2 To	
	DIXON, NM 87527 Delivery Information Day Of Week Monday	Delivery From 09:00	7 Time 1 To 12:00	Delivery From 14:00	7 Time 2 To 17:00	
	DIXON, NM 87527 Delivery Information Day Of Week Monday Tuesday	Delivery From 09:00 09:00	7 Time 1 To 12:00 12:00	Delivery From 14:00 14:00	7 Time 2 To 17:00 17:00	
	DIXON, NM 87527 Delivery Information Day Of Week Monday Tuesday Wednesday	Delivery From 09:00 09:00 09:00	7 Time 1 To 12:00 12:00 12:00	Delivery From 14:00 14:00 14:00	7 Time 2 To 17:00 17:00 17:00	
	DIXON, NM 87527 Delivery Information Day Of Week Monday Tuesday Wednesday Thursday	Delivery From 09:00 09:00 09:00 09:00	7 Time 1 To 12:00 12:00 12:00 12:00	Delivery From 14:00 14:00 14:00 14:00	Time 2 To 17:00 17:00 17:00 17:00	
	DIXON, NM 87527 Delivery Information Day Of Week Monday Tuesday Wednesday Thursday Friday	Delivery From 09:00 09:00 09:00 09:00 09:00	r Time 1 To 12:00 12:00 12:00 12:00 12:30	Delivery From 14:00 14:00 14:00 14:00 14:00	Time 2 To 17:00 17:00 17:00 17:00 17:00	
	DIXON, NM 87527 Delivery Information Day Of Week Monday Tuesday Wednesday Thursday Friday Saturday	Delivery From 09:00 09:00 09:00 09:00 09:00	Time 1 To 12:00 12:00 12:00 12:00 12:30	Delivery From 14:00 14:00 14:00 14:00 14:00	r Time 2 To 17:00 17:00 17:00 17:00 17:00	

 On the bottom right-hand side of the screen click on the "check box" to certify all Shipping information is correct.

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- Click on "Next" to go to the Order.
- Providers can communicate with the program regarding their order through the clinic notes.

lit						
] View Vaccine Inve	entory Reconciliation					
Clinic		Last Approved (	Order Date			
POISON IVY CLINI	C	10/28/2024				
	0.1.0.1				Date Subm	nitted
rder Number	Order Date	Order Status	Prio	ority Reason	to V IrckS	
UZ41212NM10090	12/12/2024				MM/DD/Y	
into oonintonto		/25				
I ID OFFICE WILL	DE LA DOELL TADRAM 4/3/					
OUR OFFICE WILL	BE CLOSED 12/25/24-1/2/	125				
OUR OFFICE WILL	BE GLOSED 12/25/24-1/2/					
OUR OFFICE WILL	BE CLOSED 12/25/24-1/2/					
DUR OFFICE WILL	Ints					
DUR OFFICE WILL FC Program Comm accine   Mfg   NDC	ents	23				
COUR OFFICE WILL FC Program Comm Inccine   Mfg   NDC BEGIN TYPING	ents Brand/Packaging A VACCINE, MANUFACTU	JRER CODE, NDC, OR BRANI	)/PACKAGING HERE			
COUR OFFICE WILL FC Program Comm accine   Mfg   NDC BEGIN TYPING Itent C	IBE GLOSED 12/25/24-1/2/ Ints Brand/Packaging A VACCINE, MANUFACTU Quantity of Packages Doses	IRER CODE, NDC, OR BRANI Per Package Total Doses Cos	)/PACKAGING HERE I Per Package Total C			
COUR OFFICE WILL	IBE GLOSED 12/25/24-1/2/ Interts	JRER CODE, NDC, OR BRANI Per Package Total Doses Cos	)/PACKAGING HERE tPer Package Total C	Cost (\$)		
PUR OFFICE WILL	IBE GLOSED 12/25/24-1/2/	JRER CODE, NDC, OR BRANI Per Package Total Doses Cos	)/PACKAGING HERE tPer Package Total C	;ost (\$)		
VUR OFFICE WILL	IBE CLOSED 12/25/24-1/2/ ents Brand/Packaging A VACCINE, MANUFACTU Quantity of Packages Doses	JRER CODE, NDC, OR BRANI Per Package Total Doses Cos	)/PACKAGING HERE I Per Package Total C	20st (\$)		
VIR OFFICE WILL  IFC Program Comm accine   Mfg   NDC BEGIN TYPING Itent Add To Order Clear	I Brand/Packaging A VACCINE, MANUFACTU Auantity of Packages Doses Order Forecast	JRER CODE, NDC, OR BRANI Per Package Total Doses Cos	)/ PACKAGING HERE I Per Package Total C	Cost (\$)		
Clear	IBE CLOSED 12/25/24-1/2/ ents I Brand/Packaging A VACCINE, MANUFACTU Quantity of Packages Doses	JRER CODE, NDC, OR BRANI Per Package Total Doses Cos	)/ PACKAGING HERE t Per Package Total C	Cost (\$)		
DUR OFFICE WILL FC Program Comm accine   Mfg   NDC BEGIN TYPING tent Add To Order Clear	IBE CLOSED 12/25/24-1/2/ ents I Brand/Packaging A VACCINE, MANUFACTU Quantity of Packages Doses Order Forecast •	JRER CODE, NDC, OR BRANI Per Package Total Doses Cos	)/ PACKAGING HERE t Per Package Total C Quantity 1 of 1	Cost (\$)		
Clear	IBE CLOSED 12/25/24-1/2/ ents I Brand/Packaging A VACCINE, MANUFACTU Quantity of Packages Doses Order Forecast Mfg NDC	JRER CODE, NDC, OR BRANI Per Package Total Doses Cos	Quantity I I per Package Total C	Cost (\$) Doses Per Tota Package Dos	al Fund res Cost Type	Rec Doses Comments

### Utilizing Order Forecaster





- Order Forecast can be utilized to assist providers with ordering vaccines monthly.
- Click on the down arrow to view Adult, Pediatric or Both.
- These options may change depending on clinic set up.

### Order Forecaster Results



Order Forecaster -	Order Forecaster - Pediatric 🚯										
Administered Immunizations Formula Vaccine	¥,	Administered Immunizations	Å	Current On Hand	Å	Recommended Order	Intent	Action			
VACCINE	Q	FORECASTED	Q	ON HAND	Q	RECOMMENDED Q		Clear All Filters			
DTAP		1		18		0	PEDIATRIC ¥	Add To Order			
DTAP-HEPB-IPV (PEDIA		1		13		0	PEDIATRIC ¥	Add To Order			
DTAP-IPV		2		23		0	PEDIATRIC ¥	Add To Order			
HEP A, PED/ADOL, 2D		6		25		0	PEDIATRIC ¥	Add To Order			
MMR		7		15		0	ADULT 🗸	Add To Order			
PCV20		3		2		1	ADULT Y	Add To Order			
PPSV23		2		5		0	ADULT Y	Add To Order			
TDAP, ADSORBED		12		0		12	ADULT V	Add To Order			

- Once the order Forecaster has populated the report for your clinic.
- A break down will show on the report with each individual vaccines consistently **Ordered**, **Administered**, **Current Onhand**, and the **number of vaccines the forecaster recommends** for the provider to order.
- If a provider needs more or less of any vaccine, they do not need to order what the forecaster recommends.
- Click on Add To Order if feasible for each individual vaccine.
- Be sure to only add VFC or Adult per order. Reminder that all VFC and Adult orders need to be separate orders.

### Order Forecaster Results

PCV20

•

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ninistered Immunizations Formula							I OTON	/tuurt, ii		ngint nam		
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cine	Administered immunizations	Current On Hand	Recommended Order	Intent	Acuon							
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P	1	18	0	PEDIATRIC V A	d To Order	File <u>Home</u> Insert Pa	ge Layout	Formulas D	Data Review Vie	w Automate H	Help Acrobat	
P-HEPB-IPV (PEDIA	f	13	0	PEDIATRIC ¥ A	d To Order	Calibri	~[11	~ A^ A	= = = ₽	General ~ \$ ~ % <b>9</b>	Conditional Formatting	∽ ∰ Insert ∽
.P-IPV	2	23	0	PEDIATRIC ¥ A	d To Order	Paste B I U ~ ≪ Clipboard Is	∽   💾 ∽   Font	✓ ▲ ✓ ▲ ✓ Ⅰ		.00 .00 →0 Number ⊡	Cell Styles ~ Styles	₩ Format ~ Cells
A, PED/ADOL, 2D	6	25	0	PEDIATRIC ¥ A	id To Order	$\mathbf{A} \mathbf{I} \qquad \mathbf{v} \in \mathbf{X} \mathbf{v} \mathbf{f}$	x Vaccin	e (CVX)				
(	7	15	0	ADULT V A	id To Order	Δ		В		с	D	F F G
20	2		,			Vaccine (CVX)	Admir	istered Immun	nizations 💌 Current	On Hand 🔽 Reco	ommended Order 🔽 Inter	nt 🔽
	3	2	1	ADULT V A	Id To Order	DTaP (20)			1	18	0 Pedi	atric
						DTaP-HepB-IPV (Pedia (110	D)		1	13	0 Pedi	atric
						DTaP-IPV (130)			2	23	0 Pedi	atric
						Hep A, adult (52)			4	14	0 Adul	t
						Hep A, ped/adol, 2D (83)			6	25	0 Pedi	atric
						Hep B, adult adjuvanted (1	.89)		8	0	8 Adul	t
						Hep B, ped/adol (8)			6	20	0 Pedi	atric
An Evoc	al corroadche	ot will po	nulata y	with		HPV9 (165)			15	20	0 Pedi	atric
	ei spieausiie	er wii ho	pulate	WILII		HPV9 (165)			1	9	0 Adul	t
multiple	e tabs for m	ore detail	led view	J		MCV4O/MCV4P (136)			13	32	0 Pedi	atric
manapi				v -		Meningococcal B OMV (163	3)		2	32	0 Pedi	atric
						MMR (3)			7	15	0 Adul	t
						MMR (3)			2	33	0 Pedi	atric
						MMRV (94)			3	10	0 Pedi	atric
						PCV20 (216)			1	20	0 Pedi	atric
						PCV20 (216)			3	2	1 Adul	t
						Polio-IPV (10)			6	22	0 Pedi	atric
						PPSV23 (33)			2	5	0 Adul	t
						Tdap, Adsorbed (115)			12	0	12 Adul	t
						Tdap, Adsorbed (115)			14	33	0 Pedi	atric

**NMHealth** 

### Vaccine Orders

						v		NMHeal
accine Order 👩	Learn More econciliation		C	Cancel	D Links •	Submit To VFC Prog	gram Update -	All vaccine orders are manually reviewed by the ordering team.
Clinic POISON IVY CLINIC Order Number 20241212NM100901 Clinic Comments OUR OFFICE WILL BE CLOSE	Order Date 12/12/2024 SED 12/25/24-1/2/25	Last Approved Order E 10/28/2024 Order Status IN WORK	Priority	Reason	Date Sul to VTrck: MM/DD	Ibmitted S		<ul> <li>Comments will help the ordering team to understand what the clinic is needing.</li> <li>To add a vaccine to your order, click on</li> </ul>
VFC Program Comments	/Packaging		ACTING HERE				17	Vaccine   Mg   Brand/Packaging, then type in your vaccine type in the ordering box.
BEGIN I YPING A VACC	CINE, MANUES, URER COL of Packages Doses Per Pack	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P	ackage Total Cost	(\$)				<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> </ul>
Vaccine	Forecast •	DE, NDC, OR BRAND/PACk kage Total Doses Cost Per P	Quantity of Intent Package	(\$) y Doses Per es Packag	Total ge Doses	Fund Rec Cost Type Doses	Comments	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes</li> </ul>
Add To Order Clear Order Vaccine DTaP-HepB-IPV (Pedia	Forecast • Mfg NDC SKB 58160-0811-52	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P Brand/Packaging Pediatix (0.5 mL x 10 syr	Quantity of Intent Package	y Doses Per Packag 10	Total ge Doses 20	Fund Rec Cost Type Doses ( 1077.20	Comments	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> </ul>
Add To Order Clear DTaP-HepB-IPV (Pedia Hep B, ped/adol	Forecast     •       Mfg     NDC       SKB     58160-0811-52       SKB     58160-0825-52       MSD     00006-4981-00	Brand/Packaging Pediarix (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr)	Quantity of Intent Package PED 2 PED 2 PED 3	(S) Per Per Packag 10 10 10	Total Doses 20 20 30	Fund         Rec           Cost         Type         Doses           1077.20         323.00	Comments ③ ③ ③	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> <li>Click on Add To Order to add each vaccine to</li> </ul>
Add To Order Clear Order Vaccine DTaP-HepB-IPV (Pedia Hep A, ped/adol Hib (PRP-T)	Forecast • Mfg NDC SKB 58160-0811-52 SKB 58160-0825-52 MSD 00006-4981-00 PMC 49281-0545-05	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P Brand/Packaging Pediarix (0.5 mL x 10 syr Havrix (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) acthib (0.5 mL x 5 vials)	Quantity of Intent Package PED 2 PED 2 PED 3 PED 1	(S) Per Per Packag 10 10 10 5	Total Doses 20 20 30 5	Fund         Rec           Type         Doses           1077.20         323.00           330.00         46.80	Comments ③ ③ ③ ③	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> <li>Click on Add To Order to add each vaccine to your order. The vaccines will be added to your</li> </ul>
Vaccine Mini LNUC Drandu BEGIN YPING A VACC Intent Quantity of Add To Order Clear Order Vaccine DTaP-HepB-IPV (Pedia Hep A, ped/adol, 2D Hep B, ped/adol Hib (PRP-T) HPV4 (Gardasil)	MANUFACTORER COI           of Packages         Doses Per Pack           of Packages         Doses Per Pack           Forecast         •           Mfg         NDC           SKB         58160-0811-52           SKB         58160-0825-52           MSD         00006-4981-00           PMC         49281-0545-05           MSD         00006-4045-41	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P Brand/Packaging Pediarix (0.5 mL x 10 syr) Havrix (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) vials) Acthb (0.5 mL x 5 vials) Gardasil (0.5 mL vial x 10	Quantity of Intent Package PED 2 PED 2 PED 3 PED 1 PED 2	(S) y Doses Per Per 10 10 10 5 10	Total Doses 20 20 30 5 20	Fund         Rec           Type         Doses           1077.20	Comments ③ ③ ③ ③ ③ ③ ③ ③ ③ ③ ③ ③ ③	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> <li>Click on Add To Order to add each vaccine to your order. The vaccines will be added to your order at the bottom of the screen.</li> </ul>
Vaccine Min LNUC Drand BEGIN TYPING A VACC Intent Quantity of Add To Order Clear Order DTaP-HepB-IPV (Pedia Hep A, ped/adol, 2D Hep B, ped/adol Hib (PRP-T) HPV4 (Gardasil) MCV40/MCV4P	Minute         NUC           Mfg         NDC           SKB         58160-0811-52           SKB         58160-0825-52           MSD         00006-4981-00           PMC         49281-0545-05           MSD         00006-4045-41           SKB         58160-0827-30	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P Brand/Packaging Pediarix (0.5 mL x 10 syr Havrix (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Acthib (0.5 mL x 5 vials) Gardasil (0.5 mL x 5 vials) Gardasil (0.5 mL vial x 10 vials) Menveo (10 x 0.5mL single dose vials)	Quantity       ackage     Total Cost       ackage     Total Cost       of     Intent       PED     2       PED     2       PED     3       PED     1       PED     2       PED     1       PED     2       PED     5	(S) y Doses Per Peckag 10 10 5 10 10 10 10 10	Total           Doses           20           20           30           5           20           50	Fund         Rec           Cost         Type         Doses           1077.20	Comments (%) (%) (%) (%) (%) (%) (%) (%)	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> <li>Click on Add To Order to add each vaccine to your order. The vaccines will be added to your order at the bottom of the screen.</li> <li>Click on Update to save the order.</li> </ul>
Vaccine Min LNUC Drand BEGIN TPING A VACC Intent Quantity of Add To Order Clear Order Vaccine DTaP-HepB-IPV (Pedia Hep A, ped/adol, 2D Hep B, ped/adol Hib (PRP-T) HPV4 (Gardasil) MCV40/MCV4P MMR	MANUFAL ORER COI           of Packages         Doses Per Packages           Mfg         NDC           SKB         58160-0811-52           SKB         58160-0825-52           MSD         00006-4981-00           PMC         49281-0545-05           MSD         00006-4045-41           SKB         58160-0827-30           MSD         00006-4681-00	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P Brand/Packaging Pediarix (0.5 mL x 10 syr Havrix (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Gardasil (0.5 mL x 5 vials) Gardasil (0.5 mL vial x 10 vials) Menveo (10 x 0.5 mL single dose vials) MMR II (0.5 mL x 10 vials)	Quantity of Intent Package PED 2 PED 2 PED 3 PED 1 PED 1 PED 2 PED 5 PED 2	(S) y Doses Per es Packag 10 10 10 5 10 10 10 10 10 10 10 10 10 10	Total Doses 20 20 30 30 5 20 50 50 20	Fund         Rec           Type         Doses           1077.20	Comments ③ ③ ③ ③ ③ ③ ③ ③ ③ ③ ③ ③ ③	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> <li>Click on Add To Order to add each vaccine to your order. The vaccines will be added to your order at the bottom of the screen.</li> <li>Click on Update to save the order.</li> <li>Last Click on Submit To VFC Program to send</li> </ul>
Vaccine DTaP-HepB-IPV (Pedia Hep A, ped/adol Hib (PRP-T) HPV4 (Gardasil) MCV40/MCV4P MMR MMRV	Minute         Nute         Nute           of Packages         Doses Per Pack           of Packages         Doses Per Pack           Mfg         NDC           SKB         58160-0811-52           SKB         58160-0825-52           MSD         00006-4981-00           PMC         49281-0545-05           MSD         00006-4045-41           SKB         58160-0827-30           MSD         00006-4681-00           MSD         00006-4171-00	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P Brand/Packaging Pediarix (0.5 mL x 10 syr) Havrix (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Acthib (0.5 mL x 5 vials) Gardasil (0.5 mL x 5 vials) Gardasil (0.5 mL vial x 10 vials) Menveo (10 x 0.5mL single dose vials) MMR II (0.5 mL x 10 vials) Proquad	AGING HERE ackage Total Cost of Intent Package PED 2 PED 2 PED 3 PED 1 PED 2 PED 2 PED 2 PED 5 PED 2 PED 5	(S) y Doses Per Packag 10 10 10 5 10 10 10 10 10 10 10 10 10 10	Total           Doses           20           20           30           5           20           50           20           50           50           50           50           50	Fund         Rec           Cost         Doses           1077.20         U           323.00         U           46.80         U           2270.80         U           5280.00         U           398.20         U           4756.00         U	Comments	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> <li>Click on Add To Order to add each vaccine to your order. The vaccines will be added to your order at the bottom of the screen.</li> <li>Click on Update to save the order.</li> <li>Last Click on Submit To VFC Program to send your order to be approved</li> </ul>
Vaccine Inter INIC Errandi BEGIN TPINS A VACC Intent Quantity of Add To Order Clear Order Vaccine DTaP-HepB-IPV (Pedia Hep A, ped/adol, 2D Hep B, ped/adol Hib (PRP-T) HPV4 (Gardasil) MCV40/MCV4P MMR MMRV PCV20	MANUFIC URER COI           of Packages         Doses Per Packages           Mfg         NDC           SKB         58160-0811-52           SKB         58160-0825-52           MSD         00006-4981-00           PMC         49281-0545-05           MSD         00006-4045-411           SKB         58160-0827-30           MSD         00006-4681-00           MSD         00006-4171-00           PFR         00005-2000-10	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P Brand/Packaging Pediarix (0.5 mL x 10 syr Havrix (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Acthib (0.5 mL x 5 vials) Gardasil (0.5 mL x 5 vials) Gardasil (0.5 mL x 10 syr) Menveo (10 x 0.5mL single dose vials) MMR II (0.5 mL x 10 vials) Proquad PREVNAR 20 (10 x 0.5mL	Quantity       ackage     Total Cost       ackage     Total Cost       of     of       Intent     Package       PED     2       PED     2       PED     1       PED     2       PED     1       PED     2       PED     5       PED     5       PED     5       PED     5	(S) y Doses Per Per 10 10 10 10 10 10 10 10 10 10	Total           Doses           20           20           30           5           20           50           20           50           50	Fund         Rec           Cost         709         Doses           1077.20	Comments	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> <li>Click on Add To Order to add each vaccine to your order. The vaccines will be added to your order at the bottom of the screen.</li> <li>Click on Update to save the order.</li> <li>Last Click on Submit To VFC Program to send your order to be approved.</li> </ul>
Add To Order Add To Order Clear Clear Vaccine DTaP-HepB-IPV (Pedia Hep A, ped/adol, 2D Hep B, ped/adol Hib (PRP-T) HPV4 (Gardasil) MCV40/MCV4P MMR MMRV PCV20 Polio-IPV	INE, MANUFAL ORER COI           of Packages         Doses Per Packages           of Packages         Doses Per Packages           Mfg         NDC           SKB         58160-0821-52           SKB         58160-0825-52           MSD         00006-4981-00           PMC         49281-0545-05           MSD         00006-4045-41           SKB         58160-0827-30           MSD         00006-4681-00           MSD         00006-4171-00           PFR         00005-2000-10           PMC         49281-0860-10	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P Brand/Packaging Pediarix (0.5 mL x 10 syr Havrix (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Acthib (0.5 mL x 5 vials) Gardasil (0.5 mL x 5 vials) Gardasil (0.5 mL x 10 single dose vials) MMR II (0.5 mL x 10 vials) Proquad PREVNAR 20 (10 x 0.5mL syringe) IPOL (5.0 mL vial)	Active HERE Ackage Total Cost Ackage Total Cost Ackage Total Cost Ackage Total Cost PED 2 PED 2 PED 2 PED 1 PED 2 PED 2 PED 2 PED 5 PED 5 PED 5 PED 5 PED 2	(S) y Doses Per es Packag 10 10 10 5 10 10 10 10 10 10 10 10 10 10	Total           Doses           20           20           20           20           50           50           50           50           50           20	Fund         Rec           Type         Doses           1077.20	Comments	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> <li>Click on Add To Order to add each vaccine to your order. The vaccines will be added to your order at the bottom of the screen.</li> <li>Click on Update to save the order.</li> <li>Last Click on Submit To VFC Program to send your order to be approved.</li> <li>Note: Adult and VFC orders must be submitted</li> </ul>
Vaccine Mind Nucl. Haranov BEGIN MPPING A VACC Intent Quantity of Add To Order Clear Order DTaP-HepB-IPV (Pedia Hep A, ped/adol, 2D Hep B, ped/adol Hib (PRP-T) HPV4 (Gardasil) MCV40/MCV4P MMR MMRV PCV20 Polio-IPV Varicella	Minute         Nute         Correct Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct         Correct	DE, NDC, OR BRAND/PACK kage Total Doses Cost Per P Brand/Packaging Pediarix (0.5 mL x 10 syr) Havrix (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Recombivax (0.5 mL x 10 syr) Acthib (0.5 mL x 5 vials) Gardasil (0.5 mL x 5 vials) Gardasil (0.5 mL x 10 syr) MMR II (0.5 mL x 10 vials) Proquad PREVNAR 20 (10 x 0.5mL syringe) IPOL (5.0 mL x 10 vials)	AGING HERE Ackage Total Cost of Intent Package PED 2 PED 2 PED 3 PED 1 PED 2 PED 2 PED 5 PED 5 PED 5 PED 5 PED 5 PED 5 PED 2 PED 1	(S) y Doses Per Packag 10 10 10 5 10 10 10 10 10 10 10 10 10 10	Total           Doses           20           20           20           20           20           5           20           50           20           50           20           50           20           50           20           50           20           50           20           50           20           50           20           50           20           50           50           20           50           50           50           20           50           50           50           50           50           50           50           50           50           50           50           50           50           50           50           50           50           50	Fund         Rec           Cost         Type         Doses           1077.20         Doses         10           323.00         I         I         I           320.00         I         I         I         I           320.00         I         I         I         I           46.80         I         I         I         I         I           5280.00         I         I         I         I         I           398.20         I         I         I         I         I           24756.00         I         I         I         I         I           249.20         I         I         I         I         I           783.40         I         I         I         I         I         I	Comments	<ul> <li>Click on the Intent dropdown to choose Adult or Blended for the order type.</li> <li>Quantity of Packages, enter the amount of vaccines needed for your clinic. Ex. Pediarix I will need 20 doses so I would order two boxes of 10.</li> <li>Click on Add To Order to add each vaccine to your order. The vaccines will be added to your order at the bottom of the screen.</li> <li>Click on Update to save the order.</li> <li>Last Click on Submit To VFC Program to send your order to be approved.</li> </ul>

### Vaccine Order Reminder



**Reminder:** If the Order Status reads IN WORK, the order has not been submitted for approval, which means the program will not see the order.

• Click on View, then submit to VFC Program.

Vaccine Order	S 🔒 Learn More	Add New Vaccine Order
Search		
Clinic	Order Status	Order Type
(ALL)	✓ (ALL) ✓	(ALL) ~
Order Date Range		Date Submitted to VTrckS Date Range
From: 05/12/2025	🔄 Through: 05/13/2025 🔄	From: MM/DD/YYYY E Through: MM/DD/YYYY E
Previous Criteria		Clear Search
Order Number	Order Date Order Status	Date Submitted to Order Order Type VTrck S Detail
POISON IVY CLINIC -	NM1009	
20250512NM100901	05/12/2025 IN WORK	📅 😮 View 🔶

### Vaccine Order pop-up

	NMHealth
Vaccine Order 👔 🕕 Learn More	
Edit Please confirm that the order DOES NOT apply to the following situations:	<ul> <li>As soon as the order has been</li> </ul>
☑ View Vaccine Inventory Reconciliation         Clinic       Last Approved Order Date         POISON IVY CLINIC       05/02/2025         Order Number       Order Date         Order Number       Order Date         0order Status       Priority Reason         105/12/2025       IN WORK         Clinic Comments       IN WORK	<ul> <li>created, a pop-up will show, to confirm that the Order Does Not apply to the listed situations.</li> <li>If non of the above applies, click on the check box to proceed.</li> </ul>
VFC Program Comments Vaccine   Mfg   NDC   Brand/Packaging BEGIN TYPING A VACCINE, MANUFACTURER CODE, NDC, OR BRAND/PACKAGING HERE Intent Quantity of Packages Doses Per Package Total Doses Cost Per Package Total Cost (\$)	
Add To Order         Clear       Order Forecast           Vaccine       Mfg       NDC       Brand/Packaging       Intent       Packages       Package       Doses       Fund       Rec         MMR       MSD       00006-4681-00       MMR II (0.5 mL x 10 vials)       PED       40       10       400       7964.00       Ice	5

### Submit Vaccine Order



cine Orde	Ər 🕜 🚺 Learn More		Cancel	🗘 Links 👻 Sub	omit To VFC Program	Update
it						
Please confirm • Created outsi • Created after • If your order a	that the order DOES NOT app de of your ordering timeframe. 14 days of your last reconciliati applies to the above, please del	y to the following situations: on. ete the order and create a new or	der within your ordering timefr	ame/within 14 days Please	of your last reconciliatio	n. ed
inic OISON IVY CLINI	entory Reconciliation	Last Approved Order 05/02/2025	Date			
rder Number	Order Date	Order Status	Priority Reason	Date Submitted to VTrckS		
0250512NM10090	05/12/2025	IN WORK		MM/DD/YYYY		
FC Program Comm	nents					
ccine   Mfg   NDC	Brand/Packaging					
BEGIN TYPING	A VACCINE, MANUFACTURE	R CODE, NDC, OR BRAND/PAC	KAGING HERE			
• (						
Add To Order						
Clear	Order Forecast 👻					
			Quantity Dose of Per	s Total	Fund Rec	
Vaccine	Mfg NDC	Brand/Packaging	Intent Packages Pack	age Doses Cost	Type Doses Comm	ents
IVIIVIK	NSD 00006-4681	-00 MINIK II (0.5 mL X 10 VIAIS	6) FED 40 10	400 (964.0	U	(*)

Once you have completed your order click on **Submit to VFC Program** to get your order sent to the program for approval.

**Note:** The Submit to VFC Program will allow providers to submit Adult orders as well as VFC orders. Be sure to submit VFC & Adult orders separately.

### Vaccine Order Pop-up

- Once you have clicked on the Submitted For Approval button, a pop-up will show to remind and Confirm providers are entering their Clinic Comments for the list of reasons below.
- If no action is needed, click on **OK** to proceed to completing your order.
- If you need to go back in and add comments, click on Cancel and go to clinic comments.

	Confirm	×	
Vaccine Order ? Learn More	<ul> <li>Do not forget to add "Clinic Comments" if your order applies to the following situations:</li> <li>Beyfortus doses administered and doses On-Hand (no recons required outside ord timeframe)</li> </ul>	ering	ogra
Edit	<ul> <li>Upcoming Clinics</li> <li>Reason for Menveo NDC 58160-0955-09 (orange cap) i.e. immunocompromised children</li> </ul>		
	Increase in Demand		
POISON IVY CLINIC	Order Statue	cel	



### **Completed Vaccine Order**



Once the order has been submitted to the Program.

\_

ccine Orders	i Learn More				Add Ne	w Vaccine Order
earch						
Clinic	Order Status		Order Type			
(ALL) ~	(ALL)	~	(ALL)	~		
Order Date Range From: 12/12/2024	Through: 1	2/12/2024	Date Submitted	to VTrckS Date I	Range bugh: <u>MM/D</u>	
Previous Criteria					Clear	Search
				Date Submitted to	Order	
Order Number	Order Date	Order Status	Order Type	VTrckS	Detail	
20241212NM100901	12/12/2024	APPROVED		01/02/2025	<b>†</b>	? View

When the Order has been approved a Date Submitted to VTrcks will appear and the Order Status will show

**NMHea** 



### **Receiving Vaccine Orders**

On the NMSIIS On-Hand a blue hyperlink will appear. The hyperlink will allow the provider to receive the shipment into NMSIIS to ensure that the quantity, Lot number, NDC, etc. will be correctly input into NMSIIS. The only exceptions for not receiving vaccines via the blue hyperlink is the state frozen vaccines and influenza, which must be manually entered into your NMSIIS inventory.

Reminder: Do not reject any VFC vaccine shipments. All VFC shipments must be added to your inventory in NMSIIS

<ul> <li>Click on the blue hyperlink shown below.</li> </ul>	Pending VTrckS Shipments
Vaccine Inventory On-Hand () Learn More	Date       Lot       Quantity         Order ID / Line Number       Shipped       Vaccine NDC       Number       Shipped         Receiving Location:       Inv: Poison IVY Peds (1009)         2025040434001 / 15       04/08/2025       Varicella       00006-4827-00       Y017915       10       Details       Receive       Dismiss       (a)
Inventory Location       Status         POISON IVY PEDS       ON-HAND         Vaccine       Funding Source         V       Vaccine	<ul> <li>Click on Receive to add the vaccine into the clinics On-hand.</li> </ul>

### Vaccine Returns

NMHealth

The Vaccine Returns Screen is a quick way to view all vaccine returns.

Vaccines 🗧	Vaccine Returns
On-Hand	Search
Reconciliation	Clinic Return Status (ALL)
Vaccine Returns	Return Reason       Return Type         Image: Constraint of the second seco
	<ul> <li>By changing the Return Date Range, you can click on search and view older or past returns submitted or approved.</li> <li>The top right hand of the return screen is where you will click to Add New Vaccine Return.</li> </ul>

### **Viewing Past Returns**

NMHealth

This screen will allow providers to view all past returns submitted during the date range selected.

- If any returns are left "In-Work" then the provider must go into the return and delete it especially if its an old Return.
- Returns "Rejected" can be viewed and notes from the program will explain the reason for a rejected Return.
- All "Approved" Returns will show two dates the 1<sup>st</sup> date is the date the Return was placed by the provider; the 2<sup>nd</sup> is the date the Return is submitted to VTrcks.
- If a Return has been submitted to VTrcks providers can anticipate a Return Label to be sent to them within the next 5 business days after the date of being submitted to VTrcks.
- Returns need to be submitted prior to opening and completing an inventory reconciliation, so that the number of doses are accurate on the inventory On-hand.

ccine Returns 🕦 Learn More	Add New V	accine Retur
earch		
Clinic Return Status		
POISON IVY CLINIC  V (ALL) V		
Return Keason Return Type		
Patur Data Banga		
From: 01/01/2025 I Through: 04/14/2025 From: MM/DD/YYYY Through: MM/DD/YYYY I		
Date Submitted to Program Date Range         From:       MM/DD/YYYY)         Image: Through:       MM/DD/YYYY)		
Previous Criteria	Clear	Search
Date Submitted Date Submit Return Number Return Date Return Status Return Type Return Reason to Program to VTrck S	ted Return Detail	
POISON IVY CLINIC - NM1009		
R02102025NM100900 02/10/2025 APPROVED RETURN ONLY EXPIRED VACCINE 02/10/2025 04/14/2025	<b>†</b>	View
R02112025NM100900 02/11/2025 APPROVED RETURN ONLY EXPIRED VACCINE 02/11/2025 04/14/2025	<b>.</b>	View
04142025NM100900 04/14/2025 IN WORK RETURN ONLY EXPIRED VACCINE	Ō	View

### **Creating Returns**

NMHealth

 The top right-hand side of the Vaccine Returns screen is where providers will click to Add New Vaccine Return.

accine Returns 🚯 Learn More	Add New Vaccine Return
Search	
Clinic Return Status (ALL)  (ALL)  (ALL)  Return Type	
Return Date Range     Date Submitted to VTrckS Date Range       From:     01/14/2025     Image: Through: 04/14/2025	
Date Submitted to Program Date Range       From:     MM/DD/YYYY)       Image: Comparison of the state of	
Previous Criteria	Clear Search

 Locate your providers Inventory Location on the Clinic dropdown then click on "Next on the right-hand side of the screen.

Vaccine Returns (i) Learn More		Cancel	Next
Add. Salact Clinia			
Add - Select Clinic	 		
Clinic *			

### **Creating Returns**



dd Vaccine Return Creation … 🚯	Cancel Next	
Add		- Varify the chinning information and cortify the
Clinic:POISON IVY CLINIC Primary Shipping Contact Name: DAISY DUCK Phone: 123-456-7890 Fax: Email: TEST123@GMAIL.COM		<ul> <li>Verify the shipping information and certify the information is correct by clicking on the check box on the bottom right corner of the screen.</li> <li>Then click on Next at the top right-hand corner of the screen.</li> </ul>
Shipping Address 123 HARLEY QUINN DR DIXON, NM 87527		
Delivery Information		
Delivery Time 1 Delivery Time 2           From         To         From         To           Monday         09:00         12:00         14:00         17:00           Tuesday         09:00         12:00         14:00         17:00           Wednesday09:00         12:00         14:00         17:00           Thursday         09:00         12:00         14:00         17:00           Friday         09:00         12:30         14:00         17:00           Saturday         Sunday         Special Instructions:NO SPECIAL INSTRUCTIONS		

### **Creating Returns**

- The Vaccine Returns screen is now displayed and your selections in the required fields (red asterisk\*) should match the screenshot.
- *Return Type*, select **Return Only**
- Return Reason use the drop-down menu and select
   Expired Vaccine

*Note:* Spoiled vaccines to return are only due to temperature excursions/Spoiled in Transit. A copy of your VFC Troubleshooting Record (TSR) must be submitted to your Regional Coordinator and approved then if vaccine is non-viable submit immediately a return for the non-viable vaccines.

- Number of Shipping Labels, 1 is the usual request; the rule of thumb is one label for each 100 doses being returned.
- Label Shipping Method, select Mail to provider email stored in VTRCKS- A return label will only be submitted to emails with 40 characters or less, select Mail to provider address in VTRCKS- A return label will be sent to the shipping address listed on the last page.
- Clinic Comments, this is an optional field but can be helpful-share any additional information you think will help us process your return. If the return label is being sent to the primary and if the primary is out, then the label will need to be sent to the Back-up, please state that on the clinic comments.

Ceall More	
۱dd	
Clinic Last Approved Return Date Created By	,
POISON IVY CLINIC 02/11/2025 🔄	
Return Number Return Status Return Type * Return Re	ason *
R04142025NM100900 IN WORK V RETURN ONLY V	~
Return Created Date Date Submitted to Program Date Submitted to VTrckS	
04/14/2025 E MM/DD/YYYY E MM/DD/YYYY	EXPIRED VACCINE
Label Shipping Method * Description Number of	Shipping Labels * FAILURE TO STORE PROPERLY UPON RECEIF
EMAILED TO PROVIDER EMAIL STORED IN VTRCKS V	MECHANICAL FAILURE
Clinic Comments	NATURAL DISASTER/POWER OUTAGE
	RECALL
	REFRIGERATOR TOO COLD
VFC Program Comments	REFRIGERATOR TOO WARM
	SPOILED
	VACCINE SPOILED IN TRANSIT(FREEZE/WARM
Vaccine   Mfg   NDC   Brand/Packaging   Funding Source   Lot Number   Expiration Date   Doses Remaining	Doses Returning
BEGIN TYPING A VACCINE, MFG CODE, NDC, BRAND/PACKAGING, FUNDING SOURCE, LOT #, OR DATE	E HERE Add Return
Vaccines To Return	

• Last Click **Create** on the right side of the screen.



### Creating/Submitting Returns



Vaccine Returns 🛛 🕄 Learn	✓ Success The Record Has Been × Saved	Cancel D Links	Submit To VF	C Program Update -	<ul> <li>Enter the expired vaccine and number of doses to find the vaccine in your inventory, begin typing a vaccine, name, NDC, brand, etc. and select the</li> </ul>
Edit					correct vaccine from the drop-down list. Note: Expired vaccine returns will need to be on
Clinic POISON IVY CLINIC Return Number Ro4142025NM100900 Return Created Date Date Submitte 04/14/2025 Clinic Comments Clinic Comments	Last Approved Return Date   02/11/2025   Return Type *   RETURN ONLY ~   Date Submitted to VTrckS   MM/DD/YYYY   Description	Created By SAMANTHA SANCHEZ, SAM Return Reason * EXPIRED VACCINE Number of Shipping Labels * 1	AN THA.SANCHEZ@	YAHOO.COM	<ul> <li>separate returns from TSR returns, and Adult returns.</li> <li>Enter the Doses Returning number for the doses needing to be returned; in this case (expired vaccine) this is usually all the doses in your inventory.</li> <li>Click on Add Return for each vaccine item being returned.</li> <li>Click on Update on the screen.</li> <li>Last click on Submit To VFC Program.</li> </ul>
VFC Program Comments					
Vaccine   Mfg   NDC   Brand/Packaging   Fu BEGIN TYPING A VACCINE, MFG CODE, Vaccines To Return	nding Source   Lot Number   Expiration Date   Doses NDC, BRAND/PACKAGING, FUNDING SOURCE, LOT	Remaining	loses Returning	Add Return	
Vaccination         Mfg         NDC           Hep A, ped/adol, 2D         SKB         58160-082	Brand/Packaging Funding Src Lo 5-52 Havrix (0.5 mL x 10 syr) BLENDED H5	t NumberExpiration Date564602/25/2025	Doses Remaining 4	Doses Returned 4 (S)	47

### **Completed Vaccine Return**



ccine Return	6 🕜	Learn More							/	Curren	Cancel t Invento	D Links -
dit										Vaccine	e Return	Details
Clinic				Last Approve	ed Return Date		Created By	1				
POISON IVY CLINIC				02/11/2025		5	SAMANTH	HA SANCHEZ, SAM	MANTHA.SANCHEZ	Z@YAHO	0.COM	
Return Number	Re	turn Status		Return Type			, Return Rea	ason				
R04142025NM100900	S	UBMITTED FOR A	APPROVAL 🗸	RETURN O	NLY 🗸		EXPIRED	VACCINE		~		
Return Created Date	Da	de Submided to Pr	logram	Date Submit	ted to VTrckS							
04/14/2025	0	4/14/2025		MM/DD/YY	Үү 🔳							
Label Shipping Method				Description			Number of	f Shipping Labels	*			
EMAILED TO PROVIDER	EMAI	STORED IN VTR	CKS V				1					
Clinic Comments												
/EC Program Commonto												h
veo erogiani comments												
/accine   Mfg   NDC   Bra	nd/Dec	kaning   Eunding		umbor i Evni	ration Date I Dr		Domaining		Docos Poturnia	0		/i
		Kaying   runaing				LOT			Doses Returnin	у	A	
accines To Return	UINE, I	nro code, NDC,	DRAINDIFACKA	GING, FUNL	ING SOURCE, I	LUT	#, OR DAIL	TERE				
Vascination	Mfo	NDC	Brand/Packar	nina	Funding Src	Lot	t Number	Expiration Date	Doses Remainin	ια Πο	ises Retu	rned
vaccination	in the	100	Dianal-acya	99	ranung arc	LUI	raumper	Expiration Date	Dogeo Remainin	יש שי	aca netu	meu
Vaccination	OKD.	E0160 000E E0	Houriy (0.5 ml	v 10 ovr)		UF	646	02/25/2025	0			ø

 Once the Return has been submitted to the Program. The return status will state Submitted For Approval.
 Next click on the Links drop down, then click on Vaccine Return Details. Print 1 copy of the report and place it in the box with the vaccine being returned.
 Note: The types and doses of vaccines listed on the return must match exactly what is contained in the box of returned vaccine.

Last click on **Cancel** to exit the return.

### **Completed Vaccine Return**



Vaccine Returns () Learn More	<ul> <li>When the Return has been approved a Date</li> <li>Submitted to VTrcks will appear and the Return</li> <li>Status will show Approved.</li> </ul>
Search          Clinic       Return Status         (ALL)       (ALL)         Return Reason       Return Type         Return Date Range       Date Submitted to VTrckS Date Range         From:       (A/01/2025)       Through:       Of 17/2025)         Date Submitted to Program Date Range       From:       MM/DD/YYY?       Through:         Previous Criteria       Clear       Search         Return Number       Return Date Return Status Return Type       Date Submitted Date Submitted Return         POISON IVY CLINIC - NM1009       V	<ul> <li>Within 1 week of the Return being approved in NMSIIS. An email will be submitted to the Primary Contact with a UPS Delivery Label email.</li> <li>Each return label is <u>specific</u> to a return. McKesson uses them to help track return shipments. <u>Do Not</u> save shipping labels and try to reuse.</li> <li>Only return vaccines that were approved and listed or the return detail form and in the box.</li> <li>Labels are only valid for 30 days. After 30 days the Immunization Team will have to delete each return and recreate a new one in the CDC system.</li> </ul>
R04142025NM100900 04/14/2025 APPROVED RETURN ONLY EXPIRED VACCINE 04/14/2025 04/17/2025 🕂 🖓 View	<i>Note:</i> Email must be less than 40 Characters to receiv a shipping label.

## Resources

	NI N	Anvine	Versioner for Children (		Dua muana Ctaff			
	INEW I	viexico	vaccines for Children (	VFC)	Program Staff			
VFC Program Manager Lynne Padilla Phone: 505-827-2147 Email: Lynne.Padilla-truji@doh.nm.gov			STATE OFFICE AT THI RUNNELS BUILDING SANTA FE	E	Vaccines for Children Clerk-A Vacant			
Immunization Compliance Co Scarlett Swanson Phone: 505-827-2898 Email: <u>ScarlettC.Swanson@do</u>	ordinator h.nm.gov	Vaccines for Children Health Educator Daisy Lujan Phone: 505-827-2415 Email:Daisy.Lujan@doh.nm.gov VFC.Health-Educator@doh.nm.gov			Vaccines for Children Clerk-O Carl Schoepke, JR. Phone: 505-827-2731 Email: <u>Carl Schoepke@doh.nm.gov</u>			
REGIONAL OFFICES								
Metro	Northwest	t	Northeast	Southeast (a) (b)		Southwest		
Bernalillo, Sandoval, Valencia, Torrance	Cibola, McKinley, San Juan		Colfax, Guadalupe, Los Alamos, Mora, Rio Arriba, San Miguel, Santa Fe, Taos, Union, Harding	A-Edd Roose	y, Lea, Lincoln, Chaves, B-Quay, evelt, Curry, De Baca	Catron, Doña Ana, Grant, Hidalgo, Luna Otero, Sierra, Socorro		
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Crystal Trujillo, RN 505-709-7811 <u>Crystal.Trujillo@doh.nm.gov</u>			Debra Wagner 505-476-2619 <u>Debra.Wagner@doh.nm.gov</u>	Immu Zach V	inization Coordinator: Washington, RN	Immunization Coordinator: Kimberly Orozco, RN		
Melicca Dadilla			Immunization Clerk:	Zacha	riah.Washington@doh.nm.gov	Kimberly.Orozco@doh.nm.gov		
505-670-0153 Melissa.Padilla@doh.nm.gov			Renee Encinias 505-476-2622	Immu	inization Clerk:			
			<u>Renee.Encinias@doh.nm.gov</u>	There 575-2 <u>There</u>	sa Rubio 88-9463 sa.Rubio@doh.nm.gov			
L			1			11-1-1-1-5 (2025		

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**NMHea** 



### Resources

# NMSIIS Help Desk Call: (833)882-6454 8:00am-5:00pm Monday-Friday (closed 12:00pm-1:00pm)