

Florida SHOTS™

HEPATITIS A OUTBREAK RESPONSE TRAINING GUIDE FOR COUNTY HEALTH DEPARTMENTS

Contact Information

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Table of Contents

INTRODUCTION TO THE GUIDE **2**

DOCUMENTING VACCINES **2-8**

ADDING CLINICS TO A SERVICE SITE **9-11**



DOCUMENTING VACCINES

INTRODUCTION

This guide is for county health departments participating in the hepatitis A outbreak response. Throughout this guide, you will learn vital information for the hepatitis A effort that allows you to record vaccinations on behalf of another site. This will include recording sensitive information and high-risk conditions, as well as introduce a new feature that incorporates adding clinics under a service site.

STEP 1

Log in to Florida SHOTS.

STEP 2

Search for the patient in Florida SHOTS by clicking on the **Patients** tab on the menu, found on the left-hand side of the screen. Then, click on **Search for Patient**.



STEP 3

Fill in the following fields with *last name*, *first name*, and *date of birth*. Click the grey **Search for Patient** box when you are ready to search for the record.

Last Name: **	First Name: **	Date of Birth: **
<input type="text" value="ANORVE"/>	<input type="text" value="ABEL"/>	<input type="text" value="01/01/2000"/>
OR		
	State ID: <input type="text"/>	
OR		
Patient Id: <input type="text"/>	Specify Org: <input type="text"/>	
<input type="button" value="Search for Patient"/>		<input type="button" value="Reset Search Fields"/>

* Asterisk indicates a required field

DOCUMENTING VACCINES

STEP 4

Confirm the information matches the information you have for the patient. If it does, click on the name to go into the record.

The screenshot shows the 'Patient Search' interface. At the top, there are input fields for 'Last Name: *' (ANORVE), 'First Name: *' (ABEL), and 'Date of Birth: *' (01/01/2000). Below these are 'OR' options and a 'State ID' field. Further down are 'Patient Id:' and 'Specify Org:' fields. There are 'Search for Patient' and 'Reset Search Fields' buttons. A note states '* Asterisk indicates a required field'. Below the search fields is a table with the following data:

Last Name, First Name	Date Of Birth	SSN	Sex	State ID
ANORVE, ABEL X	01/01/2000		M	4100072875

At the bottom of the table are 'Add New Patient' and 'Extend Search' buttons. A blue arrow points to the 'ANORVE, ABEL X' entry in the table.

****Please note:** If the information on the screen does not match what you have, or your screen shows **No Matching Records Found** in red, you will need to create a new record for the patient. Do this by clicking **Add New Patient** and filling out all required fields inside.

STEP 5

Upon entering the record, you might receive a pop-up message (as shown below). This is the system's way of notifying you the patient is overdue for vaccines. Click **OK** to continue.

The screenshot shows the 'Patient Search' interface with a pop-up message overlay. The pop-up message is titled 'Message from webpage' and contains the following text:

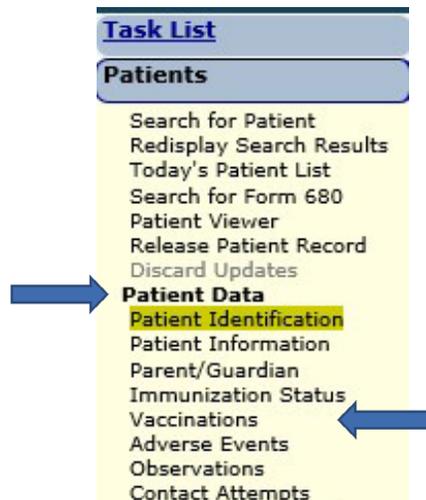
*** Important information regarding this patient ***
This patient is Due Now or Overdue for the following antigens:
DIPHTHERIA: Overdue
TETANUS: Overdue
PERTUSSIS: Overdue
MEASLES: Overdue
MUMPS: Overdue
RUBELLA: Overdue
HEP B: Overdue
HPV: Overdue
VZV: Overdue

The background interface is partially visible, showing the search criteria and the results table. A blue arrow points to the 'OK' button in the pop-up message.

DOCUMENTING VACCINES

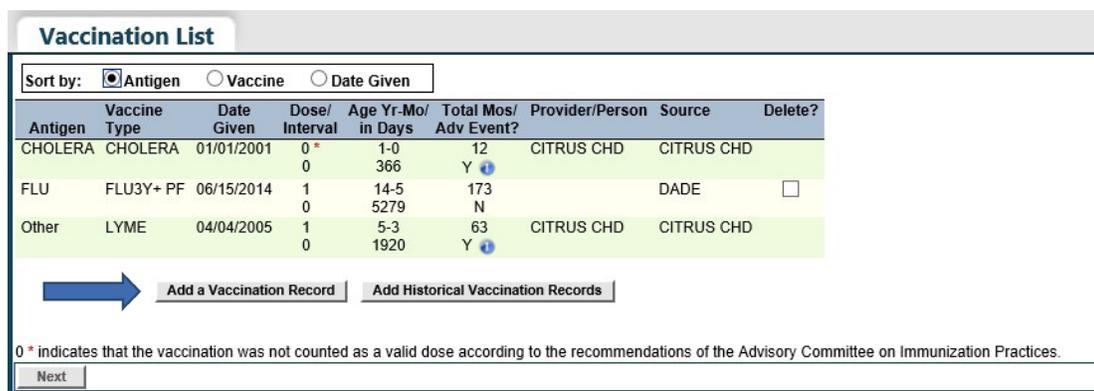
STEP 6

Refer to the **Patients** tab on the menu once more and look for the first subheading, **Patient Data**. Underneath it, click on **Vaccinations** (it is the fifth one down).

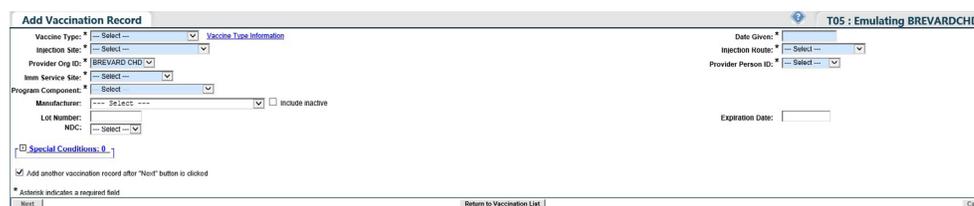


STEP 7

You should now be on the **Vaccination List** page (shown below).



Click on the grey box, **Add a Vaccination Record**. This takes you to the **Add Vaccination Record** screen, where you will begin recording the vaccine information (as shown below).



DOCUMENTING VACCINES

STEP 8

Enter the vaccine information that has been gathered for the hepatitis A outbreak response effort.

Add Vaccination Record

Barcode Scan: Do not trigger the reader unless the cursor is in this field.

Vaccine Type: * [HEP A ADULT [CVX 52] v] [Vaccine Type Information](#)

Injection Site: * [RA-RIGHT ARM v]

Provider Org ID: * [BREVARD CHD v]

Imm Service Site: * [BREVARD CHD MELBOURNE v]

Program Component: * [17.02 - Hep A Outbreak v]

CPT: * [90632 v]

Patient Insurance: * [UNINSURED v]

If you are recording administrations on behalf of another site, select the **Clinic** from the drop-down menu.

Training Environment : Emulating BREVARDCHD

Date Given: * [10/02/2019 v]

Injection Route: * [IM-INTRAMUSCULAR v]

Provider Person ID: [UNKNOWN v]

Clinic: [BREVARD - TEST CLINIC 1 v]

****Please note:** If you do not see the clinic listed, refer to the instructions at the end of this guide for adding clinics.

STEP 9

Once the **Imm Service Site** and **Program Component** (17.02 – Hep A Outbreak for this outbreak response) are selected, you can select the vaccine from the current inventory list displayed.

Reduce inventory-on-hand count

Mfg/Lot: * [--- Select --- v]

Current inventory records for HEP A ADULT

Click a "Select" button to indicate the inventory record to be reduced.
Click a "Hide" button to remove its row from the display.

Service Site	Mfg/Lot#	Qty
Program Component	Expiration Date	On Hand
NDC		
BREVARD CHD MELBOURNE	SKB G99R4	2
17.02 - Hep A Outbreak	05/20/2022	
	58160-0826-52	

DOCUMENTING VACCINES

If you have selected a Clinic (as shown above), and the vaccine is not in your inventory because you adjusted it out for transfer purposes, you will uncheck the **Reduce Inventory** box and manually enter the vaccine information (see below).

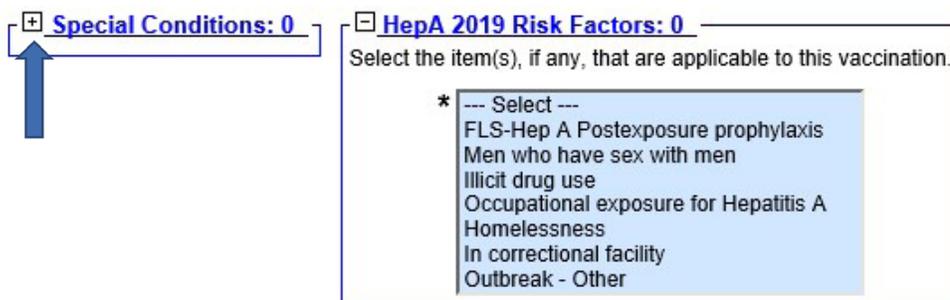


Annotations: A blue arrow points to the 'Reduce inventory-on-hand count' checkbox, which is unchecked. Another blue arrow points to the 'Manufacturer' dropdown menu.

Reduce inventory-on-hand count
Manufacturer: --- Select --- Include inactive
Lot Number:
NDC: --- Select ---

STEP 10

Click on the **plus sign** icon beside **Special Conditions**, to expand selection criteria.

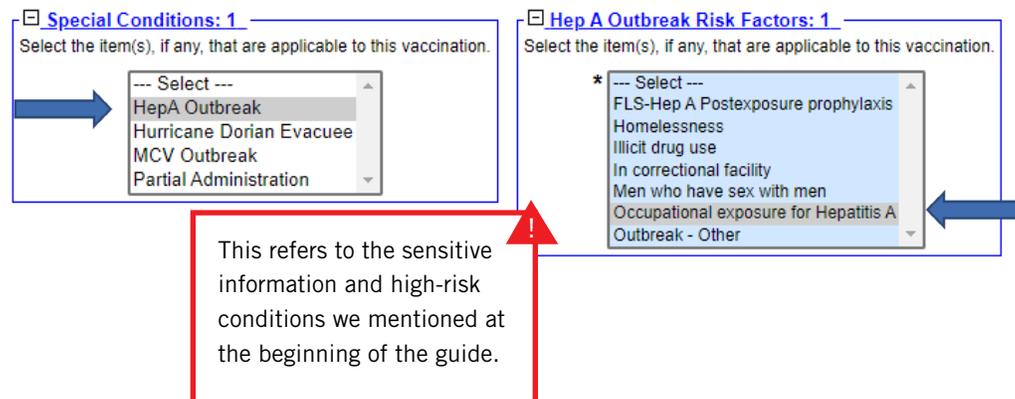


Annotations: A blue arrow points to the plus sign icon next to 'Special Conditions: 0'. A blue box highlights the 'HepA 2019 Risk Factors: 0' dropdown menu.

Special Conditions: 0
 HepA 2019 Risk Factors: 0
Select the item(s), if any, that are applicable to this vaccination.
* --- Select ---
FLS-Hep A Postexposure prophylaxis
Men who have sex with men
Illicit drug use
Occupational exposure for Hepatitis A
Homelessness
In correctional facility
Outbreak - Other

STEP 11

Select the Special Condition **HepA Outbreak** and any **Risk Factors** that may apply to the patient receiving this vaccine.



Annotations: A blue arrow points to 'HepA Outbreak' in the Special Conditions dropdown. A blue arrow points to 'Occupational exposure for Hepatitis A' in the Hep A Outbreak Risk Factors dropdown. A red box with a warning icon contains explanatory text.

Special Conditions: 1
Select the item(s), if any, that are applicable to this vaccination.
--- Select ---
HepA Outbreak
Hurricane Dorian Evacuee
MCV Outbreak
Partial Administration

Hep A Outbreak Risk Factors: 1
Select the item(s), if any, that are applicable to this vaccination.
* --- Select ---
FLS-Hep A Postexposure prophylaxis
Homelessness
Illicit drug use
In correctional facility
Men who have sex with men
Occupational exposure for Hepatitis A
Outbreak - Other

This refers to the sensitive information and high-risk conditions we mentioned at the beginning of the guide.

****Please note:** you can select more than one risk factor by holding down the Ctrl key on your keyboard and clicking on the factors as needed.

 Risk Factors (high-risk conditions, i.e. sensitive information) can only be seen by the user who entered the information, and by users who have the Sensitive Privilege permission. To obtain this permission, local org administrators should submit the request in writing (i.e. email) to the Florida SHOTS Helpdesk at flshots@flhealth.gov.

DOCUMENTING VACCINES

STEP 12

Enter the **Vaccine Information Statements** for the client.

Make sure you enter the **VIS Date** in the box next to **HEPA ***, then select the **VIS Recipient** (who received the VIS paperwork), and select whether the recipient gave consent for the vaccine.

Vaccine Information Statements

[CDC Vaccine Information Statements \(VIS\)](#) Type: VIS Date:

VIS Recipient: HEPA *

* -- Select --

-- Select -- Consent for treatment given by VIS recipient

Once the VIS Recipient is selected, the field below it will become available. Click on the drop-down arrow next to **Consent for treatment given by VIS recipient to select **Yes** or **No** for consent (shown below).

Vaccine Information Statements

[CDC Vaccine Information Statements \(VIS\)](#) Type: VIS Date:

VIS Recipient: HEPA * 07/20/2016

* Patient: ANORVE, ABEL

* Yes Consent for treatment given by VIS recipient

If you are unaware of the VIS Date, click on the blue **CDC Vaccine Information Statements (VIS)** hyperlink to go to the CDC website. Once there, you can look up the current VISs for all vaccine types (as shown below).

http://www.cdc.gov/vaccines/hcp/vis/current-vis.html

CDC Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

Vaccine Information Statements (VISs)

Current VISs

[Download all VISs](#) [6.79 MB]

CDC maintains a current English language VIS for each vaccine. You and your patients can

- View and display the web page
- Download and print the PDF file
- Import the RTF (text) file into an electronic system

What Do Dates & Interim Mean?

- The date, in red, next to each VIS is the most recent version.
- The Interim version is to be used until the final version is available.

See *What's New* to learn when the final version should be

DOCUMENTING VACCINES

STEP 13

Upon completion, you have the option to add more vaccines (if applicable). If you *do not* have more vaccines to add, *uncheck* the box beside **Add another vaccination record after “Next” button is clicked.**



Click the grey **Next** box to continue submitting your entries.

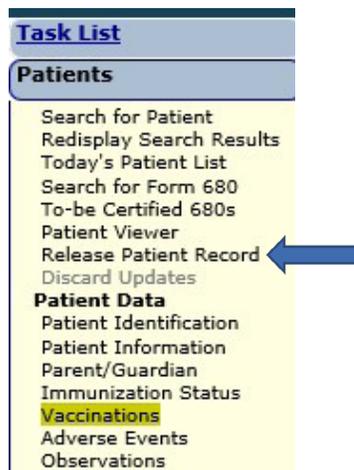


You can finalize your entries by clicking **Submit** once it turns yellow, found in the top left-hand corner of the screen



STEP 14

Once you are done with the patient’s record, be sure to properly exit by clicking **Release Patient Record** from the menu.



ADDING CLINICS TO A SERVICE SITE

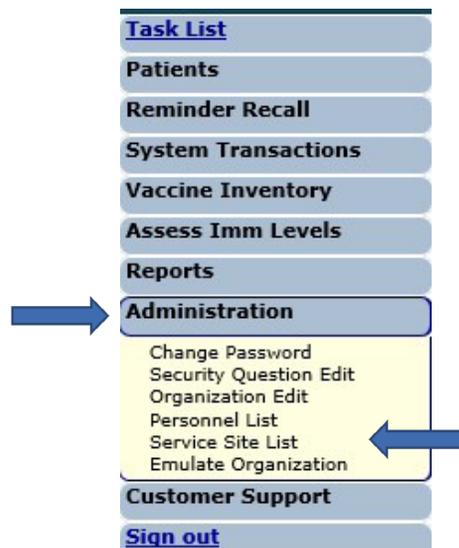
We have added the ability to add clinics to existing sites. This feature will assist providers in accounting for vaccines administered at a different location, such as an outbreak response that has taken place outside of your primary location.

STEP 1

Log in to Florida SHOTS.

STEP 2

Click on **Administration** from the menu, then select **Service Site List**.



STEP 3

This brings you to the **Site List** page, which allows you to view all sites affiliated with your organization.

Site List

Organization: TAMPA FAMILY HEALTH CENTERS
Click on a row below to select an existing site.

Show sites: Active Archived All

CIP/Service Site Name ▲	Provider Site Id	Default	In Use	Address	VFC PIN
FLORIDA HOSPITAL HC	16		Yes	3100 EAST FLETCHER AVENUE, SUITE 126, TAMPA	
NORTH TAMPA HEALTH CENTER	6	Yes	Yes	1502 E FOWLER AVE, TAMPA	291069 (VFC EID: 996)
OSBORNE CENTER	4		Yes	4620 N 22ND ST., TAMPA	291006 (VFC EID: 975)
SHELDON SOUTH	13		Yes	5611 SHELDON ROAD, TAMPA	700273 (VFC EID: 2264)
TAMPA FAM - FLETCHER	3		Yes	302 WEST FLETCHER, TAMPA	700384 (VFC EID: 2400)
TAMPA FAM NEBRASKA	11		Yes	8106 N NEBRASKA AVE., TAMPA	700031 (VFC EID: 1901)
TAMPA FAMILY - SLIGH	14		Yes	6216 EAST SLIGH AVENUE, TAMPA	700379 (VFC EID: 2399)
TAMPA FAMILY CAUSE	12		Yes	7608 CAUSEWAY BLVD, TAMPA	700181 (VFC EID: 2095)

**To view a particular site's maintenance page, click on that site's name (shown above).

ADDING CLINICS TO A SERVICE SITE

STEP 4

This takes you to the **Site Maintenance** page. Under the service site's address and contact information, you will see **Clinics** in blue.

Site Maintenance

BREVARD CHD

Site Name: * BREV CENTRAL OFF
 Provider Site ID:
 Administers Vaccs:
 Site Type: * COUNTY HEALTH DEPARTMENT

National Prov ID:
 Is Central Ordering Site:
 Other (specify):

VFC PIN: 700050
 VFC EID: 52

FLSHOTS Service Site Address

Line 1: * BREV CENTRAL PHARM
 Line 2:
 City: * CAPE CANAVERAL
 State: * FL Zip: * 32920
 County: * BREVARD

VFC Shipping Address

Same as Service Site Address

FLSHOTS Service Site Contact Info

Phone: * (850)889-0812
 Fax: * (850)770-9701
 Email: Venkat.Moparthy@flhealth.gov
 Contact: MEDICAL.LICENSE Change

VFC Shipping Contact Info

Same as Service Site Contact Info
 Contact: MOPARTHY.NAG Change
 2nd Contact: MOPARTHY.VENKAT Change

[+ Clinics](#) ←

STEP 5

Click on the icon next to Clinics (the **plus sign** will turn into a **minus sign**, as below).
 If there is a clinic linked to the service site, the drop-down will appear as such,

→ [- Clinics](#)

Name	External Id	Description
MV BREVARD CLINIC	01	TEST

However, if there are no Clinics linked to the service site, the drop-down will appear (as below), and you should proceed to the next step:

[+ Clinics](#)

Name	External Id	Description	Category
------	-------------	-------------	----------

ADDING CLINICS TO A SERVICE SITE

Step 6 (if applicable)

If there are no clinics linked to the desired service site, contact the Florida SHOTS Helpdesk. A Local Org Administrator (LOA) can make the request for a clinic to be added under the service site. The request *needs to be in writing* (i.e. email) and sent to flshots@flhealth.gov.

**Please include the following information in the request (only applicable to LOAs):

- Your **organization's login ID** and the **name of the service site** (how it appears in Florida SHOTS on the Site List page).
- The **name of the clinic** – the name of the facility you transferred vaccines to and/or are recording vaccines on behalf of.
- The **external ID** – this is used for uploading purposes through your EHR/EMR.
**Please follow the link to verify which [implementation specialist](#) to contact for your ID (toward bottom of web page).
- A short **description** – briefly inform us of the provider you are recording vaccines on behalf of (i.e. include their org ID if they have a Florida SHOTS account).
- The **category** that best describes the type of facility this clinic represents – this field includes a drop-down box that allows one of the following categories to be selected (please only pick one):
 - Corrections clinic
 - Drug rehab facility
 - Business/work site
 - Community center
 - Homeless shelter
 - Hurricane/disaster shelter
 - Long-term care facility
 - School clinic