

Documenting A COVID-19 Vaccine



Enrolled COVID-19 vaccine providers are required to report vaccination data in Florida SHOTS within 24 hours of administration. The documentation can either be electronically uploaded via an established connection with a compatible Electronic Health Record (EHR) software, manually entered in the Florida SHOTS patient record or uploaded via the available Florida SHOTS Excel Spreadsheet. This short guide will provide step-by-step instructions on how to enter a COVID-19 vaccine in the patient record and uploading a spreadsheet.

Documenting Vaccine in Patient Record

STEP 1

Log into Florida SHOTS.

STEP 2

Complete a Patient Search from the **"Patients"** Florida SHOTS menu to open or add the patient record.

The screenshot shows the Florida SHOTS Patient Search interface. On the left, a sidebar menu has the 'Patients' option highlighted with a red arrow. The main content area is titled 'Patient Search' and includes fields for 'Last Name', 'First Name', 'Date of Birth', and 'State ID'. There are also 'Search for Patient' and 'Reset Search Fields' buttons. A note at the bottom states 'Asterisk indicates a required field' and 'Driver's license barcode scanning'.

STEP 3

Select **"Vaccinations"** from the Florida SHOTS menu and click on the **"Add a Vaccination Record"** button.

The screenshot shows the Florida SHOTS Vaccination List interface. On the left, a sidebar menu has the 'Vaccinations' option highlighted with a red arrow. The main content area is titled 'Vaccination List' and displays a table of vaccination records. The table has columns for 'Antigen', 'Vaccine', 'Date', 'Dose', 'Age Yr-Mo', 'Total Mos', 'Provider/Person', 'Source', and 'Delete?'. A red arrow points to the 'Add a Vaccination Record' button at the bottom of the table.

Antigen	Vaccine	Date	Dose	Age Yr-Mo	Total Mos	Provider/Person	Source	Delete?
COVID-19	COVID-19 MODERNA	10/20/2021	1	69-d	702	BEACH MED GROUP	BEACH MED GROUP	<input type="checkbox"/>
			0	24/124	N	PPUUPLOAD		

STEP 4

In the “Add Vaccination Record” page you will need to complete all the following fields:

- **Vaccine Type:** Enter the type of COVID-19 vaccine the patient received.
- **Date Given:** Enter the date, or if vaccine was given today, enter “T” and the current date will automatically populate.
- **Injection Site:** Record the specific place on the body where an immunization is administered.
- **Injection Route:** Records the method used to administer the immunization.
- **Provider Org ID:** The name of the practice administering the vaccination defaults to your practice.
- **Provider Person ID:** Select the provider person ID of the staff administering the immunization.
- **Imm Service Site:** If your organization has multiple service sites, you may indicate which site administered the vaccination. If the vaccination being recorded is the most recent, and the service site selected differs from the service site on the “Patient Information” page, users will be asked whether or not to update the patient’s service site.
- **Funding Program:** Select COVID-19 effort from the drop-down menu.
- **Patient Insurance:** Specify the patient’s insurance coverage.
- **VIS Recipient:** Select the person receiving the Fact Sheet for this patient. “Other” may be selected and you may enter the name of the person receiving the form as well as that person’s relationship to the patient.
- **VIS Date:** Enter the date of the Fact Sheet provided for this vaccination. To view current VIS information, click on the hyperlink CDC Vaccine Information Statements (VIS) above “VIS Recipient” field.
- **Consent for Treatment Given by VIS Recipient:** When VIS information is recorded, this field is enabled and required. Leave the default value at “Yes” if the person receiving the VIS gave consent for treatment. If the person giving consent is not the same as the person that received the statements, local policy on documentation of consent for treatment should be used
- **Manufacturer, Lot Number & Expiration Date:** The vaccine information that was administered.
- **COVID-19 Risk Factors 1:** Please indicate the patient’s eligibility for this vaccination.

Remove the checkmark from “Add another vaccination record”.

Click on the “Next” button.

User: FATIMA AVILES

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

Vaccine Type: Vaccine Type Information

Injection Site:

Provider Org ID:

Imm Service Site:

Funding Program:

Patient Insurance:

Manufacturer: ☐ Include inactive

Lot Number:

NDC:

Expiration Date:

Vaccine Information Statements

CDC Vaccine Information Statements (VIS)

VIS Recipient: Type: VIS Date:

☒ Yes Consent for treatment given by VIS recipient

Special Conditions: 0

COVID-19 Risk Factors: 1

Select the item(s), if any, that are applicable to this vaccination.

- ☐ Select
- ☐ AGE 65+ (EXCLUDING LTCF)
- ☐ AGE-BASED ELIGIBILITY
- ☐ FIREFIGHTER
- ☐ Health care personnel
- ☐ LAW ENFORCEMENT
- ☐ LTCF Resident
- ☐ LTCF Staff
- ☐ PHYSICIAN ORDERED
- ☐ SCHOOL EMPLOYEE
- ☐ Unknown

☐ Add another vaccination record after "Next" button is clicked

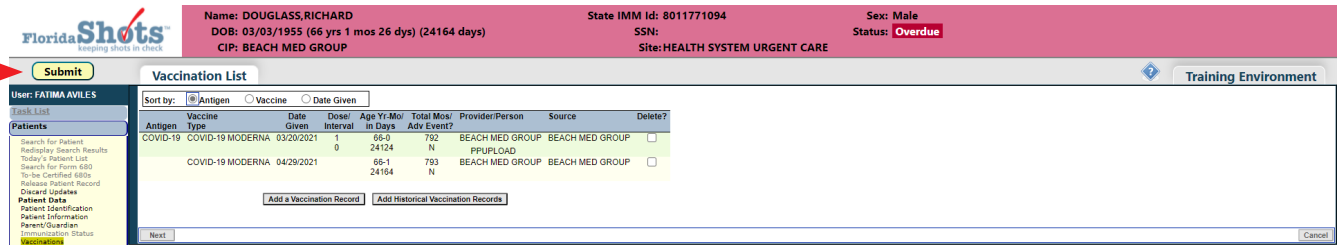
* Asterisk indicates a required field

Next

English (United States)
US keyboard

STEP 5

Click on **“Submit”** to save the vaccination record.



Florida Shots keeping shots in check

Name: DOUGLASS, RICHARD
DOB: 03/03/1955 (66 yrs 1 mos 26 dys) (24164 days)
CIP: BEACH MED GROUP

State IMM Id: 8011771094
SSN:
Site: HEALTH SYSTEM URGENT CARE

Sex: Male
Status: **Overdue**

Submit

Vaccination List

Sort by: ☒ Antigen ☐ Vaccine ☐ Date Given

Antigen	Vaccine Type	Date Given	Dose/Interval	Age Yr Mo/In Days	Total Mos/Adv Event?	Provider/Person	Source	Delete?
COVID-19	COVID-19 MODERNA	03/20/2021	1/0	66-0/24124	752/N	BEACH MED GROUP	BEACH MED GROUP	<input type="checkbox"/>
COVID-19	COVID-19 MODERNA	04/29/2021	0/0	66-1/24164	793/N	BEACH MED GROUP	BEACH MED GROUP	<input type="checkbox"/>

Add a Vaccination Record **Add Historical Vaccination Records**

Next Cancel

Documenting Historical Vaccine (Use the patient's COVID-19 Vaccination Record Card)**STEP 1**

Log into [Florida SHOTS](#).

STEP 2

Complete a Patient Search from the **“Patients”** Florida SHOTS menu to open or add the patient record.



Submit

Patient Search

User: FATIMA AVILES

Task List

Patients

Search for Patient
Redisplay Search Results
Today's Patient List
Search for Form 680
To-be Certified 680s
Release Patient Record
Discharge Updates
Patient Data
Patient Identification
Patient Information
Parent/Guardian
Immunization Status
Vaccinations
Adverse Events
Observations
Contact Attempts
Contraindications

Last Name: First Name: Date of Birth:

OR

State ID:

OR

Patient ID:

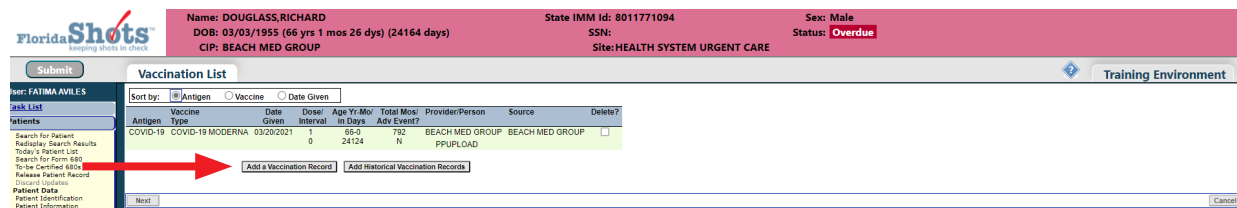
Search for Patient **Reset Search Fields**

* Asterisk indicates a required field

Driver's license barcode scanning

STEP 3

Select **“Vaccinations”** from the Florida SHOTS menu and click on the **“Add a Vaccination Record”** button.



Florida Shots keeping shots in check

Name: DOUGLASS, RICHARD
DOB: 03/03/1955 (66 yrs 1 mos 26 dys) (24164 days)
CIP: BEACH MED GROUP

State IMM Id: 8011771094
SSN:
Site: HEALTH SYSTEM URGENT CARE

Sex: Male
Status: **Overdue**

Submit

Vaccination List

Sort by: ☒ Antigen ☐ Vaccine ☐ Date Given

Antigen	Vaccine Type	Date Given	Dose/Interval	Age Yr Mo/In Days	Total Mos/Adv Event?	Provider/Person	Source	Delete?
COVID-19	COVID-19 MODERNA	03/20/2021	1/0	66-0/24124	752/N	BEACH MED GROUP	BEACH MED GROUP	<input type="checkbox"/>

Add a Vaccination Record **Add Historical Vaccination Records**

Next Cancel

STEP 4

In the “Add Vaccination Record” page you will need to complete the following fields:

- Vaccine Type: Enter the type of COVID-19 vaccine the patient received.
- Date Given: Enter the date the vaccine was given.
- Provider Org ID: The name of the practice administering the vaccination defaults to your practice, select “OTHER” from the drop-down menu.

Complete any other fields if you have the information.

Remove the checkmark from “Add another vaccination record”.

Click on the “Next” button.

FloridaShots keeping shots in check

Name: DOUGLASS, RICHARD
DOB: 03/03/1955 (66 yrs 2 mos 21 dys) (24189 days)
CIP: BEACH MED GROUP

State IMM Id: 8011771094
SSN:
Site: HEALTH SYSTEM URGENT CARE

Sex: Male
Status: **Overdue**

Add Vaccination Record

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

Vaccine Type: COVID-19 MODERNA Vaccine Type Information

Injection Site: -- Select --

Provider Org ID: OTHER

Manufacturer: MOD - MODERNA, TB, ZPC. ☐ Include inactive

Lot Number: 003821A

NDC: -- Select --

☒ Special Conditions: 0

☐ Add another vaccination record after "Next" button is clicked

* Asterisk indicates a required field

Return to Vaccination List

Cancel

STEP 5

Click on “Submit” to save the vaccination record.

FloridaShots keeping shots in check

Name: DOUGLASS, RICHARD
DOB: 03/03/1955 (66 yrs 2 mos 21 dys) (24189 days)
CIP: BEACH MED GROUP

State IMM Id: 8011771094
SSN:
Site: HEALTH SYSTEM URGENT CARE

Sex: Male
Status: **Overdue**

Vaccination List

Sort by: ☒ Antigen ☐ Vaccine ☐ Date Given

Antigen	Vaccine Type	Date Given	Dose/Interval	Age Yr./Mo./In Days	Total Mos/Adv Event?	Provider/Person	Source	Delete?
COVID-19	COVID-19 MODERNA	03/25/2021	1	66-0	192	BEACH MED GROUP	BEACH MED GROUP	<input type="checkbox"/>
	COVID-19 MODERNA	04/25/2021	66-1	793	N	PPUPLOAD	BEACH MED GROUP	<input type="checkbox"/>

Add a Vaccination Record Add Historical Vaccination Records

Next

Cancel

Uploading Spreadsheet

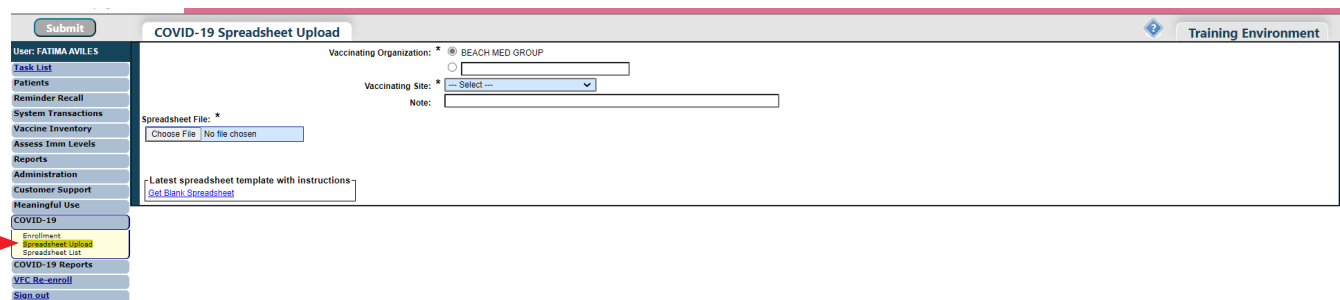
Download the latest version of the spreadsheet either from the Florida SHOTS login page or from the Florida SHOTS menu option **“COVID-19”** and select **“Spreadsheet Upload”**. Add the patient and vaccine information on the spreadsheet as indicated on the **“Instructions”** tab and save on your computer.

STEP 1

Log into [Florida SHOTS](#).

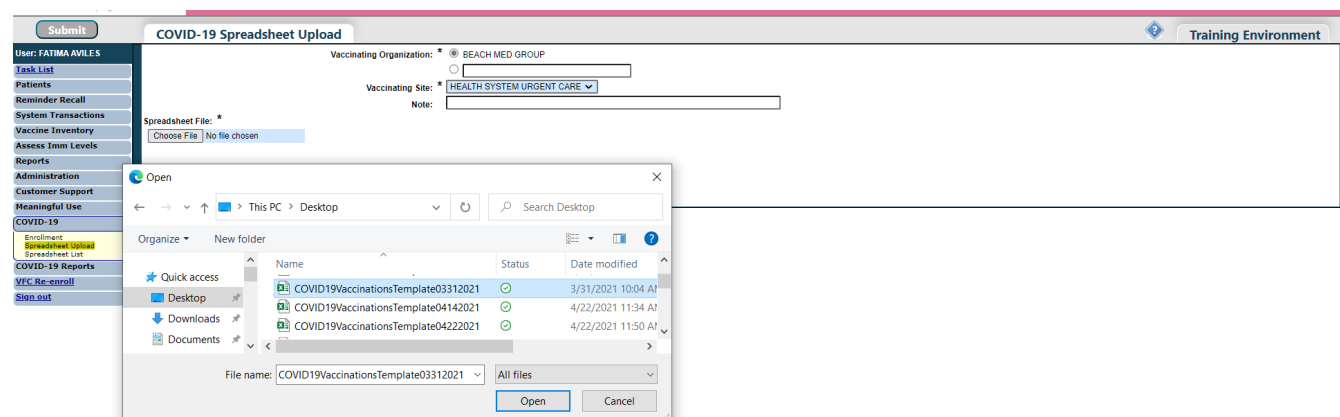
STEP 2

Select **“COVID-19”** from the Florida SHOTS menu and click on **“Spreadsheet Upload”**.



STEP 3

On the “COVID-19 Spreadsheet Upload” page, select the “Vaccination Site” that you are uploading the spreadsheet for. Click on the **“Choose File”** button to select the spreadsheet from your computer.



Name	Status	Date modified
COVID19VaccinationsTemplate03312021	✓	3/31/2021 10:04 AM
COVID19VaccinationsTemplate04142021	✓	4/22/2021 11:34 AM
COVID19VaccinationsTemplate04222021	✓	4/22/2021 11:50 AM

STEP 4

Click on “Upload Spreadsheet File” button to upload the spreadsheet.

Florida Shots
Lending Shots in Shots

Name: DOUGLASS, RICHARD
DOB: 03/03/1955 (66 yrs 1 mos 26 dys) (24164 days)
CIP: BEACH MED GROUP

State IMM ID: 8011771094
SSN:
Site: HEALTH SYSTEM URGENT CARE

Sex: Male
Status: **Overdue**

COVID-19 Spreadsheet Upload

Vaccinating Organization: * ☒ BEACH MED GROUP
Vaccinating Site: *
Note:

Spreadsheet File: *
 COVID19vs...142021.xlsx

 Latest spreadsheet template with instructions

Submit

Training Environment

User: FATIMA AVILES
Task List
Patients
Reminder Recall
System Transactions
Vaccine Inventory
Assess Imm Levels
Reports
Administration
Customer Support
Meaningful Use

STEP 5

You will be directed to the “Spreadsheet List” page where you view all previous uploaded spreadsheets and monitor the status of the upload. The “Upload successful?” column will change to “Complete” once the spreadsheet is successfully uploaded.

COVID-19 Spreadsheet List

Spreadsheet status: ☐ Only not yet accepted ☐ Only accepted ☒ Either

Uploaded From Date: Thru:
Vaccinating Org: Vaccinating Site:
Accepted From Date: Thru:
Uploader Person: Accepting Person:
User Note:

Unloaded At	Vaccinating Org	User Note	Unloading Staff	Upload Successful?	Has Errors?
04/29/2021 16:04:11	BEACH MED GROUP	AVILES, FATIMA	AVILES, FATIMA	In Progress	<input type="button" value="Download"/> This spreadsheet cannot be deleted because its patient updates are in progress.
04/29/2021 16:04:11	HEALTH SYSTEM URGENT CARE	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>
04/29/2021 15:53:04	BEACH MED GROUP	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>
04/22/2021 12:49:55	BEACH MED GROUP	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>
04/22/2021 12:51:59	HEALTH SYSTEM URGENT CARE	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>
04/14/2021 13:16:39	BEACH MED GROUP	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>
04/14/2021 13:18:33	HEALTH SYSTEM URGENT CARE	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>

Submit

Training Environment

User: FATIMA AVILES
Task List
Patients
Reminder Recall
System Transactions
Vaccine Inventory
Assess Imm Levels
Reports
Administration
Customer Support
Meaningful Use
COVID-19
Enrollment
Spreadsheet Upload
Spreadsheet List
COVID-19 Reports
VFC Re-enroll
Sign out

Spreadsheet Errors

If the spreadsheet contains errors, the “Upload Successful?” column will indicate Not Yet and the “Has Errors” column will indicate Yes.

COVID-19 Spreadsheet List

Spreadsheet status: ☐ Only not yet accepted ☐ Only accepted ☒ Either

Uploaded From Date: Thru:
Vaccinating Org: Vaccinating Site:
Accepted From Date: Thru:
Uploader Person: Accepting Person:
User Note:

Unloaded At	Vaccinating Org	User Note	Unloading Staff	Upload Successful?	Has Errors?
04/29/2021 16:10:50	BEACH MED GROUP	AVILES, FATIMA	AVILES, FATIMA	Not Yet	Yes <input type="button" value="Download"/> <input type="button" value="Delete"/>
04/29/2021 16:09:25	BEACH MED GROUP	AVILES, FATIMA	AVILES, FATIMA	In Progress	<input type="button" value="Download"/> This spreadsheet cannot be deleted because its patient updates are in progress.
04/22/2021 12:49:55	BEACH MED GROUP	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>
04/22/2021 12:51:59	HEALTH SYSTEM URGENT CARE	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>
04/14/2021 13:16:39	BEACH MED GROUP	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>
04/14/2021 13:18:33	HEALTH SYSTEM URGENT CARE	AVILES, FATIMA	AVILES, FATIMA	Complete	<input type="button" value="Download"/> <input type="button" value="Delete"/>

Submit

Training Environment

User: FATIMA AVILES
Task List
Patients
Reminder Recall
System Transactions
Vaccine Inventory
Assess Imm Levels
Reports
Administration
Customer Support
Meaningful Use
COVID-19
Enrollment
Spreadsheet Upload
Spreadsheet List
COVID-19 Reports
VFC Re-enroll
Sign out

Click on the spreadsheet line to view error(s) which will be highlighted in pink.

COVID-19 Spreadsheet Edit

Format: COVID-19

Note: Uploading Org: BEACH MED GROUP Vaccinating Org: BEACH MED GROUP
 Uploading Site: HEALTH SYSTEM URGENT CARE by: AVILES, FATIMA
 Uploaded: 04/29/2021 15:53:04 File type: .xlsx Download

Vaccination Record Creation: Not Yet

Error Locations: Create patient records
 Next Prior Submit (click to save your changes to rows below) Cancel

Row Nbr	Last Name	First Name	DOB	Sex	Street Address	City	St	Zipcode	County of Residence	Phone Nbr	Race	Ethnicity	Date Given	Vaccine	Mfg	Lot Number	NDC	Expiration Date	VIS Pub Date	Inj Site	Inj Rte	Eligibility	RiskFactors	Given By Name	Credentials	General Error
2	DUNLAVY	RICHARD	01/16/1955	MALE	1216 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	BLACK/AFRICAN AMERICAN	Y	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS071	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
3	DUNNICK	RICHARD	12/24/1954	M	1215 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	BLACK/AFRICAN AMERICAN	N	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS071	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
4	DOMBROWSKI	ROBERT	05/10/1955	M	1214 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	BLACK/AFRICAN AMERICAN	N	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS073	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
5	DOXIE	RICHARD	02/05/1955	M	1213 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	WHITE	N	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS071	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
6	DUNNICK	RICHARD	12/10/1954	M	1212 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	VIETNAMESE	N	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS071	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
7	DWECK	RICHARD	12/03/1954	M	1211 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	WHITE	Y	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS073	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete

Click on the error to make the correction and click on **“Change”** button.

Correction Row Nbr: 2

Last Name: * DUNLAVY Phone Number: (850)555-1111 Vaccine Exp. Date: * 04/30/2021

First Name: * RICHARD Race: Black/African American VIS Pub Date: 04/01/2021

DOB: * 01/16/1955 Ethnicity: HISPANIC OR HAITIAN ORIGIN Injection Site: LA-LEFT ARM

Sex: * MALE Date Given: * 04/22/2021 Injection Route: ID-INTRADERMAL

Street Address: * 1216 FIRST ST Vaccine: * COVID-19 MODERNA Eligibility: * FLSHOTS071

City: * TOWN Manufacturer: * MOD - MODERNA US, INC. Risk Factors: * Nbr selected: 1

State: * FL Lot Number: * 012L20A Given By Name: AVILES, FATIMA

Zip Code: * 33333 NDC: * 80777-0273-99 Credentials: MA

County of Resid.: * LEON

Change Cancel

* Asterisk indicates a required field

Click on **“Submit (click to save your changes to rows below)”** to save change and upload spreadsheet.

COVID-19 Spreadsheet Edit

Format: COVID-19

Note: Uploading Org: BEACH MED GROUP Vaccinating Org: BEACH MED GROUP
 Uploading Site: HEALTH SYSTEM URGENT CARE by: AVILES, FATIMA
 Uploaded: 04/29/2021 15:53:04 File type: .xlsx Download

Vaccination Record Creation: Not Yet

Error Locations: Create patient records
 Next Prior Submit (click to save your changes to rows below) Cancel

Row Nbr	Last Name	First Name	DOB	Sex	Street Address	City	St	Zipcode	County of Residence	Phone Nbr	Race	Ethnicity	Date Given	Vaccine	Mfg	Lot Number	NDC	Expiration Date	VIS Pub Date	Inj Site	Inj Rte	Eligibility	RiskFactors	Given By Name	Credentials	General Error
2	DUNLAVY	RICHARD	01/16/1955	M	1216 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	BLACK/AFRICAN AMERICAN	Y	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS071	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
3	DUNNICK	RICHARD	12/24/1954	M	1215 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	BLACK/AFRICAN AMERICAN	N	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS071	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
4	DOMBROWSKI	ROBERT	05/10/1955	M	1214 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	BLACK/AFRICAN AMERICAN	N	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS073	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
5	DOXIE	RICHARD	02/05/1955	M	1213 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	WHITE	N	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS071	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
6	DUNNICK	RICHARD	12/10/1954	M	1212 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	VIETNAMESE	N	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS071	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete
7	DWECK	RICHARD	12/03/1954	M	1211 FIRST ST	TOWN	FL	33333	LEON	(850)555-1111	WHITE	Y	04/22/2021	COVID-19 MODERNA	MOD	012L20A	80777-0273-99	04/30/2021	04/01/2021	LA	ID	FLSHOTS073	AGE-BASED ELIGIBILITY	AVILES, MA	FATIMA	Delete

You will receive a notification that spreadsheet is in progress.

COVID-19 Spreadsheet Edit

Creating shot records is in progress.

When it finishes the "Vaccination Record Creation" status will no longer show as 'In Progress'.

☐ [Spreadsheet Information](#)

[Go to Spreadsheet List](#)

Format: COVID-19

Note:

Uploading Org: BEACH MED GROUP

Vaccinating Org: BEACH MED GROUP

Uploading Site: HEALTH SYSTEM URGENT CARE

Uploaded: 04/29/2021 16:10:50

by: AVILES, FATIMA

File type: .xlsx

[Download](#)

Vaccination Record Creation: In Progress

HELP DESK

FREE TECHNICAL SUPPORT:

877-888-7468 (SHOT)

MONDAY – FRIDAY, 8 A.M. TO 5 P.M. EASTERN

INCLUDING:

- Merging duplicate patient records
- Adding account administrators
- Unlocking Florida SHOTS accounts
- Questions about any Florida SHOTS features
- Requesting Florida SHOTS materials