

**Florida SHOTS™**

# **QUICK TIPS**

## **FOR FULL ACCESS ACCOUNTS IN COUNTY HEALTH DEPARTMENTS**

### **Contact Information**

**[www.flshots.com](http://www.flshots.com)**

**Free help desk:**

877-888-SHOT (7468)

Monday – Friday, 8 A.M. to 5 P.M. Eastern



## Quick Content Finder

LOGGING IN	1
------------	---

FORGOTTEN PASSWORD	2
--------------------	---

UNLOCKING AND RESETTING USERS (ADMINISTRATIVE USERS ONLY)	4
---	---

ADDING AND REMOVING PERSONNEL (ADMINISTRATIVE USERS ONLY)	5
---	---

FUNCTIONS AVAILABLE ON THE MAIN MENU	8
--------------------------------------	---

ENTERING VACCINATIONS	9
-----------------------	---

DH FORM 680	13
-------------	----



# 1. LOGGING IN

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## Login Screen

- URL:  
<https://www.flshots.com/flshots/signin.csp>
- For quick access, add this URL to your “Favorites”
- Passwords must be entered *exactly* as they were created.
- Below your login information, you will see the Florida SHOTS “**Current Announcements.**” It is important that you read these in order to stay current with all Florida SHOTS updates and system releases.



## Florida SHOTS Login

Organization Login ID \*

User Name \*

Password \*

Login

[Browser Requirements](#)

[Need Password Assistance?](#)

## How to Log In

- **Organization Login ID (OLI):** The OLI is a unique identifier assigned to your organization by the Florida Department of Health (DOH). The OLI is not case sensitive.
  - **User Name:** The user name is a unique identifier that informs the system of the user's identity within their organization. DOH assigns the Local Org Administrator's user name, and then that administrator may add additional users. (Florida SHOTS will automatically create these user names, or the Local Org Administrator can create one.) The user name is not case sensitive.
  - **Password:** When your account is activated, DOH, or your Local Org Administrator, will provide you with a password to access the system.
  - For security purposes, you will be required to change this password upon logging in for the first time.
  - Passwords are case-sensitive, at least seven characters long, and must be kept confidential. They should be changed once every 90 days.
  - If you are unable to log in after entering your password twice, use the “**Need Password Assistance?**” function to reset it.
- After three failed login attempts, the account will be locked, and an administrator will need to unlock it. The local administrator will be able to unlock the individual accounts of staff members. However, if the local administrator is unavailable, or if the user is locked out, that person will need to reset their password or call the Florida SHOTS help desk directly to have their account unlocked.

## 2. FORGOTTEN PASSWORD

### Setting Security Questions

Florida SHOTS allows you to reset your password by answering user-selected security questions. If you have not selected security questions and answers, you will be prompted to do so when you log into the system. To change these questions and answers later, select the **“Security Question Edit”** link from the **“Administration”** menu.

The screenshot shows the 'Security Question Edit' form. On the left is a navigation menu with a 'Submit' button at the top. The menu items are: Task List, Patients, Reminder Recall, System Transactions, Vaccine Inventory, Assess Imm Levels, Reports, Administration (highlighted), Customer Support, VFC Re-enroll, Meaningful Use, and Sign out. Under 'Administration', the options are: Change Password, Security Question Edit (highlighted), Organization Edit, Personnel List, and Service Site List. The main form area has a 'Submit' button at the top left. It displays the user's information: Username: FARRARKX and Current Password: [redacted]. There are two security questions. For each, a dropdown menu is open showing five options: 'What is your city of birth?', 'What is your favorite pet's name?', 'What is your mother's maiden name?', 'What was the last high school you attended?', and 'What was the make of your first car?'. The first question has 'What is your mother's maiden name?' selected. The answer field for the first question contains five dots and a 'Show answer' checkbox. The second question also has 'What is your mother's maiden name?' selected, with its answer field containing four dots and a 'Show answer' checkbox. A note at the bottom states '\* Asterisk indicates a required field'. At the very bottom are 'Submit' and 'Cancel' buttons.

Once questions and answers are on file, if you forget your password, click the **“Need Password Assistance?”** link on the login screen.

### Florida SHOTS Login

The screenshot shows the login interface. It has three input fields: 'Organization Login ID \*' (containing the letter 'I'), 'User Name \*', and 'Password \*'. To the right of the password field is a blue 'Login' button. Below the password field is a blue link for 'Browser Requirements'. At the bottom right is a blue link for 'Need Password Assistance?', which is circled in red.

## 2. FORGOTTEN PASSWORD (cont.)

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### Security Prompts

You will be prompted to enter your Organization Login ID, User Name, and answer your security questions. If the questions are answered correctly, you will be allowed to reset your password. If the questions are not answered correctly after three attempts, your account will be locked and your Local Org Administrator, or the Florida SHOTS help desk, will need to unlock the account.



The screenshot shows the 'Forgot Your Password?' page of the Florida Shots system. At the top is a header with the 'Florida Shots' logo and the tagline 'keeping shots in check', alongside a photo of a child and an adult. The main content area has the heading 'Forgot Your Password?' followed by instructions: 'To reset your password enter your organization's login id and and your user name.', 'When you click the Submit button your security questions will be displayed.', and 'If you provide the correct answers to the security questions you will be allowed to enter a new password.' Below this are two input fields: 'Organization LoginID \*' and 'User Name: \*'. At the bottom are 'Submit' and 'Back' buttons, and a copyright notice 'Copyright ©2003 State of Florida'.

**Florida Shots**  
keeping shots in check

**Forgot Your Password?**

To reset your password enter your organization's login id and and your user name.

When you click the Submit button your security questions will be displayed.

If you provide the correct answers to the security questions you will be allowed to enter a new password.

Organization LoginID \*

User Name: \*

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### 3. UNLOCKING AND RESETTING USERS (ADMINISTRATIVE USERS ONLY)

Occasionally, a user may be locked out or their password may expire. Accounts can become locked after invalid login information is entered three times, or if the user hasn't changed their password in over 90 days. Local Org Administrators may unlock these accounts through the **"Personnel Maintenance"** screen of the affected user(s). To get to a particular user's maintenance screen, simply click on the row with the user's name on the **"Personnel List"** screen, found in the **"Administration"** submenu. If a user is locked out, the **"Account Locked"** box will be checked and must be unchecked prior to any changes.

The screenshot shows the 'Personnel Maintenance' form for user 'PADINDEX'. The form includes fields for System User ID, System User Start Date, System Password, Authorization, Password Expiration, System User End Date, Confirm Password, Roles, and Selected Roles. The 'Account Locked' checkbox is checked and circled in red. The 'Submit' button is at the bottom left, and the 'Return to Personnel Listing' button is at the bottom center.

A user's password can be reset at any time by entering, and then confirming, a new password. Changing a password will automatically renew its expiration date for 90 more days. After any changes are made, the Local Org Administrator must click the **"Submit"** button to save the new information. The administrator can then verify that the changes have been made by checking the **"Personnel List"** page again.

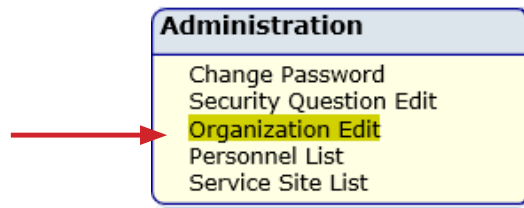
If a password has been expired for more than 60 days, the system automatically changes the user's status to inactive. To reactivate the user, go to **"Personnel List"** and place a check mark in the **"Inactive"** box and click **"Display."** Click on the personnel record, delete the end date for the user you are reactivating, and assign a new password. Select the box at the bottom left of the screen, which states **"User must change password at next login"**, so that the user will be able to select their own password when they next log in to Florida SHOTS.

If you do not know who your Local Organization Administrator is, please click on **"Customer Support"** in the menu and find the **"Contacts"** link. This provides users with the Local Organization Administrator, as well as contact information for the Florida SHOTS Team.

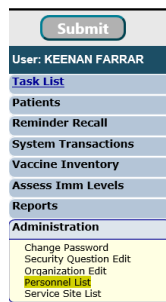
## 4. ADDING AND REMOVING PERSONNEL (ADMINISTRATIVE USERS ONLY)

### Edit Contact Information

Local Org Administrators can edit contact information on the **“Enrolled Organization Maintenance”** page by choosing **“Organization Edit”** under **“Administration”** in the sidebar menu. If any other information is incorrect, please send an email to the Florida SHOTS help desk ([flshots@flhealth.gov](mailto:flshots@flhealth.gov)).



### Adding New Users



### Add New Person

The **“Add New Person”** button within the **“Personnel List”** screen takes administrators to the **“Personnel Maintenance”** screen for creating a new system user. There, administrators can enter several key pieces of information regarding the new user they are adding. The Local Org Administrator must have the user's start date prior to creating their profile in the system. End dates are not required, but should be added when a user leaves or no longer requires access to Florida SHOTS. The system will only accept an end date that is equal to, or less than, the password expiration date.

POLK CHD

Add Authorized User/Personnel Information  
Account Status: Active  
Florida SHOTS is a confidential system. Only the name of a person is to be entered.

Last Name: \* [Text Field] First Name: \* [Text Field] Middle Name: [Text Field]  
Prefix: -- select -- Title: TEST  
Email Address: [Text Field] National Provider ID: [Text Field]  
Specialty: -- select -- Other (specify): [Text Field] Medicaid Number: [Text Field]

Medical License Data  
Prefix: -- select -- Number: [Text Field] Medical Assistant: ☐

Florida SHOTS Applicant: ☐ Florida SHOTS Contact: ☐  
Start Date: \* 03/28/2018 End Date: [Text Field]  
Immunization Provider: \* No [Text Field] Provider Person ID: [Text Field] (Displays as Provider ID for adverse events and shots given)  
Certify Form 680: \* No [Text Field] Medical professional is authorized to e-sign a Form 680  
Sign Form 681: \* No [Text Field] CHD Administrator is authorized to e-sign a Form 681  
Work Location: -- Select -- Site where the staff member usually works  
System User: ☒ (Check the box if the Staff member will be signing in to Florida SHOTS)

## 4. ADDING AND REMOVING PERSONNEL (cont.)

### Adding New Users cont.

Users who administer the vaccine(s) to the patients should have a “Yes” in the **Immunization Provider** box. Users who do not provide immunizations should have a “No.” Any user who is, by Florida statutes, allowed to sign and certify the DH Form 680 should have a “Yes” in the **Certify Form 680** box with complete Medical License Data. Users who cannot sign Form 680s should have a “No” in that box. To determine who can certify the DH Form 680, please see the “DH680 FAQs” in the Training Guide section under “Provider Training” on [flshotsusers.com](http://flshotsusers.com). The **Provider Person ID** is generated by the system for immunization providers only. This unique ID can be changed by your Local Organization Administrator. The **System User** box should only be checked for users who require access to Florida SHOTS. If the box is left unchecked, the user will not be able to log into Florida SHOTS, but will appear on your organization’s list of immunization providers.

Add Authorized User/Personnel Information  
Account Status: Active  
Florida SHOTS is a confidential system. Only the name of a person is to be entered.

Last Name: * SHOTS		First Name: * FL	Middle Name:
Prefix: -- select --		Title:	
Email Address:		National Provider ID:	
Specialty: -- select --		Other (specify):	Medicaid Number:

Medical License Data

Prefix: -- select --      Number:      Medical Assistant: ☐

Florida SHOTS Applicant: <input type="checkbox"/>	Florida SHOTS Contact: <input type="checkbox"/>
Start Date: * 03/28/2018	End Date:
Immunization Provider: * Yes	Provider Person ID: * SHOTSF (Displays as Provider ID for adverse events and shots given)
Certify Form 680: * Yes	Medical professional is authorized to e-sign a Form 680
Sign Form 681: * Yes	CHD Administrator is authorized to e-sign a Form 681
Work Location: -- Select --	Site where the staff member usually works
System User: <input checked="" type="checkbox"/> (Check the box if the Staff member will be signing in to Florida SHOTS)	

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System User ID: * SHOTSFX	<b>Only for Staff who sign in to Florida SHOTS</b>	
System User Start Date: 03/28/2018	Password Expiration: * 06/26/2018	
System Password: *	System User End Date:	(Login disabled as of this date)
Authorization: * Full Access	Confirm Password: * *****	Account Locked: <input type="checkbox"/>
	Roles: * Local Org Inventory Only Local Org Staff Org View Only Schedule Override	
	Selected Roles: Org View Only	
Create Certified Form 680: * No	Is authorized to create a Certified (e-signed) Form 680 in Florida SHOTS	
Create Form 681: * No	Is authorized to create an (e-signed) Form 681 in Florida SHOTS	
<input type="checkbox"/> User must change password at next login <input type="checkbox"/> Florida SHOTS training acknowledged		

\* Asterisk indicates a required field



## 4. ADDING AND REMOVING PERSONNEL (cont.)

### Adding New Users cont.

Users requiring access to Florida SHOTS must have certain information included in their user account. **System User ID** is generated by the system, but can be changed by the administrator. **Password Expiration** is also generated by the system each time a new password is created. **System Password** must initially be set by the administrator or the Florida SHOTS help desk, and will need to be entered again in the **Confirm Password** box. **Authorization** must be set to “Full Access” for the user to have access to Florida SHOTS. **Roles** will be determined by the Local Org Administrator, but the majority of users are set as “**Local Org Staff**.” Users who are authorized to create (Note: This is different from “Certify.”) a certified Form 680 must have “**Yes**” selected in the box for **Create Certified Form 680**. If user is not authorized to “create” the DH Form 680, leave this box set to “**No**”.

When a new user signs into Florida SHOTS, they will see a task in the “**User Task List**” to acknowledge training. From there, they can link to the training and resources page within Florida SHOTS and check the box to acknowledge training. Administrators may also check the box next to Florida SHOTS training acknowledged within the personnel record.

The screenshot shows a web form for adding a new user. The form is divided into several sections. On the left, there are fields for 'System User ID' (with a blue box containing 'SHOTFXX'), 'System User Start Date' (04/04/2018), 'System Password' (with a blue box), and 'Authorization' (a dropdown menu set to 'Full Access'). Below these are checkboxes for 'Create Certified' (set to 'Yes') and 'Form 680' (set to 'Yes'), each with a description of what they authorize. At the bottom left, there are checkboxes for 'User must change password at next login' and 'Florida SHOTS training acknowledged'. On the right, there are fields for 'Password Expiration' (07/03/2018), 'System User End Date' (with a note '(Login disabled as of this date)'), 'Confirm Password' (with a blue box containing '\*\*\*\*\*'), and 'Roles' (a dropdown menu set to 'Local Org Staff'). Below the roles dropdown is a 'Selected Roles' section showing 'Local Org Staff'. At the top right, there is a blue header 'Only for Staff who sign in to Florida SHOTS'. At the bottom right, there is a 'Cancel' button. At the bottom left, there is a 'Submit' button. At the bottom center, there is a 'Return to Personnel Listing' button. A note at the bottom left states '\* Asterisk indicates a required field'.

System User ID: \* SHOTFXX

System User Start Date: 04/04/2018

System Password: \*

Authorization: Full Access

Create Certified: Yes Is authorized to create a Certified (e-signed) Form 680 in Florida SHOTS

Form 680: \* Yes Is authorized to create an (e-signed) Form 681 in Florida SHOTS

\* Asterisk indicates a required field

Only for Staff who sign in to Florida SHOTS

Password Expiration: \* 07/03/2018

System User End Date: (Login disabled as of this date)

Confirm Password: \* \*\*\*\*\*

Roles: \* Local Org Inventory Only  
Local Org Staff  
Org View Only  
Schedule Override

Selected Roles: Local Org Staff

Account Locked: ☐

☐ User must change password at next login ☐ Florida SHOTS training acknowledged

Submit Return to Personnel Listing Cancel

## 5. FUNCTIONS AVAILABLE ON THE MAIN MENU

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Use the menu on the left side of the screen to perform various functions including accessing patient records, reminder recall, data transactions, inventory, running multiple reports, administration of your account, and customer support.

### Menu Options

- **Submit:** IMPORTANT—This button results in data being permanently stored on the central server. This button becomes active (yellow) once changes are made to a record, and allows users to save data after all required information is entered during the patient registration or update process.
- **Task List:** Information needing your attention in regards to your organization will be posted here. You will be notified upon logging in to Florida SHOTS if there are items in your task list.
- **Patients:** Search, complete, or update patient information (e.g., demographics, immunization, etc.), generate forms, and reports. When you are finished, always remember to release the patient record.
- **Reminder Recall:** Run reports and create labels for patients who are, or will be, due for immunizations within specified date ranges.
- **System Transactions:** Upload log reports for your organization and view transaction statistics to ensure data quality.
- **Vaccine Inventory:** VFC providers may view temperature logs, order vaccine through VFC, and make changes to inventory.
- **Assess Imm Levels:** Run reports used to evaluate immunization coverage levels for your organization.
- **Reports:** Create, view, print, and download various useful reports including Vaccine Utilization, Physical Inventory, and Immunization Statistics.
- **Administration:** Manually update your password or security questions/answers, and view organization details. For those users with administrative rights, you can add users within your facility, unlock passwords, manage user accounts, and update certain information about your organization.
- **Customer Support:** Find links to announcements, contacts, provide feedback, view the user guide, and access multiple training options.

**Note:** Every screen has a “Help Text” icon. Click on it to show or to hide helpful information about that page. For more information, click on the help text icon “?” at the top of the screen. You can click on it again to hide the text.

## 6. ENTERING VACCINATIONS

Once a patient is in Florida SHOTS, you are ready to add vaccinations to their record. Click the **“Vaccinations”** link on the left side menu. Choose one of these two options to add shots: **“Add a Vaccination Record”** or **“Add Historical Vaccination Records.”**

Submit

Vaccination List

User: DEASHJA PADIN

Task List

Patients

Search for Patient

Redisplay Search Results

Today's Patient List

Search for Form 680

To-be Certified 680s

Release Patient Record

Discard Updates

Patient Data

Patient Identification

Patient Information

Parent/Guardian

Immunization Status

Vaccinations

Adverse Events

Observations

Contact Attempts

Exclude From Recall

New Imm Status

HMS Demographics

Merge History

Form 680

Form 680

Create Pin

Forms

Form 687

Form 1478 (opt-out)

Reports

Immunization History

Patient Demographics

Religious Exemption

Religious Exemption

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?
DIPHTHERIA	DTAP	03/03/2001	1	0-2	2		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			0	61	N			
DIPHTHERIA	DTAP	04/02/2001	2	0-3	3		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			30	91	N			
DIPHTHERIA	DTAP	06/05/2001	3	0-5	5		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			64	155	N			
DIPHTHERIA	DTAP	03/05/2002	4	1-2	14		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			273	428	N			
DIPHTHERIA	DTAP	01/02/2005	5	4-0	48		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			1034	1462	N			
DIPHTHERIA	TDAP	02/01/2012	6	11-1	133		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			2586	4048	N			
HEP B	HEP B PED	01/01/2001	1	0-0	0		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			0	0	N			
HEP B	HEP B PED	02/02/2001	2	0-1	1		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			32	32	N			
HEP B	HEP B PED	01/01/2002	3	1-0	12		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			333	365	N			
HPV	HPV9	02/01/2012	1	11-1	133		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			0	4048	N			
HPV	HPV9	08/01/2012	2	11-7	139		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			182	4230	N			
MEASLES	MMR	02/01/2002	1	1-1	13		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			0	396	N			
MEASLES	MMR	02/01/2005	2	4-1	49		BUREAU OF IMMUNIZATION	<input type="checkbox"/>
			1096	1492	N			
MUMPS	MMR	02/01/2002	1	1-1	13		BUREAU OF IMMUNIZATION	<input type="checkbox"/>

## 6. ENTERING VACCINATIONS (cont.)

### Option 1: “Add a Vaccination Record”

#### (Required for VFC Participants)

All VFC administered vaccines must be entered into Florida SHOTS. To meet VFC requirements, fill in all of the required information (highlighted in blue) on the “Add a Vaccination Record” page. Following this method to enter VFC information will allow you to track your shot records and manage your VFC inventory. Select “Add a Vaccination Record.” The system will display the “Add Vaccination Record” page, equipped with pull-down lists that include all required vaccine information. To display the selections, simply click the down arrow next to each box.

**Add Vaccination Record** Training E

Vaccine Type: \* FLU QUAD PF [Vaccine Type Information](#)

Injection Site: \* --- Select ---

Provider Org ID: \* HILLSBOROUGH CHD

Imm Service Site: \* MAIN IMMUNIZATIONS

Program Component: \* 01-VFC VACCINE ☐ Refugee Health Service

VFC Eligibility: \* VFC ELIGIBLE-MEDICAID/MCO

Date Given: \* 04/06/2018

Injection Route: \* --- Select ---

Provider Person ID: \* --- Select ---

[Vaccine Information Statements](#)

[CDC Vaccine Information Statements \(VIS\)](#)

VIS Recipient: \* Mother: SMITH, SALLY

Type: INFLUENZA (INJECTED) VIS Date:

\* Yes ☐ Consent for treatment given by VIS recipient

☒ Reduce inventory-on-hand count

Mfg/Lot: \* SKB-GLAXOSMITHKLINE AE98B 06/30/2018

**Current inventory records for FLU QUAD PF**

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	Program Component	Mfg/Lot#	Expiration Date	Qty On Hand
MAIN IMMUNIZATIONS		SKB AE98B	06/30/2018	42
01-VFC VACCINE		19515-0912-52		

Select Hide

☐ **Special Conditions: 0**

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

--- Select ---

Hep A - Broward/Dade

Hurricane Maria Evacuee

## 6. ENTERING VACCINATIONS (cont.)

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- **Vaccine Type:** Enter the type of vaccine the patient received.
- **Date Given:** Enter the date, or if vaccine was given today, enter “T” and the current date will automatically populate.
- **VIS Date:** Enter the date of the Vaccine Information Statement provided for this vaccination. Some combination vaccines may require multiple VIS publication dates. If a single VIS statement exists for combination vaccines, you will see a button labeled “Other VIS Options,” which allows you to use either the separate statements or the combined statement. To view current and historical VIS information, click on the “CDC Vaccine Information Statements (VIS)” link found above “VIS Recipient,” or visit <https://www.cdc.gov/vaccines/hcp/vis/current-vis.html>.
- **VIS Recipient:** Select the person receiving the VIS statements for this patient. Mother, father, guardian and patient names will be available when they are already in the patient record. If “Other” is selected, you will enter the name of the person receiving the form, as well as that person’s relationship to the patient. If the relationship is mother, father, or guardian and the name entered is different than what is already on record, the user will be given the option to replace the current information with the new. This information will be included on the Form DH687, Clinic Record Card, along with whether or not this person also gave consent for treatment.
- **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 receiving the statements, local policy on documentation of consent for treatment should be used. This information will be included on the Form DH687, Clinic Record Card, along with the name of the VIS recipient.
- **Injection Site:** This field records the specific place on the body where an immunization is administered.
- **Injection Route:** This field records the method used to administer the immunization. When Intranasal or Oral is selected, an **Injection Site** is not required.
- **Provider Org. ID:** The name of the county health department administering the vaccination defaults to your CHD. (If you are entering historical shots not administered at your practice, you must select “Other” from the drop-down menu.)
- **Provider Person ID:** This is a required field identifying the immunization provider who administered the vaccination at that facility.
- **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.
- **Program Component:** Choose the program from either VFC, non-VFC, Hepatitis Program, or Refugee Health on the drop-down menu.

## 6. ENTERING VACCINATIONS (cont.)

- **VFC Eligibility:** This field will not be displayed unless a VFC pin number and start date are recorded for your organization by Florida SHOTS staff. Specify the patient's eligibility for receiving VFC vaccine as it applies to this vaccination.
- **Mfg/Lot:** Select the correct inventory to be adjusted.
- **Current Inventory Records:** Select the inventory from the box provided to be adjusted for the **"Qty On Hand"** to correspond with the vaccine given.
- **Special Conditions:** If this vaccination was administered following special guidance from the state, such as in response to a natural disaster or a special vaccination campaign for which existing vaccine is to be used, please indicate the reason for the vaccination via the **'Special Conditions'** selection box.
- **Add Another Vaccination:** This box will automatically be checked to add another vaccination to the record. Deselect it if you have no other vaccines to add for the patient.

### Option 2: "Add Historical Vaccination Records"

**(Recommended When Entering Historical Records for Patients Who Have Received Vaccines from Other Providers)**

We recommend that you use the option **"Add Historical Vaccination Records"** when you are entering shots for patients who've received vaccinations from other providers and those shots are not in Florida SHOTS. The **"Historical Shots"** screen lets you simultaneously enter several shots. Select a vaccine type, and then enter the dates in which that vaccine type was given. Additionally, you can select a date and then input all vaccines given on that date.

By clicking on the checkboxes next to the **"Date Given"** fields, you are indicating that the shot was provided by your organization. **(Do not click the checkbox if your organization did not give this particular shot).** Once you've entered all historical shots for a patient, or all fields have been filled on the page, click **"Next"** and you will be returned to the **"Vaccination List"** screen where you must click **"Submit"** or **"New Imm Status"** to evaluate and save the vaccinations.

If your organization is not listed as the patient's Current Immunization Provider (CIP), while the record is being saved, you will be asked if your organization should become the CIP. If your practice is, in fact, taking over as the immunization provider for this patient, click **"OK"**. If you do not wish to be the CIP, click **"Cancel"**.

## 7. DH FORM 680

### Printing 680s

Use the **“Form 680”** option located in the menu on the left to view and print the D.H. Form 680. Once this link is clicked, the Florida Certification of Immunization selection criteria screen appears. You must first choose the **“Type(s)”** of Form 680 to generate based on the patient's immunizations and the requirements. Next, select your location from the dropdown menu for IMM Service Site, along with the parent or guardian's name that will appear on the Form 680.

You have the option to print the Florida Certificate of Immunization, DH Form 680. Once this link is clicked, the Form 680 selection criteria appears.

### Electronically Certifying a Form 680

You may also create an electronically certified DH Form 680, if authorized by your Local Org Administrator. If you have this permission, select the appropriate name from the **“Physician or Authorized Signature”** drop-down list. The **“Create Current Form 680”** button will now appear as **“Create Certified (e-signed) Form 680.”** Click on it to proceed. Please note that the system will default to **“Create a Parent PIN”** to allow parents to access the Certified 680 from a personal computer. If you do not wish to issue a PIN, please uncheck the box. You may also choose to do this at a later time for the patient/parent by selecting **“Create PIN”** from the menu.

The DH Form 680 will appear. To complete the certification, scroll to the bottom of the screen where you can choose to certify and print the form, or certify the form only:

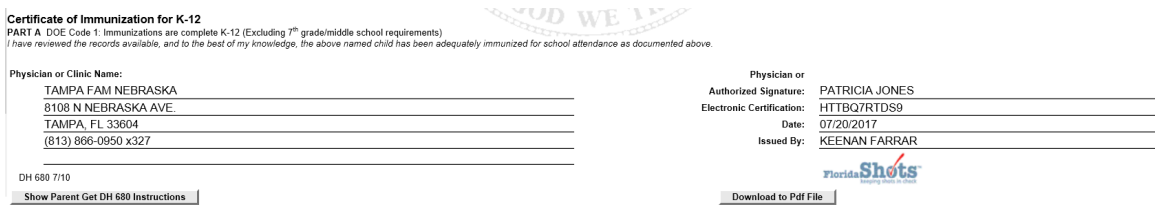
- **“Certify (e-sign) & Print”**
- **“Certify (e-sign) Only”**

## 7. DH FORM 680 (cont.)

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When one of the two buttons has been selected, the completed DH Form 680 will appear. The certified form will show the embedded authorized signature, as well as a unique electronic certification number and the Florida SHOTS logo. The DH Form 680 is not certified by Florida SHOTS without this special logo and number.

The organization's information will also be shown, as well as the name of the user who issued (created) the DH Form 680.



**Certificate of Immunization for K-12**  
PART A DOE Code 1: Immunizations are complete K-12 (Excluding 7<sup>th</sup> grade/middle school requirements)  
*I have reviewed the records available, and to the best of my knowledge, the above named child has been adequately immunized for school attendance as documented above.*

Physician or Clinic Name:	Physician or
TAMPA FAM NEBRASKA	Authorized Signature: PATRICIA JONES
8108 N NEBRASKA AVE.	Electronic Certification: HTTBQ7RTDS9
TAMPA, FL 33604	Date: 07/20/2017
(813) 866-0950 x327	Issued By: KEENAN FARRAR

DH 680 7/10

Show Parent Get DH 680 Instructions

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