

Changes to Add Vaccination Record for Private Providers

In an on-going effort to improve the functionality and usability of Florida SHOTS, we will be implementing a minor change to our “Add Vaccination Record” page.

If you are a private provider whose organization, or any of its sites, participates in one of our ordering efforts (such as VFC) you will now see a field labeled “Funding Program” when you open the “Add Vaccination Record” page. **(Fig. 1)** This drop-down menu allows private providers to more accurately document the source of the vaccine they use, whether that be from privately purchased vaccine or vaccine ordered through Florida SHOTS.

Fig. 1

The screenshot shows the 'ADD VACCINATION RECORD' form. The 'Funding Program' field is circled in red. The form includes the following fields: Vaccine Type (dropdown), Injection Site (dropdown), Provider Org ID (dropdown, showing JACKSON MEMORIAL HOSPITAL), Imm Service Site (dropdown), Funding Program (dropdown), Manufacturer (dropdown), Lot Number (text input), Date Given (text input), Injection Route (dropdown), Provider Person ID (dropdown), and Expiration Date (text input). There is a checkbox for 'Include inactive' and a checkbox for 'Add another vaccination record after "Next" button is clicked'. A legend indicates that an asterisk indicates a required field.

Until a Vaccine Type and/or Imm Service Site are chosen, all funding programs in which your organization participates will appear under the drop-down menu as they relate to the patient’s age. **Fig. 2**

Fig. 2

The screenshot shows the 'ADD VACCINATION RECORD' form with a patient header. The patient header includes: Name: ADAMS, JOHN; DOB: 01/30/2012 (5 yrs 2 mos 18 dys) (1904 days); CIP: JACKSON MEMORIAL HOSPITAL; Site: MAIN CLINIC. The 'Funding Program' dropdown is open, showing 'VFC/PED' selected. The form includes the same fields as in Fig. 1, with the 'Funding Program' field now populated with 'VFC/PED'. There is a checkbox for 'Include inactive' and a checkbox for 'Add another vaccination record after "Next" button is clicked'. A legend indicates that an asterisk indicates a required field.

If an Imm Service Site is chosen that does not participate in any of our ordering efforts, the “Funding Program” menu will not be shown. (Fig. 3)

Fig. 3

ADD VACCINATION RECORD Show Help Text

Vaccine Type: * --- Select --- [Vaccine Type Information](#) Date Given: *

Injection Site: --- Select --- Injection Route: --- Select ---

Provider Org ID: * JACKSON MEMORIAL HOSPITAL Provider Person ID: * --- Select ---

Imm Service Site: * OUTREACH CLINIC

Manufacturer: --- Select --- Include inactive Expiration Date:

Lot Number:

Add another vaccination record after "Next" button is clicked
* Asterisk indicates a required field

If the selected IMM Service Site **does** participate in one or more programs **AND** the vaccination being recorded is supplied by one of these programs **AND** the vaccination given was from your own privately purchased supply, leave the “Funding Program” selection at the default of “—Select—”.

Fig. 4

ADD VACCINATION RECORD Show Help Text

Vaccine Type: * DTAP [Vaccine Type Information](#) Date Given: *

Vaccine Information Statements

[CDC Vaccine Information Statements \(VIS\)](#) Type: MULTIPLE VACCINES *

VIS Recipient: * --- Select --- VIS Date:

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

Injection Site: --- Select --- Injection Route: --- Select ---

Provider Org ID: * JACKSON MEMORIAL HOSPITAL Provider Person ID: * --- Select ---

Imm Service Site: * MAIN CLINIC

Funding Program: --- Select ---

Manufacturer: --- Select --- Include inactive Expiration Date:

Lot Number:

Add another vaccination record after "Next" button is clicked
* Asterisk indicates a required field

If a "Funding Program" has been selected, the drop-down menu for VFC Eligibility will appear. Select the patient's VFC eligibility status and proceed to recording the shot as you normally would. (Fig. 5)

Fig. 5

ADD VACCINATION RECORD Show Help Text

Vaccine Type: * DTAP [Vaccine Type Information](#) Date Given: *

Vaccine Information Statements

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

VIS Recipient: * -- Select -- Other VIS Options

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

Injection Site: -- Select -- Injection Route: -- Select --

Provider Org ID: * JACKSON MEMORIAL HOSPITAL Provider Person ID: * -- Select --

Imm Service Site: * MAIN CLINIC

Funding Program: VFC/PED

VFC Eligibility: * -- Select --

PRIVATELY INSURED Include inactive

VFC ELIGIBLE-AMERICAN INDIAN/ALASKAN NATIVE

VFC ELIGIBLE-MEDICAID/MCO

VFC ELIGIBLE-UNDERINSURED

VFC ELIGIBLE-UNINSURED

Lot Number: Expiration Date:

Add another vaccination record after "Next" button is clicked

* Asterisk indicates a required field

Next Cancel

Reminder: If the vaccination was from privately purchased vaccine, **do not** choose VFC/Peds and then enter "Private Insurance" in the VFC Eligibility category, as this pertains to VFC vaccine **only** (Fig. 6).

Fig. 6

ADD VACCINATION RECORD Show Help Text

Vaccine Type: * MMR [Vaccine Type Information](#) Date Given: *

Vaccine Information Statements

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

VIS Recipient: * -- Select --

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

Injection Site: -- Select -- Injection Route: -- Select --

Provider Org ID: * JACKSON MEMORIAL HOSPITAL Provider Person ID: * -- Select --

Imm Service Site: * MAIN CLINIC

Funding Program: VFC/PED

VFC Eligibility: * PRIVATELY INSURED

Manufacturer: * -- Select -- Include inactive

Lot Number: Expiration Date:

Add another vaccination record after "Next" button is clicked

* Asterisk indicates a required field

Next Cancel