



SCHOOL AND CHILD CARE IMMUNIZATION MODULE TRAINING

GUIDE

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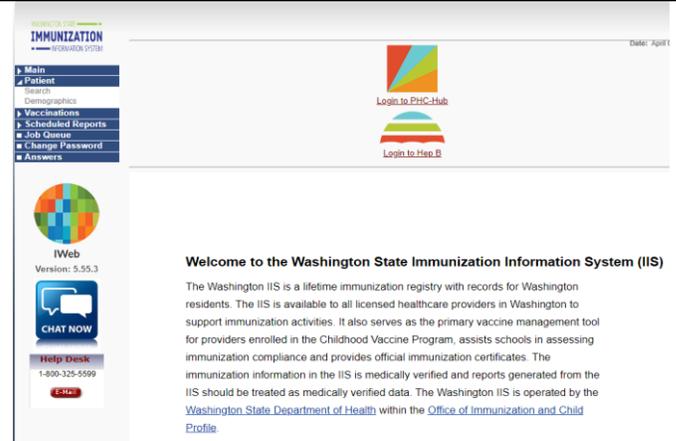
GUIDE

Log In

Watch our video tutorial for how to log into the School and Child Care Immunization Module and Secure Access Washington Here: [How to Log in - Video](#)

Go to: www.waiis.wa.gov

- Click **Login** under the main menu in the top left corner.
- The homepage for **Secure Access WA** or **SAW** will open. This is a security gateway used by the State of Washington. Current users access the IIS through Secure Access Washington by adding the IIS as a service. For more information about this process see the [FAQ here \(PDF\)](#).
- If you need assistance with logging into SAW please select the green, “**Get Help**” button located under the Washington State Seal.
- Enter your SAW Username and Password. (**This is a different username and password than your log in credentials for the School and Child Care Immunization Module.**)
- Click submit and you will be taken to the login page for the School and Child Care Immunization Module.
- Click the Access Now button to select the service WAIS.
- If prompted complete the multi-step authentication and continue to the WA IIS login page
- Enter your WA IIS **Username** and **Password**. If you forget your password, you can select *Forgot Password* and reset it via email. You can also contact the Helpdesk via phone or email.
- Click **Login** or press **Enter** on your keyboard.
- If your account has access to more than one school the system will take you to the *Choose School* screen.




LOGIN

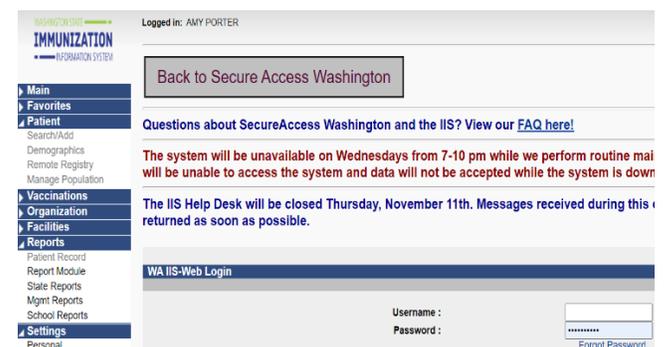
USERNAME

PASSWORD

Washington State Immunization Information System provided by Department of Health

The Washington Immunization Information System (WAIS) is a lifetime registry that keeps track of immunization records for people of all ages. The system is a secure, web-based tool for healthcare providers and schools.

[Contact WAIS help desk](#) [Remove from my list](#)



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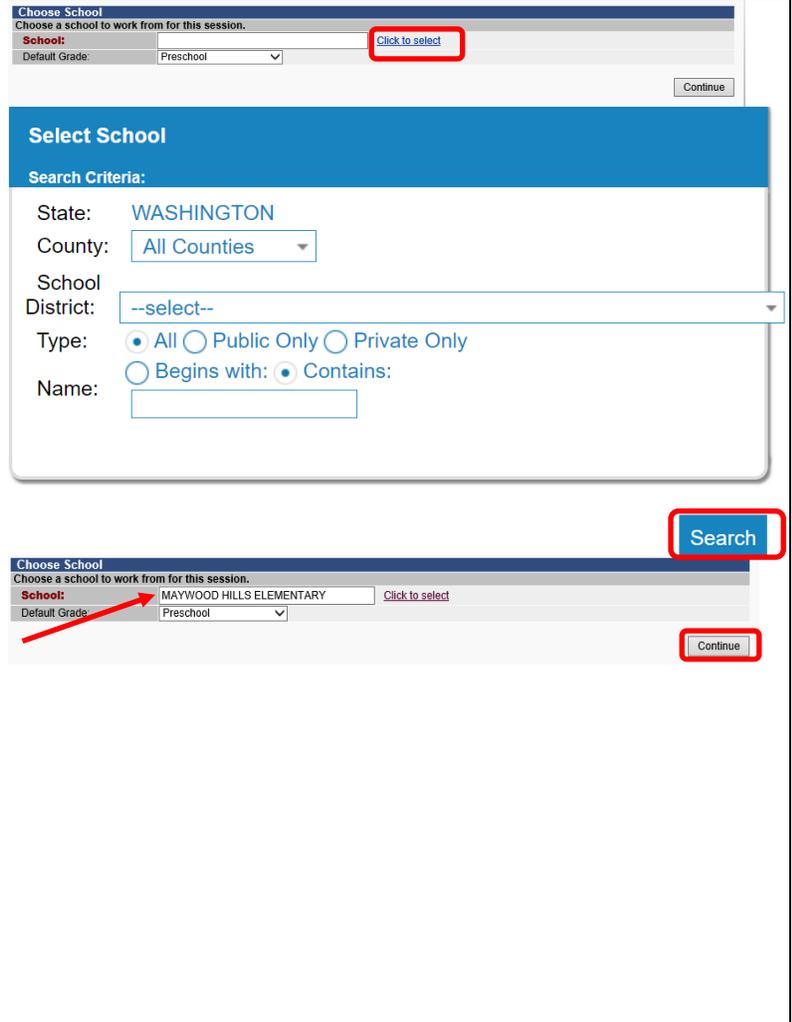
GUIDE

Choose a School

Watch our video tutorial for how to choose a school here: [How to Choose a School - Video](#)

If you have access to more than one school, you will need to select a school to continue.

- Click on **Click to Select** to open the *Select School* window.
- Click *Search* without adding any information about this school. This will display a list of all the schools in the district and is the most accurate way to find your school.
- Scroll down and you will see the schools you have access to listed. You may need to use the arrows at the bottom of the list to scroll through different pages to find the school you are looking for.
- From the list, click on the School Name to select that school.
- The *Select School* window closes, and the selected school is shown in the *school* field.
- Ignore the *Default Grade* selection/dropdown box.
- Click the **Continue** button.



The screenshot shows the 'Choose School' interface. At the top, there is a 'Choose School' header and a sub-header 'Choose a school to work from for this session.' Below this, there are fields for 'School:' (with a 'Click to select' button), 'Default Grade:' (set to 'Preschool'), and a 'Continue' button. A 'Select School' window is open, showing search criteria: State (WASHINGTON), County (All Counties), School (dropdown), District (--select--), Type (All, Public Only, Private Only), and Name (with radio buttons for 'Begins with' and 'Contains'). A 'Search' button is highlighted. Below the search criteria, there is a list of schools. The first school, 'MAYWOOD HILLS ELEMENTARY', is highlighted, and a red arrow points to it. A 'Continue' button is also highlighted.

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Search for a Student

Important Note Only look up students within your School or District. Employee records can only be viewed if the Employee has given written consent.

Watch our video tutorial: [How to Search for a Student and Report Duplicate Records - Video](#)

- Using the Navigation Menu, Click **Search/Add** under the Patient menu heading.
- Enter information in the Patient Search fields e.g., student name, birth date, SIIS IS, OSPI Student ID. The more information provided the shorter the search results.
- Enter the birth date as a string of numbers; for example, May 8, 2005, = 050805.
- Click **Search** or press **Enter** on your keyboard.
- Select the correct student's name by clicking once on the name. This opens **the Patient Demographic** screen.

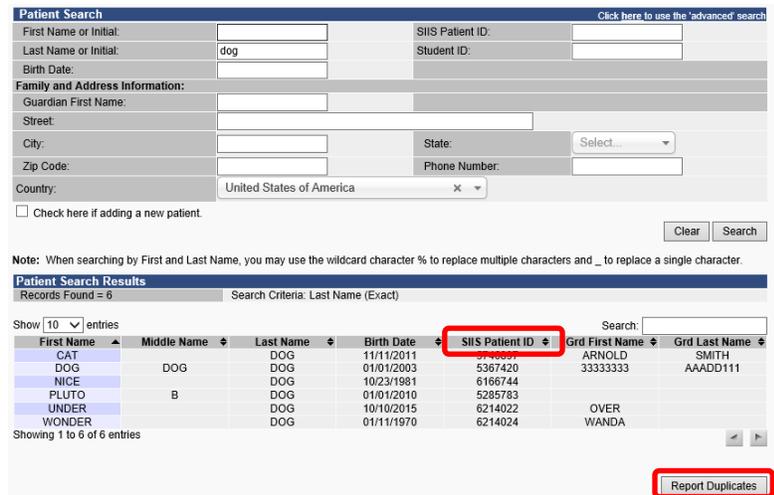
Reporting Duplicate Records

When searching for students in the IIS, you may see multiple records for the same student. If you see duplicate records, please report them in the IIS. The IIS Team reviews and resolves the duplicate records within a few business days. Reporting duplicate records helps to improve the accuracy of student vaccination records. For more information on reporting duplicate students please review [How to Report Duplicate Patients Quick Reference Guide](#).

Bad Merges

Sometimes profiles accidentally get merged by the system. This happens most commonly with siblings, especially twins, who have similar first names. If you suspect that accounts have been merged incorrectly, send us an email (schoolmodule@doh.wa.gov) with the SIIS ID that you want us to review.

Important Note - Please do not email student names or DOBs. If you need us to look at a specific student, please email the SIIS Patient ID.



Patient Search Click here to use the 'advanced' search

First Name or Initial: SIIS Patient ID:
 Last Name or Initial: Student ID:
 Birth Date:

Family and Address Information:

Guardian First Name:
 Street:
 City: State:
 Zip Code: Phone Number:
 Country:

Check here if adding a new patient. Clear Search

Note: When searching by First and Last Name, you may use the wildcard character % to replace multiple characters and _ to replace a single character.

Patient Search Results

Records Found = 6 Search Criteria: Last Name (Exact)

Show entries Search:

First Name	Middle Name	Last Name	Birth Date	SIIS Patient ID	Grid First Name	Grid Last Name
CAT		DOG	11/11/2011		ARNOLD	SMITH
DOG	DOG	DOG	01/01/2003	5367420	33333333	AAADD111
NICE		DOG	10/23/1981	6166744		
PLUTO	B	DOG	01/01/2010	5285783		
UNDER		DOG	10/10/2015	6214022	OVER	
WONDER		DOG	01/11/1970	6214024	WANDA	

Showing 1 to 6 of 6 entries Report Duplicates

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Add a Student to the IIS

Watch our video tutorial for: [How to Add a Student and Attach them to a School - Video](#) and [Short Video – Adding Patients to the IIS - YouTube](#)

A student not in the School and Child Care Immunization Module can be added on the *Search/Add* screen under the *Patient* menu heading.

- Enter the student's first, last name and birth date.
- Check the box **Check here if adding a new patient**.
- Enter all required fields marked red.
- Click **Search** or press **Enter** on your keyboard.
- If the student is not found, click **Add Patient** under *Patient Search Results*.
- The system will open the *Patient Demographics Edit* screen as seen in the image with light blue text.
- Enter the **Sex** of the patient using the drop-down list.
- Enter the OSPI SSID in the **Student ID** Field.
- Enter the mailing **Address** Note: enter the zip code first to auto populate fields. Click the **Add** button in the address section.
- Enter the **Phone Number** and appropriate **Phone Use Code** (usually Primary Residence Number). Click the **Add** button in the Phone section.
- Enter the name of the **Family Contact**. Click the **Add** button in the Family Contact section.
- If desired, enter a student's preferred name in the Alias section. Students whose preferred name is being used for legal reasons such as protection orders, custody issues or for those transgendered, may be eligible to have their preferred name listed as the primary name in the IIS. Email us at schoolmodule@doh.wa.gov to request permission to change a student's primary name from their legal name.
- Enter additional information if available. Note: do not enter the School Entry Date.
- Click **Save**.

Patient Search Click here to use the 'advanced' search

First Name or Initial: SIIS Patient ID:

Last Name or Initial: Student ID:

Birth Date:

Family and Address Information:

Guardian First Name:

Street:

City: State:

Zip Code: Phone Number:

Country:

Check here if adding a new patient. (Required fields are highlighted)

Note: When searching by First and Last Name, you may use the wildcard character % to replace multiple characters and _ to replace a single character.

Patient Search Results

Records Found = 0 Search Criteria: Advanced Search - Add / Edit / View

Show entries Search:

First Name	Middle Name	Last Name	Birth Date	SIIS Patient ID	Grd First Name	Grd Last Name
No data available in table						

Showing 0 to 0 of 0 entries

Before adding, check to make sure the patient you want to add is not listed above or not pending manual review

Patient Demographics Edit

Patient Status

State Level: Organization Level:

County Level:

Patient

First Name: Race:

Middle Name: Ethnicity:

Last Name: Language:

Suffix:

Birth Date: Medicaid #:

Birth File #: Birth Order:

Sex: Nationality:

Mother Maiden Name: Passport #:

VFC Status: Visa #:

Military: Reminder/Recall Publicity Code:

Comments:

-Address

Address 1:

Address 2: City:

Country: State: Zip Code:

County/Parish: Email:

Address Type: Valid? Primary?

- Patient Phone Number(s)

Phone Number	Extension	Phone Use Code	Equipment Type	Primary
<input type="text"/>	<input type="text"/>	<input type="text" value="--select--"/>	<input type="text" value="--select--"/>	<input type="radio"/>

- Family & Contact

First Name: Middle Name: Last Name:

Contact Type: Guardian?

Address 1:

Address 2: City:

Country: State: Zip Code:

Phone Number: Phone Use Code: Equipment Type:

Email:

First Last Type Phone Number Guardian? Phone Use Code Equipment Type

- + Alias
- + Secondary Patient Demographics
- + School
- + Medical Home
- + Birth & Death

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Add a student to a Roster

- Search for the student, (please see the above section titled “Search for a Student” for more information.
- Click on the student’s name to open their demographic page.
- Select the correct **Grade Level** from the drop-down list.
- Click the checkbox to **Include on Reports**.
- Click the **Update** button.

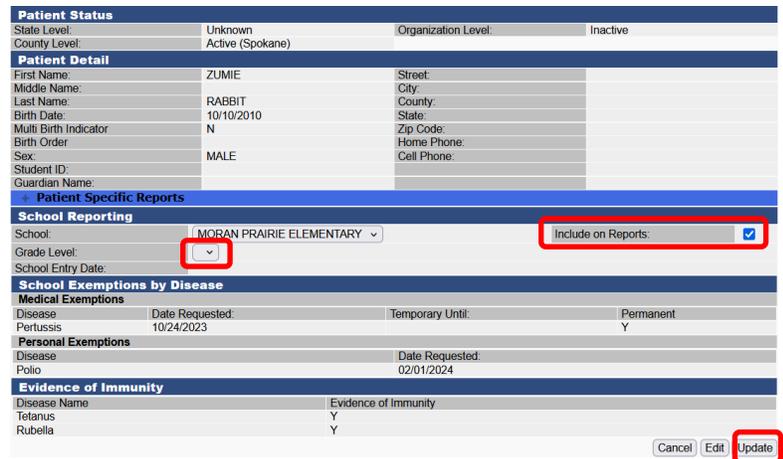
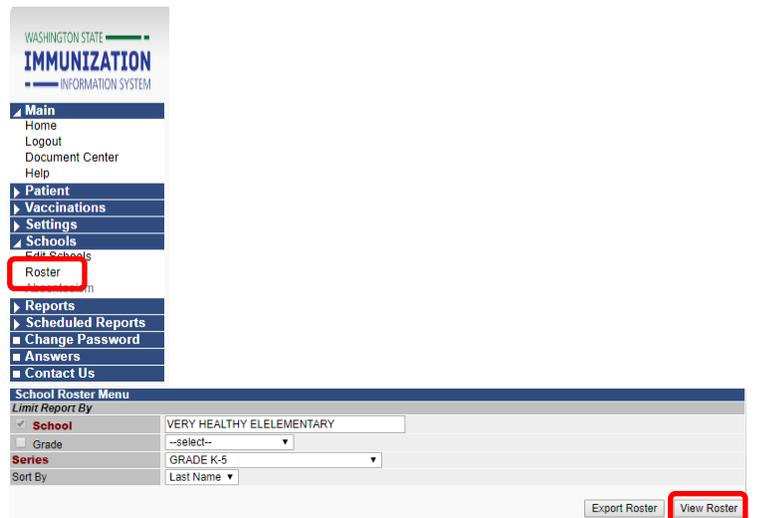
If the school they attend is not in the school drop down field, then select the “**Select a School**” button in the top left corner to choose a different school and follow the above steps for selecting a school again.

Important Note Students can only be listed on one roster at a time. If they attend multiple locations, they should be listed on their school or records roster or the roster for the location where they spend most of their time.

View/Export the Student Roster

Watch our video tutorial for: [How to View and Export the Student Roster - Video](#)

- Click on **Roster** under the Schools menu heading.
- You can select the **Grade** using the dropdown list. Not selecting a grade will show all students in the roster.
- If your roster is over 1000 students, the system may time out and not allow adding or removing of students. If this happens, select a grade prior to running your roster.
- Select the desired **Series** using the dropdown list to apply compliance rules to the roster. You are required to select a Series to view the roster.
- Select the desired sort using the **Sort By** dropdown list.
- Click the **View Roster** button.
- You can download the roster as an excel .csv file by clicking the **Export Roster** button.

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Edit the Roster

Important Note To keep the Roster up to date students must be added and removed as students enroll and withdraw.

Add A Student

- Click the **Add New Students** button to go to the Patient Search/Add Screen
- If your roster is over 1000 students, the system may time out and not allow you to add students. If this happens, select a grade prior to running your roster to reduce the number of students on the roster. Repeat to clear each grade individually.

Remove a student

- Check the box in the **Remove** column next to the student you wish to remove.
- Click the **Save Roster Updates** button.
- Click **OK** on the popup window asking if you are sure you want to delete.
- If your roster is over 1000 students, the system may time out and not allow you to remove students. If this happens, select a grade prior to running your roster to reduce the number of students on the roster.

Change a Student's Grade Level

- Select the desired grade from the dropdown list next to the student's name in the **Move To** column.
- Click the **Save Roster Updates** button.

Remove a whole grade of Students:

- Click the **Select All** button. All the student's Remove boxes will be checked.
- Click the **Save Roster Updates** button.

Change the Grade of All Students on the Roster

- Select the desired grade from the dropdown list box next to **Move All To**. Start with the highest-grade level, ex. Move 11th grade to 12th grade.
- Click the **Save Roster Updates** button.

School Roster

Criteria

School: VERY HEALTHY ELEMMENTARY
Grade: 6th Grade

Last Name	First Name	Birthday	SIIS Patient ID	Status	Exemption on File?	Grade	Move To?	Remove?
CAT	CARLY	11/12/2004	3989307	Up to Date		6th Grade	--select--	<input type="checkbox"/>
CAT	COREY	10/12/2004	3958790	Due Now		6th Grade	--select--	<input type="checkbox"/>
CAT	SUSIE	12/12/2004	4248670	Due Now		6th Grade	--select--	<input type="checkbox"/>

Move all to: --select--

Total Students Selected: 3

School Roster

Criteria

School: VERY HEALTHY ELEMMENTARY
Grade: 6th Grade

Last Name	First Name	Birthday	SIIS Patient ID	Status	Exemption on File?	Grade	Move To?	Remove?
CAT	CARLY	11/12/2004	3989307	Up to Date		6th Grade	5th Grade	<input checked="" type="checkbox"/>
CAT	COREY	10/12/2004	3958790	Due Now		6th Grade	5th Grade	<input checked="" type="checkbox"/>
CAT	SUSIE	12/12/2004	4248670	Due Now		6th Grade	5th Grade	<input checked="" type="checkbox"/>

Move all to: 5th Grade

Total Students Selected: 3



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Vaccination Summary Page

Only nurses have access to the Vaccination Tab. If you are not a nurse and need access to the vaccination tab you can view the steps for how to complete the delegation process on the [School and Child Care Immunization Module Website](#) under section 3, number 1.

Watch our video tutorial about the [Vaccination Summary Page - Video](#)

After selecting a student, click on **Summary** under the **Vaccinations** menu heading. This view-only page will display the following sections:

Vaccination Summary

Lists a student's vaccines grouped by vaccine type. Immunizations marked with a red **X** are considered invalid. Click on the vaccine date for more detail, including the provider who gave the vaccine.

Invalid Vaccinations

Lists the reason a vaccine dose marked with a red **X** is invalid.

Vaccine Deferrals

Notes the deferrals entered by the healthcare provider about deferred.

Vaccine Contraindications/Exemptions/Precautions

Lists information entered by a healthcare provider. Some information may not be displayed due to patient confidentiality. Exemptions entered here are provider exemptions which are not the same as school/childcare exemptions. Students with a school/childcare exemption must have a completed Certificate of Exemption on file which should be entered into the School and Child Care Immunization Module (instructions below). Exemptions entered in the School and Child Care Immunization Module display on the *Patient Demographics* page not in the *Vaccine Contraindications/Exemptions/Precautions*.

Vaccination Forecast

Lists vaccinations still needed and when they are due. Definitions of the Forecast Status can be found on the *Forecast* page under Vaccinations on the main menu.

Patient						
Name:	MOLLY THE CAT	SIS Patient ID:	5409455			
Date of Birth:	10/01/2010	Age:	306 weeks, 70 months, 5 yrs			
Guardian:		Status:	Active			
Vaccination Summary						
Vaccinations outside the ACIP schedule are marked with an 'X'.						
Vaccine	1	2	3	4	5	6
DTaP/DTaP/Td	12/01/2010 6 weeks	02/01/2011 4 months	06/01/2011 8 months	09/05/2012 23 months	10/01/2015 5 years	
OPV/IPV	12/01/2010 6 weeks	02/01/2011 4 months	06/01/2011 8 months			
MMR	X 10/01/2011 12 months	10/01/2015 5 years				
Hib	02/01/2011 4 months					
Hep A	09/05/2012 23 months					
Hep B - 3 Dose	10/01/2010 0 days	12/01/2010 8 weeks	06/01/2011 8 months			
Varicella	X 09/05/2011 11 months	10/01/2015 5 years				
Influenza	09/05/2012 23 months					
Invalid Vaccinations						
Invalid Vaccinations	Date	Reason				
MMR	02/15/2011	Live vaccines not administered on same date must be separated by 28 days.				
VARICELLA	02/15/2011	Minimum age for this dose not met.				
Vaccine Deferrals						
Vaccine	Dose	Date				
Vaccine Contraindications / Exemptions / Precautions						
Contraindications						
Exemptions						
Precautions						
Vaccination Forecast						
The forecast automatically switches to the accelerated schedule when a patient is behind schedule.						
Vaccine Family	Dose	Recommended Date	Minimum Valid Date	Overdue Date	Status	
MMR	2	10/29/2015	10/29/2015	10/01/2017	Due Now	
VARICELLA	2	12/24/2015	12/24/2015	10/01/2017	Due Now	
MENINGOCOCCAL	1	10/01/2021	10/01/2020	10/01/2023	Up to Date	
Tdap	5	10/01/2021	10/01/2021	10/01/2023	Up to Date	

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For more detailed information about the vaccine summary screen review the [How to Review a Patient's Vaccination Summary and Forecast](#) quick reference guide.



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Vaccination View/Add Page

Watch our video tutorial: [The Vaccination View Add Page - Video](#)

After selecting a student, click on **View/Add** under the **Vaccinations** menu heading. This page will display the following areas:

Vaccination View/Add

Lists all vaccinations administered and fields to enter additional doses. Only medically verified immunization records may be entered on this page. For more information about entering immunization dates see the *Add Missing Immunization* section below.

Vaccine Contraindications/Exemptions/Precautions and Forecast

Lists information entered by a healthcare provider as well as the Vaccination Forecast. This is the same information that displays on the *Vaccination Summary* page explained above.

Add a Missing Immunization

Important:

- ✓ Only medically verified immunization records may be entered into the School and Child Care Immunization Module. Follow the guidelines in the next column to determine if an immunization record is a valid medically verified record (see Appendix A for samples). The ultimate decision to enter an immunization record is based on the School Nurse's best clinical judgment.
- ✓ If the school is subject to the FERPA rules, parent consent must be obtained prior to entering the dates into the School and Child Care Immunization Module. You can use the Certificate of Immunization Status (CIS) to document parent consent or obtain written consent in an alternate manner.

For strategies on how to obtain medically verified records and collecting parent consent please review the [Guidance and Expectations](#) document.

Vaccine Group	Forecasted Dose	Recommended Date	Minimum Valid Date	Overdue Date	Status
MMR	1	03/01/2021	03/01/2021	03/01/2021	Past Due
Coronavirus (SARS-CoV-2)/COVID-19	1	02/12/2022	02/12/2022	02/12/2022	Past Due
FLU	B	07/01/2023	07/01/2023	07/28/2023	Past Due
HPV	1	04/22/2024	04/22/2024	05/19/2028	Not Yet Due
MENINGOCOCCAL	1	04/22/2023	04/22/2023	05/19/2028	Not Yet Due
Total	B	04/22/2023	04/22/2023	05/19/2028	Not Yet Due
MENINGOCOCCAL B, OMV (Clinical Discretion)	1	04/22/2031	04/22/2031	05/22/2031	Not Yet Due
MENINGOCOCCAL B, RECOMBINANT (Clinical Discretion)	1	04/22/2031	04/22/2031	05/22/2031	Not Yet Due

Vaccine	Special Consideration	Facility Where Documented	Date Documented	Permanent	Disease Date
varicella	History of Varicella Infection			Y	
Hep B Peds/Adol - Preserv Free	Laboratory evidence of immunity		08/05/2020	N	
Hep B Peds/Adol - Preserv Free	Immunity to Hepatitis B		08/24/2020	N	

The following are examples of medically verified immunization records that may be entered into the IIS (see Appendix A for samples):

- Immunization records printed from a clinic or hospital Electronic Health Record.
- Immunization record or official CIS printed from another state's immunization registry.
- Official lifetime immunization record from WA or another state with a unique healthcare provider or clinic stamp, or another form of written healthcare provider documentation, such as a provider signature.
- For foreign students: official immunization record such as an immigration form or lifetime immunization record from another country with a clinic or healthcare provider stamp.
- CIS: handwritten immunizations can be accepted only if verified with a unique healthcare provider or clinic stamp, or another form of written healthcare provider documentation, such as a provider signature.

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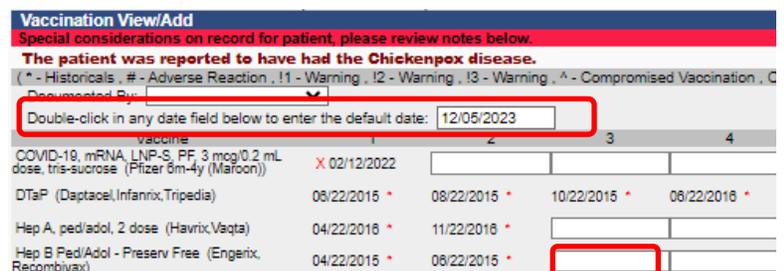
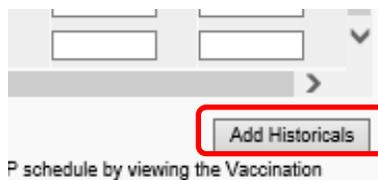
GUIDE

To Enter a Date

- After selecting a student, click on **View/Add** under the *Vaccination* menu heading.
- Click into the **Box** next to the appropriate vaccine brand. If the specific vaccine name is not specified on the student's immunization record and the student was vaccinated in the U.S. use the *Default Vaccine to enter* specified in the next column. If the student was vaccinated outside of the US use the unspecified formulation of the vaccine. Additional vaccines can be found in the dropdown list at the bottom of the *Vaccine View/Add* section.
- Type the date as a string of numbers; for example, May 8, 2005 = 050805, or double click to use the **Default Date** at the top of the *Vaccination View/Add* section. The Default Date can be changed to any desired date.
- Click the **Add Historicals** button list at the bottom of the *Vaccine View/Add* section. You can add multiple dates in the vaccine fields before clicking the button. Remember to do this to save your work.
- Immunizations marked with a red X are considered invalid. Click on the vaccine date for more detail.



Vaccine	Default vaccine to enter
DTaP	DTaP - unspecified
DT	DT (pediatric)
Hep A	Hep A 2 dose – Ped/Adol (Havrix, Vaqta)
Hep B	Hep B Ped/Adol – Preserv Free (Engerix, Recombivax)
Hib	Hib-unspecified formulation
Flu	Influenza, unspecified
MMR	MMR (MMRII)
Pneumococcal	Pneumococcal, unspecified formulation
Td	Td Adult, Preserv Free (Tenivac, Td-Merck, Td-MassBio)
Tdap	Tdap (Boostrix, Adacel)
Varicella	Varicella (Varivax)

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Delete an Immunization

Watch our video tutorial: [How to Delete an Immunization - Video](#)

Immunization dates can only be deleted if you entered the date.

- After selecting a student, click on **View/Add** under the *Vaccinations* menu heading.
- Click on the **Immunization Date** entered in error. The system will open *the Vaccination/Medicine Detail* page.
- Click the **Delete Record** button. The system opens a second *Vaccination Detail* screen.
- Click the **Delete Record** button to delete the record.
- Click **Cancel** to return to the previous screen without deleting the record.

Incorrect Vaccination Dates

Incorrect vaccination dates can only be edited by the user who entered the date. To find out who entered the vaccination, click on the immunization date. That will open the *Vaccination Detail* screen which shows the organization that entered the date. You will need to contact that provider to let them know that the date is incorrect. The error will need to be fixed in the IIS and in the provider's electronic health record, so the incorrect dose doesn't return to the IIS with their next data upload.

Patient			
Name:	MOLLY THE CAT	SIIS Patient ID:	5408455
Date of Birth:	10/01/2010	Age:	306 weeks, 70 months, 5 yrs
Guardian:		Status:	Active
Vaccination/Medicine Detail			
Vaccine:	MMR		
Date Administered:	10/01/2011		
Invalid Vaccination:	Invalid MMR: Live vaccines not administered on same date must be separated by 28 days.		
Historical:	Yes		
Confidential:	No		
Provider Noted on Record:			
Lot Noted on Record:			
Manufacturer Noted on Record:			
Manufacturer:			
Lot Number:			
Lot Facility:			
Funding Source:			
Vaccinator:			
Organization (IRMS):	1943 - NORTHSHORE SCHOOL DISTRICT		
Facility:			
Anatomical Site:			
Anatomical Route:			
Dose Size:	Full		
Volume (CC):			
VFC Status:	VFC eligible— Medicaid/Medicaid Managed Care		
Revaccination Reason:			
Adverse Reaction:			
District/Region:			
Dates of VIS Publications:			
Date VIS Form Given:			
Ordering Provider:			
Comments:			
Entered By:	KATHERINE GRAFF		
Entry Date:	08/17/2016 01:03:16 PM		
Last Updated By:	KATHERINE GRAFF		
Last Update:	08/17/2016 01:03:16 PM		
			<input type="button" value="Cancel"/> <input type="button" value="Delete Record"/>
<hr/> Dates of VIS Publications: Date VIS Form Given: Ordering Provider: Comments:			
			<input type="button" value="Cancel"/> <input type="button" value="Delete Record"/>
<p>If you are sure you wish to delete this vaccination, click 'Delete'. If you do not want to delete this vaccination, press 'Cancel'.</p>			

SCHOOL AND CHILD CARE IMMUNIZATION MODULE TRAINING

GUIDE

Chickenpox History

Watch our video tutorial on: [Chickenpox History - Video](#)

Only healthcare providers verified history of disease may be entered.

Add Chickenpox History

- After selecting a student, click on **View/Add** under the *Vaccinations* menu heading.
- Click the **Add Chickenpox History** button.

Delete Chickenpox History

- After selecting a student, click on **View/Add** under the *Vaccinations* menu heading.
- Click the **Delete Chickenpox History** button.



SCHOOL AND CHILD CARE IMMUNIZATION MODULE TRAINING

GUIDE

Add/Delete an Immunization Exemption

Also see: [Enter Exemptions into the School and Child Care Immunization Module Quick Reference Guide \(wa.gov\)](#)

- ✓ Medical, Personal and Religious Exemptions require both parent/guardian and healthcare practitioner signatures on the Certificate of Exemption (COE) Form.
- ✓ Religious Membership Exemptions require only a parent/guardian signature on the COE.
- ✓ Exemptions entered in the School and Child Care Immunization Module impact the Roster and reports. They do not impact the validated CIS, which measures documentation of immunity not documentation compliance.
- ✓ If a student transferred to your school any exemptions entered by their previous school will need to be removed and new exemptions will need to be added for your School/District

Add an Exemption

- After selecting a student, select **Demographics** under the *Patient* main heading.
- Click the **Edit** button.
- The system will open the *Patient Demographics Edit* page.
- Click the + to expand **School Exemptions by Disease**.
- Click the desired **Disease** from the *Disease dropdown list* of the desired exemption type. Measles, mumps and rubella cannot be exempted for personal/philosophical reasons.
- Type the date of the parent/guardian signature on the Certificate of Exemption in the **Date Requested** field.
- If it is a Medical Exemption check the **Permanent** box OR type the exemption expiration date in the **Temporary Until** field.
- Click the **Add** button.
- Click the **Save** button.

• Patient record updated successfully

Patient Detail			
First Name:	HAPPY	Street:	123 DOGPARK AVE
Middle Name:		City:	BOTHELL
Last Name:	DOG	County:	SNOHOMISH
Birth Date:	05/08/2005	State:	WASHINGTON
Multi Birth Indicator:	N	Zip Code:	98012
Birth Order:		Home Phone:	
Sex:	MALE	Cell Phone:	
Student ID:	9999999		
Guardian Name:			
Inactive:			

+ Patient Specific Reports

School Reporting			
School:	MAYWOOD HILLS ELEMENTARY	Include on Reports:	<input checked="" type="checkbox"/>
Grade Level:	6th Grade		
School Entry Date:	03/15/2015		

Cancel **Edit** Update

- School Exemptions by Disease

Medical Exemptions:

Disease: --select-- Temporary Until:

Date Requested: Permanent: Add

Personal Exemptions:

Disease: --select-- Date Requested:

Religious Exemptions:

Disease: --select-- Date Requested:

Religious Membership Exemptions:

Disease: --select-- Date Requested:

Medical Exemptions:

Disease: Measles Temporary Until:

Date Requested: 01/04/2021 Permanent: Add

Medical Exemptions:

Disease: --select-- Temporary Until:

Date Requested: Permanent: Add

Disease: Measles Date Requested: 01/04/2021 Temporary Until: Permanent: Y Edit Remove

Personal Exemptions:

Disease: --select-- Date Requested:

Religious Exemptions:

Disease: --select-- Date Requested:

Religious Membership Exemptions:

Disease: --select-- Date Requested:

Vaccine: Evidence of Immunity Date Requested:

Cancel Save

Disease: Measles Date Requested: 01/04/2021 Temporary Until: Permanent: Y Edit **Remove**

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SCHOOL AND CHILD CARE IMMUNIZATION MODULE TRAINING

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Delete an Immunization Exemption

From the *Patient Demographics Edit* page:

- Click the + to expand ***School Exemptions by Disease.***
- Click the ***Remove*** button of the desired exemption series.
- Click the ***Save*** button.

SCHOOL AND CHILD CARE IMMUNIZATION MODULE TRAINING

GUIDE

Add Immunity to a Disease

Also see: [Enter Immunity into the School and Child Care Immunization Module Quick Reference Guide \(wa.gov\)](#)

- ✓ Titers entered in the School and Child Care Immunization Module impact the Roster and reports. They do not impact the validated CIS or the IIS Forecast.

Enter provider documented immunity to a disease by

- Completed and signed immunity on the CIS
- Signed lab report indicating immunity.
- Provider letter stating the child is immune.

Note: a copy of the lab report is no longer required to accompany health care provider documentation of immunity by blood antibody titer.

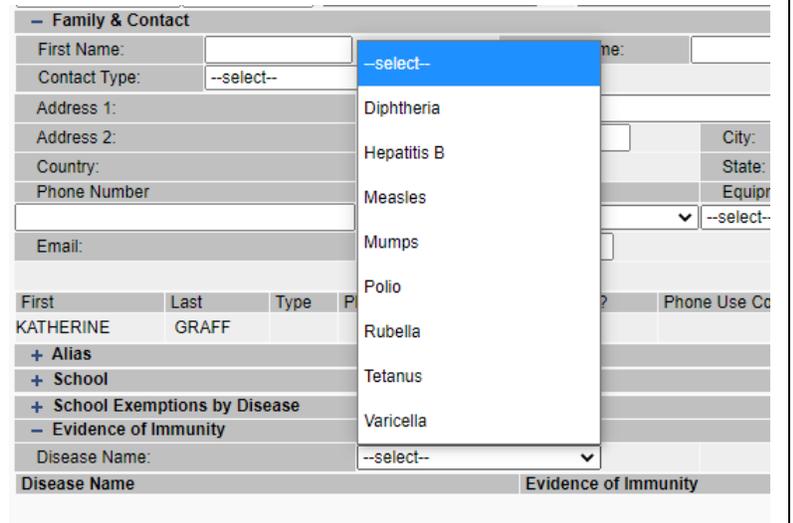
Add Immunity

- After selecting a student, select **Demographics** under the *Patient* main heading.
- Click the **Edit** button.
- The system will open the *Patient Demographics Edit* page.
- Click the + to expand **Evidence of Immunity**.
- Click the desired **Disease** from the *Disease dropdown list*.
- Click the **Add** button.
- Click the **Save** button.

Delete Immunity to a Disease

From the *Patient Demographics Edit* page:

- Click the + to expand **Evidence of Immunity**.
- Click the **Remove** button of the desired immunity series.
- Click the **Save** button.



Family & Contact

First Name: [] Contact Type: --select--

Address 1: [] Address 2: [] City: []

Country: [] State: []

Phone Number [] Equip []

Email: []

First Last Type P
KATHERINE GRAFF

+ Alias
+ School
+ School Exemptions by Disease
- Evidence of Immunity

Disease Name: --select--

Disease Name Evidence of Immunity

--- Evidence of Immunity

Disease Name: Hepatitis B [Add]

--- Evidence of Immunity

Disease Name: --select-- [Add]

Disease Name	Evidence of Immunity
Hepatitis B	Y

[Cancel] [Save]

--- Evidence of Immunity

Disease Name: --select-- [Add]

Disease Name	Evidence of Immunity
Hepatitis B	Y

[Remove]

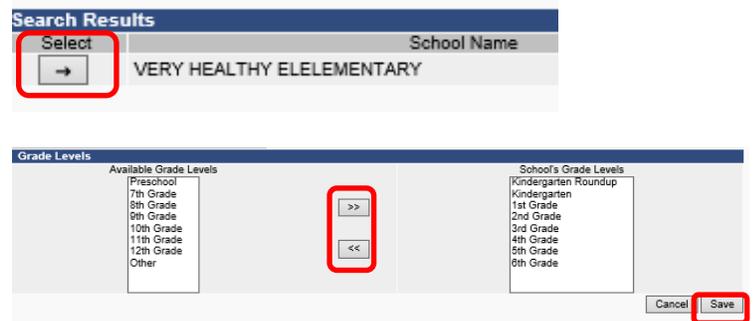
SCHOOL AND CHILD CARE IMMUNIZATION MODULE TRAINING

GUIDE

Edit School Grade Levels

To add or remove a grade level from a school:

- Click **Edit School** under *Schools* on the Main Menu.
- Click the **Arrow** button next to the desired school.
- Use the **Right** and **Left Arrow** buttons to move grades between the *Available Grade Level* and *School's Grade Levels* lists.
- Click the **Save** button.



Search Results

Select	School Name
<input type="button" value="→"/>	VERY HEALTHY ELEMMENTARY

Grade Levels

Available Grade Levels		School's Grade Levels
Preschool	<input type="button" value=">>"/>	Kindergarten Roundup
7th Grade	<input type="button" value="<<"/>	Kindergarten
8th Grade		1st Grade
9th Grade		2nd Grade
10th Grade		3rd Grade
11th Grade		4th Grade
12th Grade		5th Grade
Other		6th Grade

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School Reports

Watch our tutorial on [School Reports Overview - Video](#)

To be accurate, all reports that calculate compliance need to be run with the appropriate grade or age compliance series. The following reports are for other states using the School and Child Care Immunization Module and are **not** accurate for Washington state:

- School Immunization Report, First Time Enterer
- First Time Enterers Action Report
- Summary of School Enterers Data

To access School Reports

- Select **School Reports** under **Reports** on the Main Menu.
- Click on the desired **Report Name** to open the report parameters.
- Some reports can be scheduled to run at a specific time, ex. after hours.

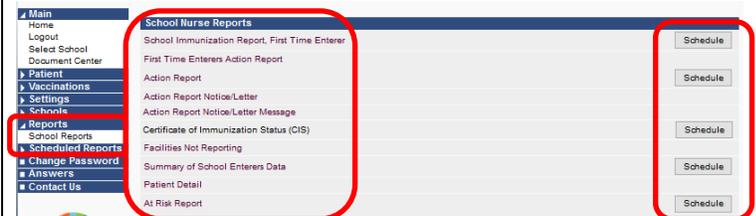
At Risk Report

This report lists students by grade who are “at risk” for a specific vaccine preventable disease based off the AICP vaccination schedule. These are students who do not have immunity, by vaccination or provider documentation, to the disease selected.

Select a School

This is only an option if you have access to multiple schools under your account. If your school is already selected under the “School:” section skip down to the instructions for selecting a grade.

- To run this report for more than one school at a time but not for a whole district, click on the name of the first location and then hold down the “**ctrl**” key while clicking on the names of the other locations you wish to see.
- To run this report for all the schools in your district or program do not select a location under the school list section. Click on the “**--select--**” option at the top of the list making it highlighted gray.



At Risk Report

Search Criteria:

School District:

VERY HEALTHY SCHOOL DISTRICT

School:

--select--
 VERY HEALTHY ELEMENTARY
 VERY HEALTHY MIDDLE SCHOOL
 VERY HEALTHY HIGH SCHOOL

Grade Level:

--select--
 1
 2
 3

Disease:

--select--

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SCHOOL AND CHILD CARE IMMUNIZATION MODULE TRAINING

GUIDE

Select the Grade/s

- To run for one grade, select the grade you wish to see from the grade list.
- To run this report for multiple grades, click the first grade you wish to see. Next, hold down the “**ctrl**” key on your keyboard. While holding down the “**ctrl**” key click on the other grades you want to run the report for.

Select the Disease

- Select the disease by clicking on the disease you want the report to run against. You can only select one disease at a time.

Create Report

- Click on the “**Create Report**” button to run the report in the Module.
- Click the “**Export**” button to open the report in Microsoft Excel

Action Report

Watch our tutorial on the [Action Report - Video](#)

This report lists students in *Out of Compliance* or *Conditional Status* who have a vaccine due now or past due.

- Select the **Series** rules to apply with the *dropdown list*.
- Click the **Select** button under the *Grade Levels* column to open the grade list then click the **Boxes** next to the *Grade Level* to check the grades in the compliance series and uncheck the grade levels with different requirements than the selected series.
- Click the **Arrow** button under *Select* to run the report.

Patient Detail Report for COVID-19 Vaccine Status

Please see our step-by-step guide for how to create this report at [SCHOOL AND CHILD CARE IMMUNIZATION MODULE COVID-19 REPORT \(wa.gov\)](#)

School Nurse At Risk Report

District/Region: VERY HEALTHY SCHOOL DISTRICT
 School: VERY HEALTHY HIGH SCHOOL
 Grades: Child Care 7-10, P1, P2, P3, P4, P5, Child Care 0-6 Not in School, Child Care 4+ in School, PK, Roundup, TK, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, HS, Staff, TD
 Disease: Measles
 Report Date: July 11, 2024

First Name	Last Name	DOB	SSS ID	Student ID	School	Grade	Status	Exemption	Temp Exemption Exp Date
ASHI	CAT	08/28/2005	9745045	86329/2313	VERY HEALTHY HIGH SCHOOL	12th Grade	Out Of Compliance		
ADMIRE	CAT	12/06/2006	10862145		VERY HEALTHY HIGH SCHOOL	11th Grade	Out Of Compliance		
LEWIS	CAT	01/07/2004	11709540		VERY HEALTHY HIGH SCHOOL	Grade 13	Out Of Compliance		
DOREAMON	CAT	01/01/2006	11859950		VERY HEALTHY HIGH SCHOOL	12th Grade	Out Of Compliance	Medical	Exemption
LINUS	CAT	02/01/2006	11887286		VERY HEALTHY HIGH SCHOOL	12th Grade	Out Of Compliance	Medical	Exemption

Action Report

Select School
 Search Criteria:
 State: WASHINGTON
 County: [select]
 School District: NORTHSHORE SCHOOL DISTRICT
 Type: All Public Only Private Only
 Name: VERY HEALTHY ELEMENTARY 126772
 Series: SY 2016-17 GRADE 6-12

Back Search

Search Results

Select	School Name	Street	City	State	Zip Code	Public School	Grade Levels
<input type="checkbox"/>	VERY HEALTHY ELEMENTARY		BOTHELL	WA	99012	Public	Select

Use for K Roundup only before K starts in fall
 Kindergarten
 1st Grade
 2nd Grade
 3rd Grade
 4th Grade
 5th Grade
 6th Grade

School Nurse Action Report

School: VERY HEALTHY ELEMENTARY
 Grades: 6th Grade
 Series Name: SY 2016-17 GRADE 6-12
 Legend: DTAP/TK : TDAP : OPV/2PV : MMR : HBV : VAR
 5 : 1 : 4 : 2 : 3 : 2
 Report Date: August 18, 2016

Student:	DOB	Guardian:	Date of Birth:
COREY CAT	09/07/90		10/12/2004
SUSIE CAT	4249870		12/12/2004

Vaccine Family	Dose	Recommended Date	Minimum Valid Date	Status	Temp Exemption Exp Date
DTAP	1st	10/12/2015	10/12/2015	Conditional	

Grade Level	Total Patients	Total Vaccinations
6th Grade	2	2
Grand Totals	2	2

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Action Report Notice/Letter

Watch our tutorial: [Action Report/ Notice Letter Messages - Video](#)

This report produces a letter, one per student, based upon the parameters selected. The following letters are available:

- **Conditional Letter:** Letter to parent/guardian stating that student is in conditional status.
- **Healthcare Provider Letter:** Letter to healthcare provider asking they enter immunizations into the IIS or send of list of immunizations to the School Nurse.
- **Missing Immunizations Letter:** Letter to parent/guardian of student out of compliance listing the missing immunizations.
- **Parent Letter Record Request:** Letter to parent/guardian requesting immunizations record or healthcare provider information.
- **Tdap Letter:** Letter to parent/guardian of students missing a Tdap immunization.

To Run the Letters

- Select the Series with the dropdown list.
- Select the desired Letter from the Message dropdown list.
- Click the Select button under the Grade Levels column to open the grade list then click the Boxes next to the Grade Level to check or uncheck the desired grade levels.
- Click the Arrow button under Select to run the report.

Action Report Notice/Letter Messages

This screen allows the user to add their own messages which they can edit. To edit the letters above copy the text into a new message.

- Click the Add button under Select for the desired report.
- Name the new message.
- Type text in the edit boxes.
- Click the Save button.

Action Report Notice/Letter

Select School

Search Criteria:

State: WASHINGTON

County: --select--

School District: NORTHSHORE SCHOOL DISTRICT

Type: All Public Only Private Only

Name: FERNWOOD ELEMENTARY 88757

Series: SY2016-17 GRADE K-5

Message: Missing Immunizations Letter

Back Search

Search Results

Select	School Name	Street	City	State	Zip Code	Public School	Grade Levels
→	FERNWOOD ELEMENTARY	3933 JEWELL RD	BOTHELL	WA	98012	Public	Select
<input checked="" type="checkbox"/>	Use for K Roundup Forecasting Only						
<input checked="" type="checkbox"/>	Kindergarten						
<input checked="" type="checkbox"/>	1st Grade						
<input checked="" type="checkbox"/>	2nd Grade						
<input checked="" type="checkbox"/>	3rd Grade						
<input checked="" type="checkbox"/>	4th Grade						
<input checked="" type="checkbox"/>	5th Grade						
<input type="checkbox"/>	6th Grade						

Regarding:
MAX CAT
98976TH
BOTHELL
WA - 98012

Vaccine Family	Dose	Recommended Date	Minimum Valid Date	Status
POLIO	1	01/15/2008	12/27/2007	Conditional
HEP-B 3 DOSE	1	11/15/2007	11/15/2007	Conditional
MMR	1	11/15/2008	11/15/2008	Conditional
VARICELLA	1	11/15/2008	11/15/2008	Conditional

Dear Parent or Guardian:

Washington State law requires all children to be properly immunized to attend or continue attending school. According to our records above, your child did not get the required vaccinations to attend school.

Action Report Notice/Letter Messages

Select	Message Title	Last Revision Date
→	Conditional Letter	05/28/2016
→	HCP Letter for Medical Records	12/30/2015
→	Missing Immunizations Letter	10/16/2014
→	Parent Letter Record Request	10/18/2014
→	SPS - Missing Immunizations	07/16/2014
→	Tdap Letter	10/16/2014

Back Add

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Certificate of Immunization Status (CIS)

Important Note A CIS for a student does not need to be on file at your school if their immunizations are complete in the IIS and they are on your SCCIM Roster. Students who are *not* complete in the IIS must have a CIS on file at their school. Keep any immunization records and parent permission used to update the IIS in the student's file.

Watch our video tutorial: [Certification of Immunization Status / CIS - Video](#)

This report will produce a Certificate of Immunization Status Report (CIS) for the student selected from the Search/Add screen.

- Select the Series. Make sure it is the series that includes the student's grade
- Click Create PDF

A CIS can also be printed from the:

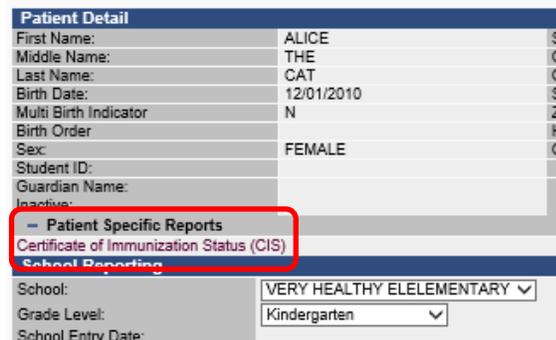
Demographics page

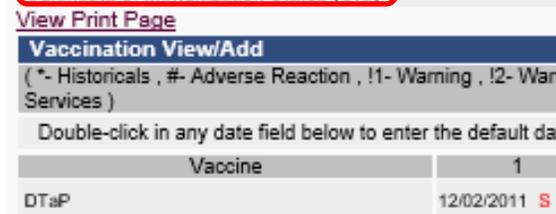
- Click *Demographics* under *Patient* on the Main Menu.
- Click the + sign to the left of *Patient Specific Reports* at the bottom of the *Patient Detail* section.
- Select *Certificate of Immunization Status (CIS)* from the list.

Vaccination View/Add page

- Click *View/Add* under *Vaccinations* on the Main Menu.
- Click the + sign to the left of *Patient Specific Reports* at the bottom of the *Patient* section.
- Select *Certificate of Immunization Status (CIS)* from the list.

[How to print the CIS from the Immunization Information System \(PDF\)](#)



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SCHOOL AND CHILD CARE IMMUNIZATION MODULE TRAINING

GUIDE

CIS Batch/Scheduled Reports

This report allows you to run CIS reports for multiple students at once.

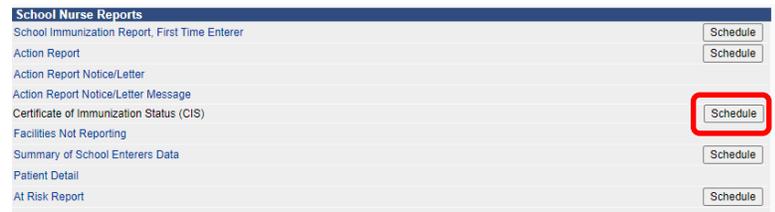
- Click the Schedule button on the *Certificate of Immunization Status (CIS)* line in the School Reports screen.
- Select which grade levels and vaccine series you wish to run the CISs for.
- In the *Scheduler* section, enter when you want the report to run. Note: If you wish to run the report only once instead of scheduling it to run repeatedly, select the Run Now check box instead of entering a time.
- Enter your first and last names in the Search User section, then click Search.
- A list of users will populate in the search results.
- Click the checkbox next to your username.
- Click the Select Users button. This will move your username down to the *Selected Users* section.
- Click the Schedule button.
- If the report is successful, you will see the message “Report scheduled successfully” at the top of your screen.
- To view the CIS report, click Received Reports under the *Schedule Reports* section of the Main Menu.
- In the next screen, click the name of the report you wish to open. The reports will open in a new window.

Student Compliance Report

This report shows a complete overview of the vaccination status of students on a roster. The vaccination status is determined by the parameters set when running the report. It can be run for all the students who attend one school or a group of schools in the same district or organization at one time. In addition to vaccination status, this report details each students’ exemptions and immunity.

Select the School

This is only an option if you have access to multiple schools under your account. If your school is already



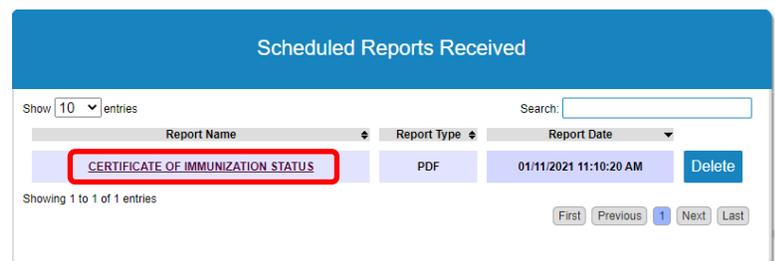
School Nurse Reports

- School Immunization Report, First Time Enterer
- Action Report
- Action Report Notice/Letter
- Action Report Notice/Letter Message
- Certificate of Immunization Status (CIS)
- Facilities Not Reporting
- Summary of School Enterers Data
- Patient Detail
- At Risk Report

Select User	First Name	Last Name	Organization
<input checked="" type="checkbox"/>	KATHERINE	GRAFF	VERY HEALTHY SCHOOL DISTRICT



- Reports
 - School Reports
 - Scheduled Reports
 - Search Report Jobs
 - Received Reports



Scheduled Reports Received

Show 10 entries

Report Name	Report Type	Report Date	
CERTIFICATE OF IMMUNIZATION STATUS	PDF	01/11/2021 11:10:20 AM	Delete

Showing 1 to 1 of 1 entries

First Previous 1 Next Last



School Nurse Reports

- School Immunization Report, First Time Enterer
- Action Report
- Action Report Notice/Letter
- Action Report Notice/Letter Message
- Certificate of Immunization Status (CIS)
- Facilities Not Reporting
- Summary of School Enterers Data
- Patient Detail
- At Risk Report
- Student Compliance Report
- School Compliance Report

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selected under the “School:” section skip down to the instructions for selecting a grade.

- To run this report for more than one school at a time but not all the schools you have access to click on the name of the first location and then hold down the **ctrl** key while clicking on the names of the other locations you wish to see.
- To run this report for all the schools in your program or district do not select a location under the school list section. Click on the “–select–” option at the top of the list making it highlighted gray.

Select the grade

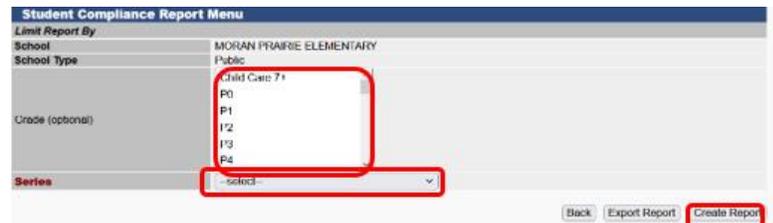
- To run for one grade, select the grade you wish to see from the grade list.
- To run this report for multiple grades, click the first grade you wish to see. Next, hold down the “**Ctrl**” key on your keyboard. While holding down the “**Ctrl**” key click on the other grades you want to run the report for.
- To see all the grades at all your schools leave the grade section blank and do not click on any grade options.

Select the Series

- Select the series by clicking on the series that aligns with the grades you are running the report for. You may need to run the report multiple times with different series/grades to get the correct status for students of different ages.

Create Report

- Click the “**Export**” button to open the report in Microsoft Excel. The report is most useful this way as you can then filter and sort the excel document and add in your own notes.
- Or click on the “**Create Report**” button to run the report in the Module.



District: VERY HEALTHY SCHOOL DISTRICT Series: GRADE K-6

WA Student Level Immunization Compliance Detail 07/15/2024														
LAST NAME	FIRST NAME	MIDDLE NAME	DOB	SCHOOL	DISTRICT	SIS ID	STUDENT ID	GRADE	ADDRESS	PHONE	EMAIL	COMPLETE	DUE NOW	CONDITION
CAT	ARTHUR		(CC>7) COND HEP B, DTP1 IPV BEFORE 08-07-09	VERY HEALTHY CHILD CARE SCHOOL DISTRICT	VERY HEALTHY SCHOOL DISTRICT	11709356		Child Care 7+	874 RAPTOR AVE SEQUIM WA	(325)965-4789		POLIO, VARICELLA, MMR		
CAT	PIPPI		(CC>2) COMPLETE NEEDS COV. POX	VERY HEALTHY CHILD CARE SCHOOL DISTRICT	VERY HEALTHY SCHOOL DISTRICT	11881931		Child Care 0-6 Not In School	HUMMINGBIRD LN SEQUIM WA	(325)965-4789		HEP-B 3 Td, POLIO, MMR, DOSE VARICELLA	DTP1/D7 Td, POLIO, MMR, DOSE VARICELLA	
			(CC>4) NEEDS	VERY HEALTHY CHILD CARE SCHOOL DISTRICT	VERY HEALTHY SCHOOL DISTRICT			Child Care 22	HUMMINGBIRD LN SEQUIM WA			HEP-B 3 Td, POLIO, MMR, DOSE VARICELLA	DTP1/D7 Td, POLIO, MMR, DOSE VARICELLA	

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School Compliance Report

This report gives a snapshot of the compliance totals for students at a school, district or group of schools in the same organization. It does not include individual student vaccination information.

It includes the total number and percent of students who are; *out of compliance, complete, in conditional status, due now for a vaccine, have exemptions, and the total students enrolled.*

For more information on this report please see the [School Compliance Report Quick Reference Guide SCCIM \(wa.gov\)](#)

Select the School

This is only an option if you have access to multiple schools under your account. If your school is already selected under the "School:" section skip down to the instructions for selecting a grade.

- Click on the name of the school you would like to run the report for.
- To run this report for all the schools in your district or program do not select a location under the school type, make sure the bubble is checked next to "District".

Select the grade

- To run for one grade, select the grade you wish to see from the grade list.
- To run this report for multiple grades, but not all of them, click the first grade you wish to see. Next, hold down the "Ctrl" key on your keyboard. While holding down the "Ctrl" key click on the other grades you want to run the report for.
- To see all the grades at all your locations, leave the grade section blank and do not click on any grade options.

Select the Series

- Select the series by clicking on the series that aligns with the grades you are running the report for. You may need to run the report multiple times with different series/grades to get the correct status for children of different ages.

Create Report

School Nurse Reports

[School Immunization Report, First Time Enterer](#)

[Action Report](#)

[Action Report Notice/Letter](#)

[Action Report Notice/Letter Message](#)

[Certificate of Immunization Status \(CIS\)](#)

[Facilities Not Reporting](#)

[Summary of School Enterers Data](#)

[Patient Detail](#)

[At Risk Report](#)

[Student Compliance Report](#)

[School Compliance Report](#)

School Compliance Report Menu

Limit Report By

School MORAN PRAIRIE ELEMENTARY

School Type

Grade (optional)

Series

Child Care 7+
P0
P1
P2
P3

-select-

Back Export Report Create Report

District: VERY HEALTHY SCHOOL DISTRICT

Grade: K,1,2,3,4,5

Series: GRADE K-6

WA School Level Immunization Compliance Detail 07/09/2024														
SCHOOL DISTRICT	SCHOOL NAME	SCHOOL TYPE	NUMBER OF STUDENTS OVERDUE	PERCENT OF STUDENTS OVERDUE	NUMBER OF STUDENTS CONDITIONAL	PERCENT OF STUDENTS CONDITIONAL	NUMBER OF STUDENTS DUE NOW	PERCENT OF STUDENTS DUE NOW	NUMBER OF STUDENTS EXEMPT	PERCENT OF STUDENTS EXEMPT	NUMBER OF STUDENTS COMPLETE	PERCENT OF STUDENTS COMPLETE	TOTAL NUMBER OF STUDENTS ENROLLED	REPORT DATE
VERY HEALTHY SCHOOL DISTRICT	VERY HEALTHY SCHOOL ELEMENTARY	Public	19	42.2%	0	0.0%	4	8.8%	19	42.2%	7	15.5%	45	07/09/2024
Y			19	42.2%	0	0.0%	4	8.8%	19	42.2%	7	15.5%	45	07/09/2024

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- Click the “**Export**” button to open the report in Microsoft Excel. The report is most useful this way as you can then filter and sort the excel document and add in your own notes.
- Or click on the “**Create Report**” button to run the report in the Module.

Annual Immunization Reporting

An active user of the School and Child Care Immunization Module (who keeps the Roster up to date and enters missing immunization dates and exemptions), does not have to file an Annual Immunization report.

For School and Child Care Immunization Module users, the report will be pulled from the School and Child Care Immunization Module on your behalf. To report through the School and Child Care Immunization Module, you need to make sure your rosters are up to date.

An up-to-date roster means that all students are listed on it in the correct grade and any students who no longer attend this school have been removed. All missing vaccinations, exemptions and evidence of immunity have been entered when you have parents’ consent to do so.

As previously noted, do not use the “complete Annual School Report” or “WA Annual School Report – Print Blank Worksheet” from the reports page. These reports do not apply to Washington State.

More information on School Reporting can be found here: [Public and Private K-12 Schools Immunization Reporting](#) | [Washington State Department of Health](#)

Additional Resources

www.doh.wa.gov/schoolmodule

www.doh.wa.gov/SCCI

[IIS Training Materials](#)

Contact us at: SchoolModule@doh.wa.gov

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Appendix A: Examples of Medically Verified Immunization Records

Official lifetime immunization record from WA or another state with a unique healthcare provider or clinic stamp, or another form of written healthcare provider documentation, such as a provider signature



Hepatitis B (Hep B)		
Dose #	Date Given	Physician/Clinic
1	1/25/00	Dr. Carter's clinic
2	4/10/00	Dr. Carter's clinic
3	10/12/00	Dr. Carter's clinic
Diphtheria, Tetanus, Pertussis (DTaP)		
Dose #	Date Given	Physician/Clinic
1	5/11/00	Dr. Carter's clinic
2	10/12/00	Dr. Carter's clinic
3	10/30/03	Dr. Carter's clinic
4	3/3/05	Dr. Heitink's clinic
5	/ /	
	/ /	
Tetanus diphtheria (Td)	/ /	
	/ /	
Booster Dose Every Ten Years	/ /	
	/ /	

Haemophilus influenzae type b (Hib)				
Dose #	Date Given	Physician/Clinic		
1	5/11/00	Dr. Carter's clinic		
2	10/12/00	Dr. Carter's clinic		
3	10/30/03	Dr. Carter's clinic		
4	/ /			
Polio				
Dose #	IPV	OPV	Date Given	Physician/Clinic
1	✓		4/10/00	Dr. Carter's clinic
2	✓		10/12/00	Dr. Carter's clinic
3	✓		10/30/03	Dr. Carter's clinic
4	✓		3/3/05	Dr. Heitink's clinic
			/ /	
			/ /	
Pneumococcal Conjugate (PCV)				
Dose #	Date Given	Physician/Clinic		
1	8/2/01	Dr. Carter's clinic		
2	/ /			
3	/ /			
4	/ /			

Measles, Mumps, Rubella (MMR)			
Type of Vaccine	Dose #	Date Given	Physician/Clinic
MMR	1	8/2/01	Dr. Carter's clinic
MMR	2	3/3/05	MARK A. HEITINK MD
MMR		/ /	
Measles		/ /	
Mumps		/ /	
Rubella		/ /	
Varicella (Var)			
Dose #	Date Given	Physician/Clinic	
1	8/2/01	Dr. Carter's Clinic	
	/ /		
Hepatitis A (Hep A)			
Dose #	Date Given	Physician/Clinic	
1	/ /		
2	/ /		
Allergies/Vaccine Reactions:			

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Official lifetime immunization record from another country with a unique healthcare provider or clinic stamp or provider signature; or official immigration immunization records

CADA VEZ QUE LLEVE A SU HIJA O HIJO ADOLESCENTE A LA UNIDAD MÉDICA, SOLICITE AL PERSONAL MÉDICO O DE ENFERMERÍA, QUE:

- Revise su Cartilla Nacional de Salud
- Vigile su peso y estatura
- Le realice las actividades de protección específica, principalmente la aplicación de las vacunas que correspondan
- Le informe de las acciones de prevención de enfermedades y de las pruebas de detección de acuerdo a la edad
- Registre su próxima cita
- Le oriente y capacite sobre los cuidados para conservar o recuperar la salud de su hijo o hija en forma individual o colectiva
- Anote en su Cartilla la fecha de las acciones que le practican

VIGILE QUE SE REALICEN A SU HIJO O HIJA ADOLESCENTE TODAS LAS ACCIONES CORRESPONDIENTES EN ESTA CARTILLA. SU PARTICIPACIÓN ES ESENCIAL PARA MANTENER SU SALUD.

IDENTIFICACIÓN: C.P.D. SANGÜÍNEO Y BIR

APELLIDOS Y NOMBRE: [REDACTED]

AFILIACIÓN / MATRÍCULA / EMPLEADO: [REDACTED]

UNIDAD MÉDICA: Hospital Comunitaria Huancayo

CONSULTORIO N.º: 3 H3

DATOS GENERALES: EDAD: [REDACTED] SEXO: [REDACTED]

DOMICILIO: Calle y número: Huancayo
Calle y número: Huancayo
CALLE Y NÚMERO: Huancayo
CALLE Y NÚMERO: Huancayo

LUGAR Y FECHA DE NACIMIENTO: Huancayo
LOCALIDAD / MUNICIPIO O DELEGACIÓN: Huancayo
C.P.: Huancayo
ENTIDAD FEDERATIVA: Huancayo

FECHA: 01/01/2001

ADMINISTRACIÓN	ANEXO	PREVENCIÓN DE ENFERMEDADES	PREVENCIÓN DE LESIONES	PREVENCIÓN DE ACCIDENTES	PREVENCIÓN DE ENFERMEDADES TRANSMISIBLES	PREVENCIÓN DE ENFERMEDADES NO TRANSMISIBLES
PREVENCIÓN DE ENFERMEDADES TRANSMISIBLES	PREVENCIÓN DE ENFERMEDADES NO TRANSMISIBLES	PREVENCIÓN DE LESIONES	PREVENCIÓN DE ACCIDENTES	PREVENCIÓN DE ENFERMEDADES TRANSMISIBLES	PREVENCIÓN DE ENFERMEDADES NO TRANSMISIBLES	PREVENCIÓN DE LESIONES

INFLUENZA ESTACIONAL:

INFLUENZA ESTACIONAL	INFLUENZA ESTACIONAL	INFLUENZA ESTACIONAL	INFLUENZA ESTACIONAL
INFLUENZA ESTACIONAL	INFLUENZA ESTACIONAL	INFLUENZA ESTACIONAL	INFLUENZA ESTACIONAL

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Immunization Record printed from a healthcare provider, clinic or hospital's Electronic Health Record

ROCKWOOD
Rockwood Clinic- Medical Records
400 East Fifth Avenue PO Box 3649 Spokane, WA 99220-3649
509-342-3960

October 30, 2014
Page 1

Patient Information
For: [REDACTED] MRN: 002124781 DOB: 01/18/2007

CONFIDENTIAL - Do not re-release without proper authorization

***Immunization Record-2011**
Immunization Record for: [REDACTED]

Vaccine	1	2	3	4	5	6
HepB	01/18/2007	03/16/2007	05/24/2007	07/19/2007		
Hepatitis B						
DTP	03/15/2007	05/24/2007	07/19/2007	05/06/2008	02/02/2011	
Diphtheria, Tetanus, Pertussis						
HIB	03/16/2007	05/24/2007	07/19/2007	04/14/2010		XXXXXXXXXX
Haemophilus influenzae Type b						
IPV	03/15/2007	05/24/2007	07/19/2007	02/02/2011		
Inactivated Poliovirus						
MMR	05/06/2008	02/02/2011		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
Measles, Mumps, Rubella						
Varicella	#1 given 05/06/2008	#2 given 02/02/2011		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
Pneumococcal	03/15/2007	05/24/2007	07/19/2007			
Hep A				XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
Hepatitis A						
Tetanus Booster	Flu Shot Date of Last Flu Vax: 11/11/2009	Last Two (2) Documented Flu Vax: Flu-Historical (11/11/2009)	H1N1 #1 Date of Last: H1N1 #2 Date of Last:	Pneumovax Date of Last:	Meningococcal Vaccine Given:	
Tdap Given: Tdap: may be due		Flu Vax #2 Date of Last:			Meningococcal #2	
Other Vaccines						
HPV	Vaccine/ Date of Last:	Vaccine/ Date of Last:	Vaccine/ Date of Last:	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
Rotavirus	Vaccine/ Date of Last:	Vaccine/ Date of Last:	Vaccine/ Date of Last:	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX
Zostavax	Vaccine/ Date of Last:	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX

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Immunization Record printed from a healthcare provider, clinic or hospital's Electronic Health Record with a written note or addition

HODD MEDICAL GROUP, INC. 018/A LAKE GRANBURY PRMAR

[REDACTED] (Id #5179, dob: 04/02/2004)

Vaccination History

Vaccine	Type	Date Given	Route	Site	Lot#	Mfg	Exp Date	Date on VIS	VIS Given	Vaccinator
Diphtheria, Tetanus, Pertussis	DTaP	04/16/08	IM	RT	act14p054bs	GLAXOSMIT HKLINÉ		05/17/07	04/15/08	kbales
	DTaP	07/07/05							07/07/05	
	DTaP-HepB-IPV	10/07/04							10/07/04	
	IPV	05/10/04							05/10/04	
	DTaP-HepB-IPV	05/01/04							05/01/04	
	IPV	03/28/05							03/28/05	
	HB	10/07/04							10/07/04	
	HB	05/10/04							05/10/04	
	HB	05/01/04							05/01/04	
	HepA	04/15/08	IM	LT	aharb216ba	GLAXOSMIT HKLINÉ		03/21/06	04/15/08	kbales
	HepA	04/24/08							04/24/08	
	DTaP-HepB-IPV	10/07/04							10/07/04	
	IPV	05/01/04							05/01/04	
	DTaP-HepB-IPV	05/01/04							05/01/04	
	IPV	11/14/05							11/18/05	
	TIV	10/07/04							10/07/04	
	TIV	11/14/05							11/18/05	
	MMR	04/15/08	SQ	LT	0418u	MERCK & CO.		03/13/06	04/15/08	kbales
	MMR	03/28/05							03/28/05	
	PCV7	03/28/05							03/28/05	
	PCV7	10/07/04							10/07/04	
	PCV7	05/10/04							05/10/04	
	PCV7	05/01/04							05/01/04	
	IPV	04/15/08	SQ	LT	z0018	AVERTIS PASTEUR		01/01/00	04/15/08	kbales
	DTaP-HepB-IPV	10/07/04							10/07/04	
	IPV	05/10/04							05/10/04	
	DTaP-HepB-IPV	05/01/04							05/01/04	
	IPV	04/15/08	SQ	RT	1787u	MERCK & CO.		04/13/03	04/15/08	kbales
	Var	07/07/05							07/07/05	

Hep B 4-2-04 Merk Lot # 1022 N Exp 3-06
 Given @ Lake Granbury Medical Center

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Immunization Record printed from the WA IIS or the IIS of another state

Use required on or after July 1, 2015.

Tennessee Department of Health

CERTIFICATE OF IMMUNIZATION



TEMPORARY NEW 7 GRADE, 13 YEARS OLD, 01/15/2002

Child's Name (Last name, first name, middle) Birthdate (mm/dd/yy)

Parent/Guardian Name (Last name, first name, middle) (154)789-5623

Phone (please include area code xxx-xxx-xxxx) 1212 OLD HICKORY BLVD

Address Address City State Zip Code

HERMITAGE TENNESSEE 37076

City State Zip Code

* Unless specifically exempted by law, Tennessee law requires a certificate on file for each child in attendance in any school or child care facility in Tennessee. Detailed instructions for this form and explanation of requirements are in "Instructions for Completion of Immunization Certificates" and the "Official Immunization Schedule" at the Tennessee Department of Health website: <http://health.state.tn.us/CEDS/Immunized.html> and on the Tennessee Web Immunization System.

VACCINE	DATE	DATE	DATE	DATE	DATE	DATE	Registered (Y)	Birthdate (YY)	Entry (YY)	Medical Exemption (X)
Section 2a. Required Vaccines for School or Child Care Attendance (Dates Required)										
Hib <small>Child Care Only (<5 years)</small>										
Pneumococcal (PCV) <small>Child Care Only (<5 years)</small>										
DTP, DTap, DT, Td	09/22/2015	10/24/2014								
Polio	10/24/2014	09/22/2015								
Hepatitis B <small>Check box if 15-19 years 2-dose schedule used</small>	10/24/2014	09/22/2015								
Hepatitis A <small>Child Care Effective 7/2010 Kindergarten Effective 7/2011</small>										
Measles	10/24/2014	09/22/2015								
Mumps	10/24/2014	09/22/2015								
Rubella	10/24/2014	09/22/2015								
Varicella	10/24/2014	09/22/2015								
Tdap Booster <small>7th Grade Entry Only</small>	09/22/2015									
Section 2b. Recommended Vaccines (Documentation Optional)										
Rotavirus										
Influenza										
Meningococcal										
HPV										

Section 3. Provider Assessment (select one) (not valid if blank)

A) Temporary Certificate - Expires 12/31/2015
Expiration date one month after date next catch-up immunization is due.

B) Up to Date for Child Care Entry and <18 Months of Age
Only if requirements incomplete, fill up to date for age. Expires at 18 months of age.

C) Complete for Child Care / Pre-School
Fulfills all requirements for child care / pre-school or pre-K under 5 years of age.

D) Complete K-6th Grade
Fulfills requirements, Kindergarten through 6th grade.

E) Complete 7th Grade or Higher
Fulfills requirements, 7th grade or higher.

* If age 4 years and falls requirements for Pre-School and Kindergarten, check BOTH Rows C and D.

Section 4. (Required) Printed or Stamped Name, Address, Phone of Qualified Healthcare Provider (MD, DO, PA, Advanced Practice Nurse or Health Department):

510 STREET MEDICAL CENTER
210 5TH STREET
CLARKSVILLE, TENNESSEE
37043
(931)542-0610

Validated by the TN State Immunization Information System 09 22 2015

Certified by (Signature/Stamp) or Textile Date of Issue

PH-410 (Rev. 4/12) Certificate ID: 9148811711442927169854 828-468

SCHOOL AND CHILD CARE IMMUNIZATION MODULE TRAINING

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A CIS with either typed or written dates **is NOT** medically verified *unless* it has a healthcare provider stamp of signature

Ann Christy

Staff Signature
Exemption: YES NO

Washington State Department of Health

CERTIFICATE OF IMMUNIZATION STATUS

Washington State Law (RCW 28A.210.100) requires that all children have a completed Certificate of Immunization Status on file at the school, preschool or a child care facility that they attend.

Child's Last Name: [REDACTED] First Name: [REDACTED] Middle Name: [REDACTED] Sex: **M** Birthdate: **05/30/2003**

Parent/Guardian Name: [REDACTED] Captain Public

Immunization	Type of Vaccine	Dose	Date Given			Immunization	Type of Vaccine	Dose	Date Given		
			Month	Day	Year				Month	Day	Year
HEP B (HepV Hepatitis B)	Hep B	1	08	04	2003	MMR (Measles (Rubella) Mumps & Polio)	MMR	1	08	04	2004
	Hep B	2	08	04	2004		MMR	2	11	18	07
		3	11	18	07		MMR				
		4					MMR				
DTaP/DT (Diphtheria, Tetanus, Pertussis)	DTaP	1	08	04	2003	VARICELLA (Chickenpox)	VACCINE	1	08	04	2004
	DTaP	2	10	23	2003		VACCINE	2	11	18	07
	DTaP	3	01	16	2004		DISEASE	YES		NO	
	DTaP	4	08	04	2004		Approximate date of age at onset of disease				
Td/Tdap	Td	1				OTHER VACCINES					
	Td	2									
	Td	3									
HIB (Haemophilus influenzae B)	Hib	1	08	04	2003						
	Hib	2	10	23	2003						
	Hib	3	01	16	2004						
	Hib	4	08	04	2004						
POLIO (OPV (by mouth) IPV (by injection))	IPV	1	08	04	2003						
	IPV	2	10	23	2003						
	IPV	3	01	16	2004						
	IPV	4	11	18	07						
	IPV	5									

→ I certify that the information provided here is correct and verifiable ←

X _____ Date: _____
Signature of Parent or Guardian

DOH 348-013(X) Revised January 2005

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