

Citywide Immunization Registry (CIR)

Facility Manager Guide for Immunizing Facilities:
How to Register and Update Facility and Contact Information;
Designate a Site Security Administrator (SSA)

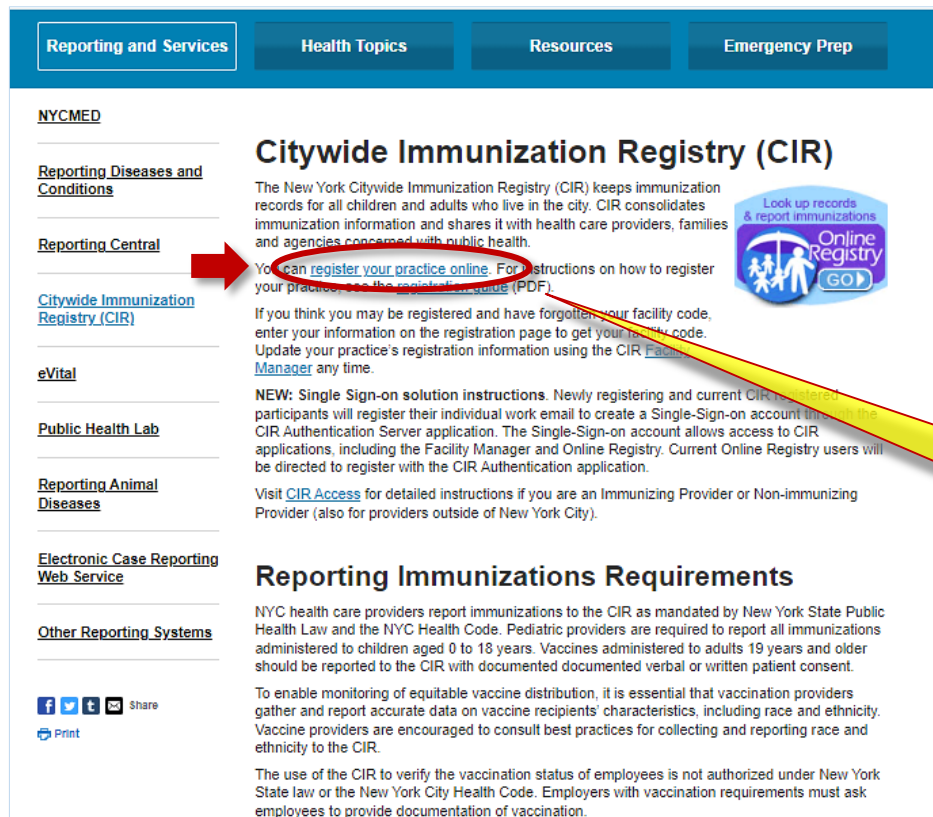
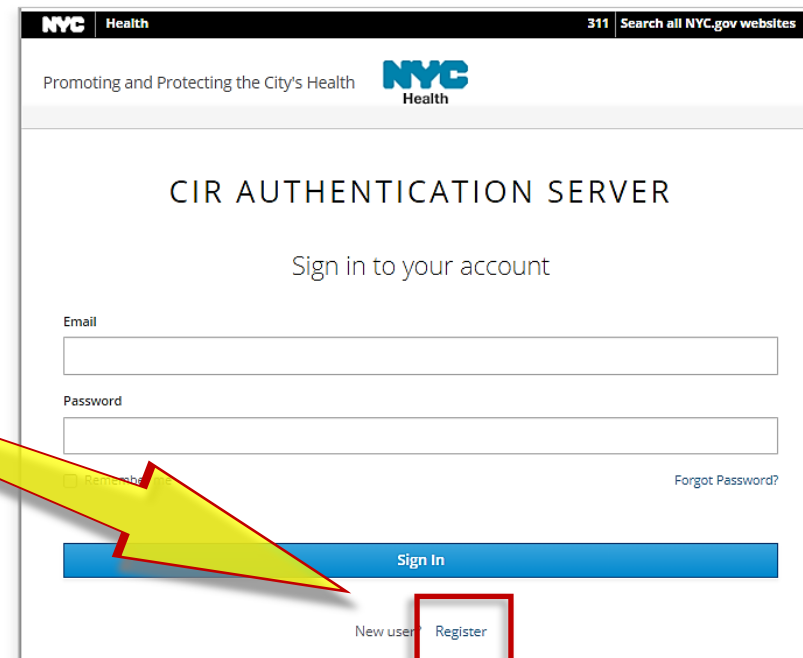
Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Registering a New Facility

To access the **CIR Facility Manager** application, first visit www.nyc.gov/health/cir and click on the link “[register your practice online](#)” to create a Single Sign-on account via the CIR Authentication Server tool. Please use Google Chrome while accessing these pages and forms for best results.

Creating CIR Authentication Account

To access the **Facility Manager dashboard**, first time users must create an account through the [CIR Authentication Server](#). Click on **Register** under the **Sign In** button. Enter your first name, last name, email and create a password. **Do not submit your personal home email address information or use a general email address, such as “frontdesk@practicename.com”.** An email account should be an individual account and not shared with another individual. Once finished, click Register.

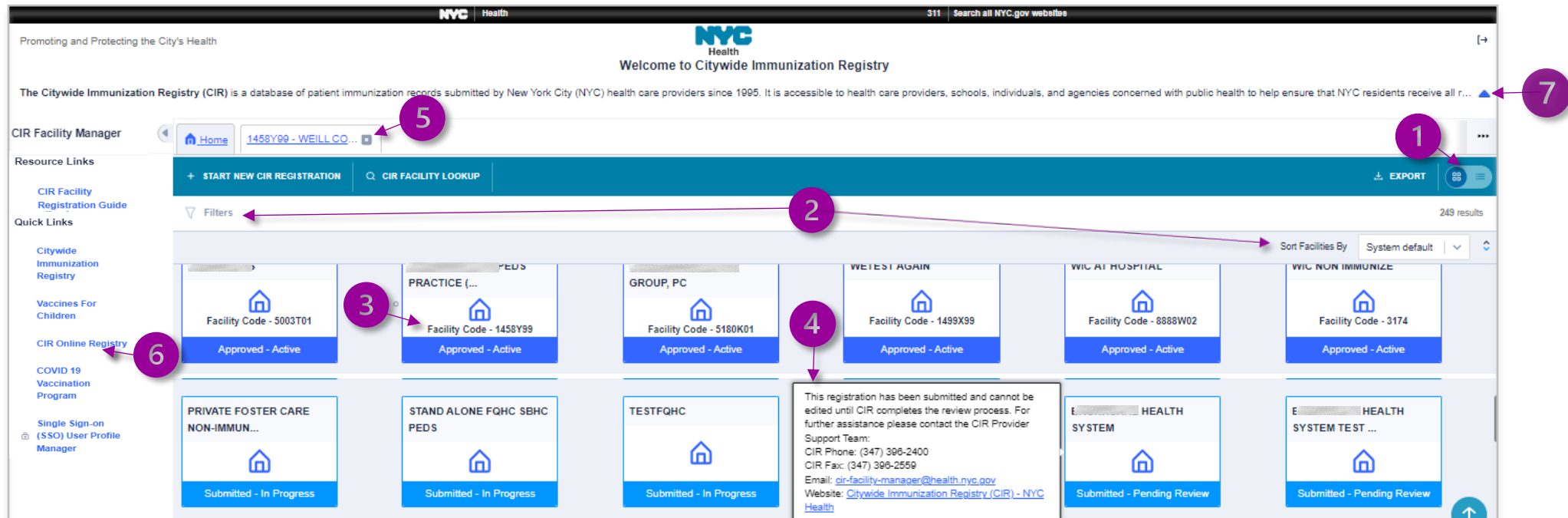
Note: If you forget your password, click [Forgot Password?](#) on the [CIR Authentication Server](#) In screen. Follow the short series of prompts to auto-reset your password via email and to receive a code to enter into the screen.

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Logging in to the CIR Authentication Account

Once you have created an account, you may access your Facility Manager dashboard by returning to the [CIR Authentication Server](#), or <https://immunize.nyc/prod/cir-facility-manager>. Sign-in via the **CIR Authentication Server** by entering your email address and password, then click **Sign In**.

Dashboard Overview



The screenshot shows the CIR Facility Manager dashboard. The top navigation bar includes the NYC Health logo, a search bar, and a '311' button. The main header reads 'Welcome to Citywide Immunization Registry'. Below this, a brief description of the CIR is provided. The dashboard is divided into several sections:

- Left Navigation Panel:** Contains links for 'CIR Facility Manager', 'Resource Links', 'Quick Links', and 'Single Sign-on (SSO) User Profile Manager'.
- Top Navigation Bar:** Includes buttons for 'START NEW CIR REGISTRATION', 'CIR FACILITY LOOKUP', and 'EXPORT'.
- Main Content Area:** Displays a grid of facility tiles. Each tile shows the facility name, code, and status (e.g., 'Approved - Active', 'Submitted - In Progress', 'Submitted - Pending Review').
- Callouts:**
 - 1: Expand button in the top right corner.
 - 2: Filter button in the top navigation bar.
 - 3: Facility tile for 'PRACTICE (...)' with code '1458Y99'.
 - 4: Facility tile for 'GROUP, PC' with code '5180K01'.
 - 5: Facility tile for 'PRACTICE (...)' with code '1458Y99'.
 - 6: 'CIR Online Registry' link in the left navigation panel.
 - 7: Expand button in the top right corner.


Facility Manager Dashboard Navigation:

- 1 Switch to tile or grid view
- 2 Filter by submission status (for practices with multiple sites): Approved (Active/Inactive site); Not Submitted-Registration in Progress; Submitted -in Progress; Submitted-Pending Review. Sort Facilities by Facility name, Facility address, Facility code, Registration status, Last accessed date, or Last modified date
- 3 Once approved, facility codes are displayed on tiles
- 4 For other statuses, click on facility name title for a message to be displayed
- 5 Use tabs to view multiple sites simultaneously
- 6 Quick links can be accessed from the left navigation panel. Users with Online Registry accounts can directly access the OR application after set-up.
- 7 To view the Welcome to Citywide Immunization Registry contents at any time click on the expand button on the top right

NOTE: The application will time-out if left idle for 30 minutes; a three-minute warning will display before the session ends.

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Start a New Registration

Once logged in to the **CIR Facility Manager** application, review the **Welcome** message and click **OK** at the bottom to agree to the NYS Public Health Laws, Rules and Regulations. To view this content at anytime, click the Hide/Show button .

Welcome to Citywide Immunization Registry

The **Citywide Immunization Registry (CIR)** is a database of patient immunization records submitted by New York City (NYC) health care providers since 1995. It is accessible to health care providers, schools, individuals, and agencies concerned with public health to help ensure that NYC residents receive all recommended immunizations. If you are a health care provider, school, or agency concerned with health, and if you are interested in CIR access and reporting, and/or are an organization that is participating in CMS Promoting Interoperability program, you may register here to obtain a facility code. By registering you are agreeing to report immunizations to the CIR as mandated by [New York State Public Health Law](#) and the [NYC Health Code](#).

All providers are required to report all immunizations administered to children aged 0 to 18 years.


Pharmacists and Registered Nurses are required to report immunizations administered to persons 19 years and older in NYC with the patient's verbal or written consent; other providers are strongly encouraged to report adult immunizations with patient consent.

Reporting of all administered COVID-19 vaccine doses to the CIR is required within 24 hours of administration, as specified by the NYS Department of Health and in the COVID-19 Vaccination Provider Agreement. **Reporting and access to immunization records is accomplished by** either connecting to CIR via your EHR or manually through your Online Registry account, or both.

By registering with CIR, upon approval, **you will receive a CIR Facility Code and the following:** (1) regular reports, including Doses Administered Reports (for immunizing facilities); (2) alerts and notifications, (3) if eligible, you may sign up for access to the [Online Registry](#) which allows authorized users to look-up records, print official reports, create and save school health exam forms and generate reminder/recall lists; (4) invitation to COVID 19 vaccine ordering. As part of the registration **a valid email address of the provider-in-charge is required.**

If you vaccinate children (0 through 18 years) who are covered by Medicaid or who are uninsured, underinsured, American Indian or Alaska Native, you are encouraged to participate in the [Vaccines for Children \(VFC\)](#) program.


In partnership with the [NYC Healthy Homes Program](#) providers may look up lead test histories, report test results, and refer children with asthma living with pests for a home inspection. **If you think you may be registered and have forgotten your facility code**, enter your information on the registration page to get your facility code.

 To register, vaccinating practices will need their NPI number of the organization, the individual NPI number of the provider-in-charge and their NYS Professional License number, and contact information. Practices with multiple locations must register each site. Non-vaccinating agencies or organizations will be prompted to supply the same information on providers who oversee services to individuals in their care. Enter work information; do not submit your personal home address information. **Do not use a general email address, such as [frontdesk@practicename.com](#).**

See [CIR Facility Registration Guide](#) for detailed instructions.

OK

After the window closes, to start a new registration, click on **+ START NEW CIR REGISTRATION**

 To register, vaccinating practices will need their NPI number of the organization, the individual NPI number of the provider-in-charge and their NYS Professional License number, and contact information. Non-vaccinating agencies or organizations will be prompted to supply the same information on providers who oversee services to individuals in their care. See [CIR Facility Registration Guide](#) for detailed instructions.

CIR Facility Manager

Quick Links

[Home](#)

+ START NEW CIR REGISTRATION [CIR FACILITY LOOKUP](#) [EXPORT](#)

Citywide Immunization Registry

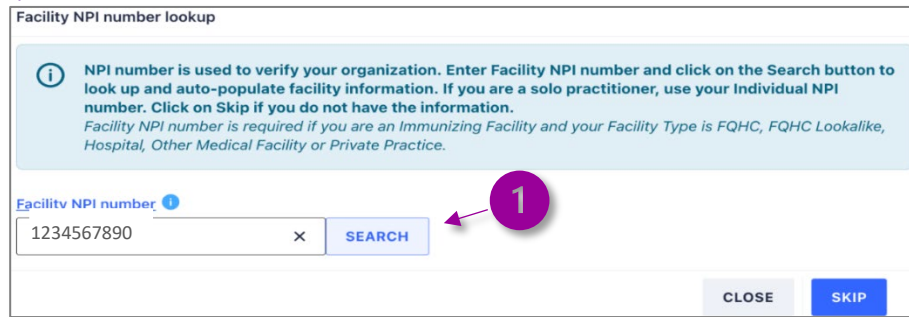
Filters

257 results

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

NPI Lookup (Immunizing Facilities)

- 1 Enter your Facility NPI Number and click **SEARCH** to verify the facility. If your facility does not have an NPI, choose SKIP. **Non-immunizing facilities**, click **SKIP**.
NOTE: For immunizing providers, choosing **SKIP** allows you to continue, but you will need to provide the NPI number during the session.



Facility NPI number lookup

NPI number is used to verify your organization. Enter Facility NPI number and click on the Search button to look up and auto-populate facility information. If you are a solo practitioner, use your individual NPI number. Click on Skip if you do not have the information. Facility NPI number is required if you are an Immunizing Facility and your Facility Type is FQHC, FQHC Lookalike, Hospital, Other Medical Facility or Private Practice.

Facility NPI number **SEARCH**

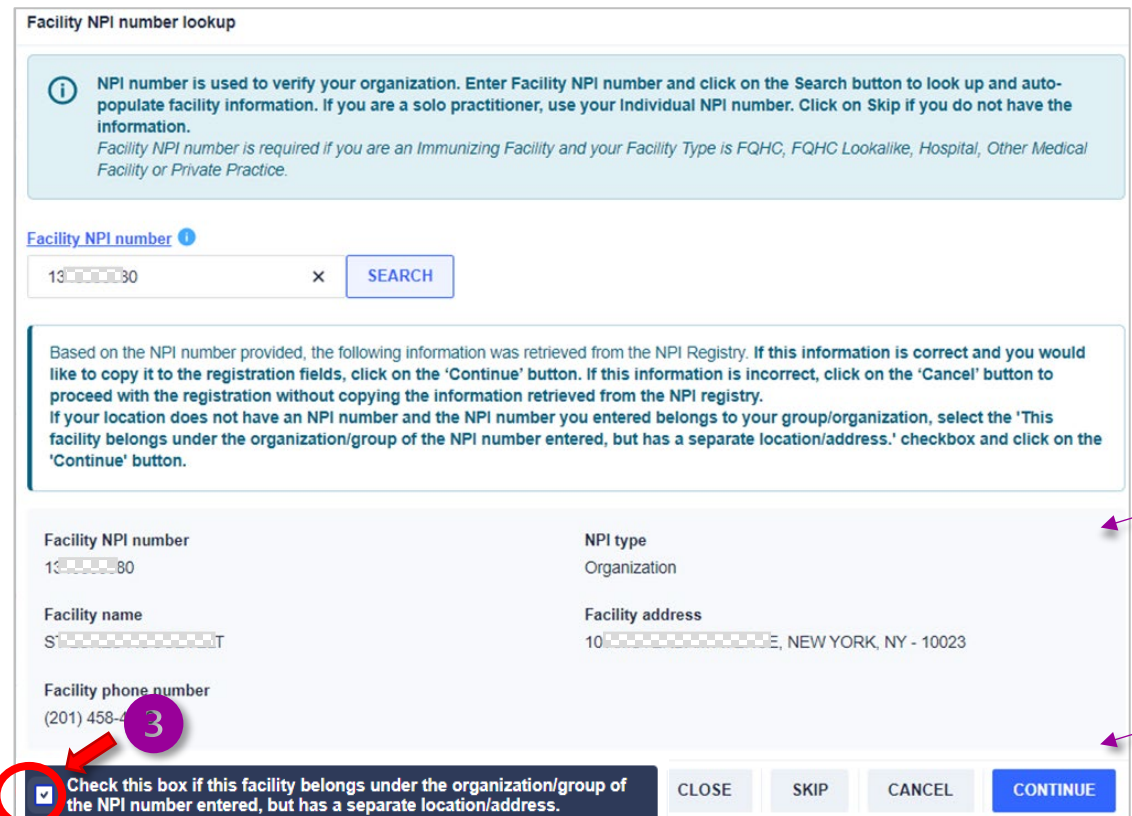
1

CLOSE **SKIP**

Tooltip for Facility NPI Number:

Enter the 10-digit National Provider Identification (NPI) number associated with your organization. If you do not know your organization NPI, you can look it up by clicking on the Facility NPI number link. If you do not have an organization NPI, enter your individual NPI.

- 2 After searching, the facility information associated with the NPI will be displayed, as shown in the gray section on the lower half of screen to the right.
- 3 **For practices with multiple locations: Check the box** if the facility you are registering belongs to the organization/group of the NPI number entered but is a separate location or address.
- 4 Make sure all contact information is current. If all information is correct, click **CONTINUE**. The information will be **copied** into the registration Facility Details fields which may be edited prior to submitting. If the information is incorrect, click **CANCEL** to proceed with the registration without copying the information, then manually enter your information.



Facility NPI number lookup

NPI number is used to verify your organization. Enter Facility NPI number and click on the Search button to look up and auto-populate facility information. If you are a solo practitioner, use your Individual NPI number. Click on Skip if you do not have the information. Facility NPI number is required if you are an Immunizing Facility and your Facility Type is FQHC, FQHC Lookalike, Hospital, Other Medical Facility or Private Practice.

Facility NPI number **SEARCH**

Based on the NPI number provided, the following information was retrieved from the NPI Registry. If this information is correct and you would like to copy it to the registration fields, click on the 'Continue' button. If this information is incorrect, click on the 'Cancel' button to proceed with the registration without copying the information retrieved from the NPI registry. If your location does not have an NPI number and the NPI number you entered belongs to your group/organization, select the 'This facility belongs under the organization/group of the NPI number entered, but has a separate location/address.' checkbox and click on the 'Continue' button.

Facility NPI number 13...80	NPI type Organization
Facility name S...	Facility address 10...E, NEW YORK, NY - 10023
Facility phone number (201) 458-4...	

3


☒ Check this box if this facility belongs under the organization/group of the NPI number entered, but has a separate location/address.

2 **4**

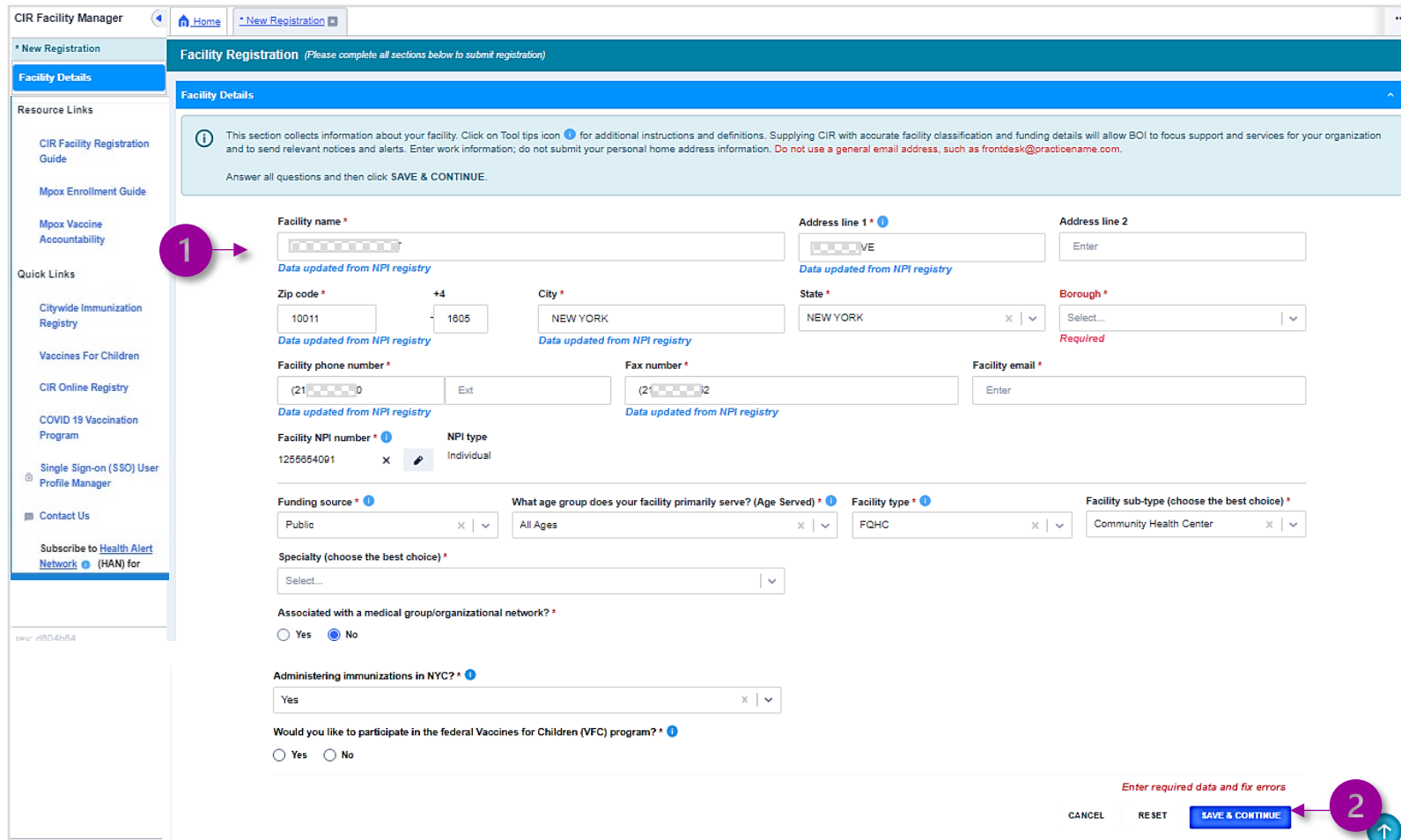
CLOSE **SKIP** **CANCEL** **CONTINUE**

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Adding Facility Details

This section collects information about your facility. Based on your answers, you will see different options appear on the screen. Supplying CIR with accurate facility classification and funding details will allow the Bureau of Immunization to focus support and services for your organization and to send relevant notices and alerts. . Click on Tool tips  for additional instructions and definitions.



- 1 **Enter your facility details:** Address, Phone and Fax numbers, Email, Funding Source, Ages Served, Facility type, specialty, and group/organization affiliation.
- 2 Answer all questions, then click **SAVE & CONTINUE**.




CIR Facility Manager | Home | New Registration


Facility Registration (Please complete all sections below to submit registration)

Facility Details

 This section collects information about your facility. Click on Tool tips icon  for additional instructions and definitions. Supplying CIR with accurate facility classification and funding details will allow BOI to focus support and services for your organization and to send relevant notices and alerts. Enter work information; do not submit your personal home address information. **Do not use a general email address, such as `frontdesk@practice.com`.**

Answer all questions and then click **SAVE & CONTINUE**.

Facility name * 

Address line 1 *  **Address line 2**

Zip code * **City *** **State *** **Borough ***

Facility phone number * **Facility fax number ***

Facility NPI number * **NPI type**

Funding source * **What age group does your facility primarily serve? (Age Served) *** **Facility type *** **Facility sub-type (choose the best choice) ***

Specialty (choose the best choice) *

Associated with a medical group/organizational network? * ☐ Yes ☒ No

Administering immunizations in NYC? *

Would you like to participate in the federal Vaccines for Children (VFC) program? * ☐ Yes ☐ No

SAVE & CONTINUE

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Tooltips for Facility Details screen:

- **Address:** Do not use your home address to register with CIR. Enter the address of the facility, of the vaccination site.
- **Facility NPI number:** Enter the 10-digit National Provider Identification (NPI) number associated with your organization. If you do not know your organization NPI, you can look it up by clicking on the Facility NPI number link. If you do not have an organization NPI, enter your individual NPI.
- **Funding Source:** Public = mostly supported by government fund; Private = mostly supported by an individual or group
- **What age group does your facility primarily serve? (Age Served):** Adult = 19 years or older; Pediatric = Under 19 years; or All ages = Includes both adult and pediatric
- **Facility Type:**
 - FQHC** - Community-based health centers that qualify for funding under section 330 of the Public Health Service (PHS) Act to provide comprehensive services to an underserved area or population.
 - FQHC Look Alike** - Community-based health centers that meet eligibility requirements for funding but do not receive grants under section 330 of the Public Health Service (PHS) Act.
 - Hospital** - Includes satellite sites, clinics, and networks.
 - Private Practice** - Independent medical practices where physician is the sole proprietor and is not part of hospital network.
 - Other Medical Facility** - All other facilities (If unsure see subtypes)
 - Non-Immunizing Facility** - Facilities that do not immunize patients but need access to immunization related activities (If unsure, See subtypes).
 - Schools** - Schools or facilities part of a school district. Select "Other Medical Facility" for School Based Health Centers. Select "Non-Immunizing facility" for Camps and Early Intervention
- **School ATS number:**
Enter the School ATS Number, which is the combined district number and school location number, e.g., 01Q125.: **[for schools only]**.
- **Specify group/organization:**
If your group/network is not listed, please choose "Other". Next, the "Specify 'Other' group/organization" field will appear where you will add group name.
- **Would you like to participate in the federal Vaccines for Children (VFC) program? [for Pediatric practices only]**
If you selected "**Yes**" you will be contacted directly by this program. For more information, [click here](#).

VFC is a federally funded program that provides vaccines at no cost to children birth through 18 years who might otherwise not be vaccinated because of inability to pay. To enroll in VFC, providers must serve children who are Medicaid-eligible, uninsured, underinsured, and American Indian or Alaska Native. For more information on

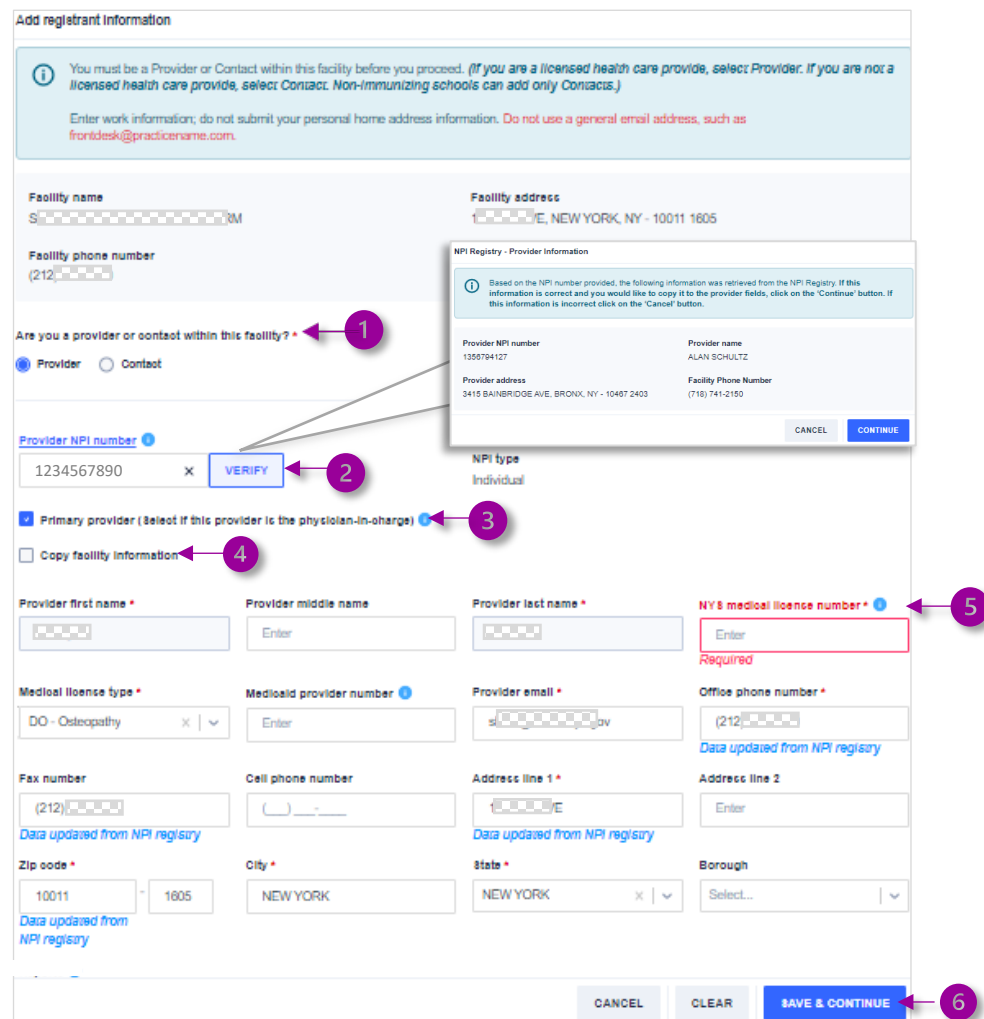
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Adding Registrant Information

After the Facility Details are saved, a screen will pop open. The **Registrant** (person filling out the initial registration) will receive the registration confirmation by email. In your practice or organization, the Registrant should be the key contact or liaison between the CIR and the practice. The Registrant may also be the physician or provider-in-charge of the practice. Additional contacts and providers may be added later in the **CIR Facility Manager**, but only the Registrant and the provider-in-charge (if entered) will receive confirmation of the registration. Click on Tool tips

 for additional instructions and definitions.


- 1 Choose, if you are a provider or a contact.
- 2 If you are a provider, enter the individual provider NPI number and click **VERIFY**. Click CONTINUE to copy the NPI Registry information or CANCEL. Information may be edited later.
- 3 Select primary provider for the physician or provider-in-charge. For non-immunizing facility, such as schools, this question will not appear. The primary provider is also the default provider, where immunization reports from the practice that do not have a provider associated with the record, the primary provider information will be used.
- 4 Select '☐ **Copy facility information**' if the address and phone number are the same as previously entered in the facility details. If the information is different, manually complete the information.
- 5 Enter the NYS medical license number and medical license type. For non-immunizing facilities, such as schools, it will not require a NYS medical license number or license type.
- 6 Answer all required questions, as noted by the *, then click **SAVE & CONTINUE**.



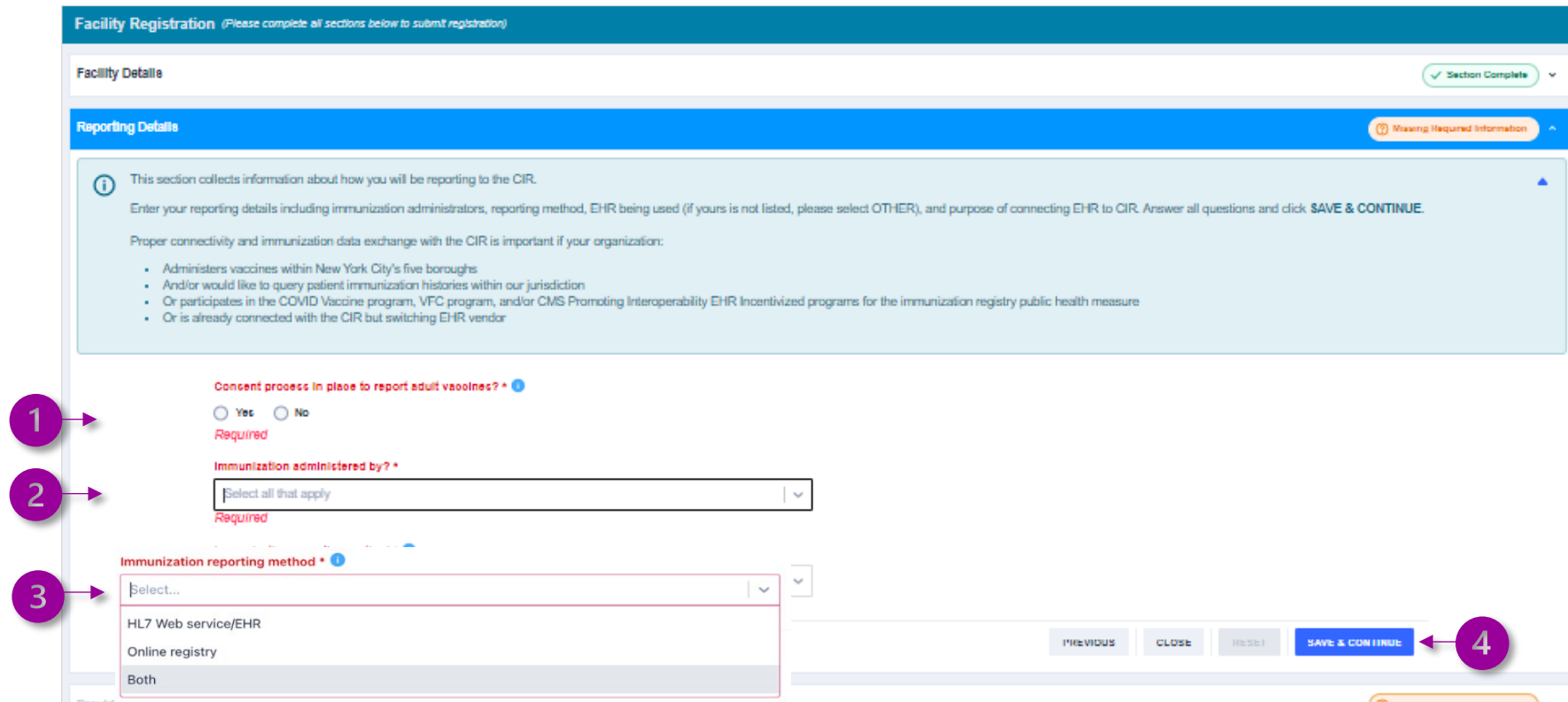
The screenshot shows the 'Add registrant information' form. It includes a header with a warning about being a provider or contact. The form has sections for Facility name, Facility address, Facility phone number, and a section for provider information. The provider information section includes a dropdown for 'Are you a provider or contact within this facility?', a text field for 'Provider NPI number' with a 'VERIFY' button, a checkbox for 'Primary provider', a checkbox for 'Copy facility information', and fields for 'Provider first name', 'Provider middle name', 'Provider last name', 'NYS medical license number', 'Medical license type', 'Medical provider number', 'Provider email', 'Office phone number', 'Fax number', 'Cell phone number', 'Address line 1', 'Address line 2', 'Zip code', 'City', 'State', and 'Borough'. The form also has 'CANCEL', 'CLEAR', and 'SAVE & CONTINUE' buttons at the bottom.

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Adding Reporting Details

This section collects information about how you will be reporting to the CIR. Based on your previous answers, you will see different options appear on the screen. Click on Tool tips  for additional instructions and definitions:

- 1 **Practices serving adults only:** Click "Yes" or "No" to indicate if your facility has a consent process in place to report adult immunizations.
- 2 Select which type(s) of providers will be administering immunizations at your facility.
- 3 Select how your facility will report immunizations: HL7 Web Service/EHR, Online Registry, or Both.
 - If using an EHR, fill in type of EHR and purpose of connecting to CIR. If your EHR is not listed, please select "OTHER". See EHR User Notes below.
 - For questions related to web service connection, contact: cir-interop@health.nyc.gov or more information visit, nyc.gov/health/cir.
 - For questions related to the Online Registry, contact cir-reset@health.nyc.gov or visit nyc.gov/health/cir.
- 4 Once all questions have been answered, click **SAVE & CONTINUE**.



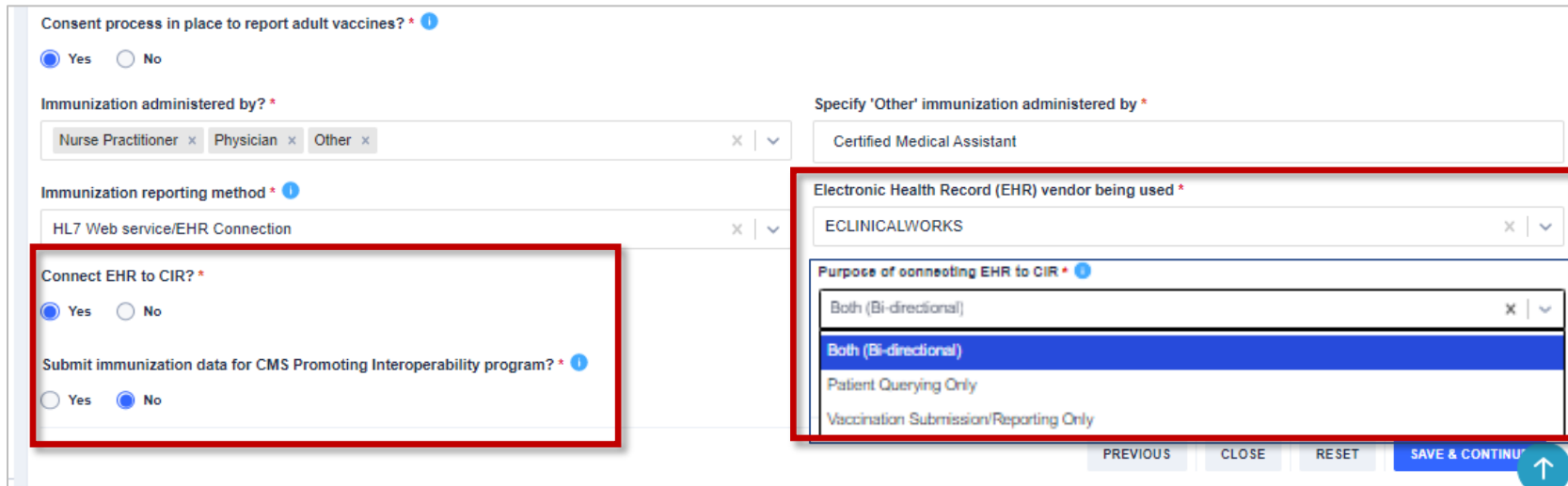
The screenshot shows the 'Facility Registration' form, specifically the 'Reporting Details' section. The form is titled 'Facility Registration (Please complete all sections below to submit registration)'. The 'Reporting Details' section is highlighted in blue and contains a 'Missing Required Information' warning. The form includes a 'Consent process in place to report adult vaccines?' question with 'Yes' and 'No' radio buttons. Below this is an 'Immunization administered by?' dropdown menu. The 'Immunization reporting method' dropdown menu is open, showing options: 'HL7 Web service/EHR', 'Online registry', and 'Both'. The 'SAVE & CONTINUE' button is highlighted in blue. Numbered callouts 1-4 point to the consent question, the provider dropdown, the reporting method dropdown, and the 'SAVE & CONTINUE' button respectively.

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EHR/HL7 Web Service User Notes

Proper connectivity and immunization data exchange with the CIR is important if your organization administers vaccines within New York City's five boroughs, and/or would like to query patient immunization histories within our jurisdictions. You can hover over the Tooltips ⓘ for assistance.

When choosing your "Immunization reporting method", additional questions about interoperability, connectivity, and your EHR vendor will display:



Tooltips in Reporting Details screen:

- **Consent Process in place to report adult vaccine?:**

Immunizations administered to individuals 19 years of age or older may be reported to CIR with the verbal or written consent of the vaccinee. ([New York State Public Health Law](#)) See sample [consent form](#) you may adopt..

- **Immunization Reporting Method:**

For more information on reporting methods, visit [How to Report and Online Registry Access](#). You will receive additional information via email regarding reporting requirements.

- **Purpose of connecting EHR to CIR?:**

Select 'Vaccination Submission/Reporting Only' if your organization is interested in reporting vaccination to the registry only. Select 'Patient Querying Only' if your agency/organization will use the CIR to look up patient immunization history. Your practice must open a ticket with your EHR vendor to add or update your immunization interface. You may add the CIR interop email address cir_interop@health.nyc.gov in the ticket so that the vendor can follow-up with our interop team for testing.

- **Submit immunization data for CMS Promoting Interoperability program?**

If your organization is participating in CMS Promoting Interoperability program and will like to attest to immunization registry reporting measure, please select 'Yes'.

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Sample Facility Registration Screens by Provider Category

For CIR classification purposes, you will be asked to select your facility type and sub-type during registration. You can refer to the examples below for guidance on how to choose the correct facility type and sub-type. If you are not sure what to select, contact CIR at cir@health.nyc.gov.

Facility Details for a Pharmacy (Retail), not affiliated with a hospital

Funding source * ⓘ <div>Private x v</div>	What age group does your facility primarily serve? (Age Served) * ⓘ <div>All Ages x v</div>	Facility type * ⓘ <div>Other Medical Facility x v</div>	Facility sub-type (choose the best choice) * <div>Pharmacy - Retail, not affiliated w... x v</div>
Associated with a medical group/organizational network? * <div><input type="radio"/> Yes <input checked="" type="radio"/> No</div>			
Would you like to participate in the federal Vaccines for Children (VFC) program? * ⓘ <div><input type="radio"/> Yes <input checked="" type="radio"/> No</div>			
Administering immunizations in NYC? * ⓘ <div>Yes x v</div>			
			<div>CANCEL RESET SAVE & CONTINUE</div>

Facility Details for a Facility located outside of NYC

Please type in your city and select either OUTSIDE NEW YORK STATE or NEW YORK STATE (OUTSIDE NYC) for your Borough.

Facility name * <div>OUTSIDE OF NYC FACILITY</div>		Address line 1 * ⓘ <div>123 AMERICA STREET</div>		Address line 2 <div>Enter</div>	
Zip code * <div>11580</div>	City * <div>VALLEY STREAM</div>	State * <div>NEW YORK x v</div>	Borough * <div>Select... MANHATTAN THE BRONX BROOKLYN QUEENS STATEN ISLAND OUTSIDE NEW YORK STATE NEW YORK STATE (OUTSIDE NYC)</div>		
Facility phone number * <div>() - Ext</div>		Fax number * <div>() -</div>		Facility email * <div>Enter</div>	
Facility NPI number ⓘ <div>Not Entered</div>					
Funding source * ⓘ <div>Select...</div>	What age group does your facility primarily serve? (Age Served) * ⓘ <div>Select...</div>				

If you have any additional questions about registering your facility with the CIR, email cir-reset@health.nyc.gov or call 347-396-2400.

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Once you have entered the facility information you will have the opportunity to **review** and **edit**.

Carefully review your Facility Name and address.

- For practices with multiple sites, the name should include the site's organization name and specific site name address.

Facility Registration (Please complete all sections below to submit registration)

Facility Details ✔ Section Complete

i This section collects information about your facility. Click on Tool tips icon **i** for additional instructions and definitions. Supplying CIR with accurate facility classification and funding details will allow BOI to focus support and services for your organization and to send relevant notices and alerts. Enter work information; do not submit personal home address information. **Do not use a general email address, such as frontdesk@practicename.com.**

Answer all questions and then click **SAVE & CONTINUE**.

Facility name *

Address line 1 * **Address line 2**

Zip code * **City *** **State *** **Borough ***

Facility phone number * **Ext.** **Fax number *** **Facility email ***

Facility NPI number *

Funding source * **What age group does your facility primarily serve? (Ages Served) *** **Facility type *** **Facility sub-type (choose the best choice) ***

Specialty (choose the best choice) *

Associated with a medical group/organizational network? * ☐ Yes ☒ No

Administering immunizations in NYC? *

Are you a provider or contact within this facility?

CLOSE **REVIEW** **SAVE & CONTINUE**

- Click **Save & Continue** when finished reviewing and editing.

NOTE: There are four registration sections: Facility Details, Reporting, Providers, and Contacts.

- During registration and updates, each section is a separate step that will lock pending CIR approval. Please wait between each section for an email of approval from CIR.
- CIR staff may contact your site for clarification and for additional information.**

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Adding Provider Information

All immunizing facilities will need to provide Provider Information. The primary provider is also the default provider. When immunizations reported from the practice do not have a provider associated with the record, the primary provider information will be used for CIR reporting purposes.

Adding Contact Information. Enter your work information; do not submit your home address or personal contact information.

- 1 Enter the individual NPI Provider information, click **VERIFY**. Click CONTINUE to copy the NPI Registry information or CANCEL. Information may be edited.

- 2 Select ☐ **Copy facility information** if the information is the same as previously entered in the facility details. If different, manually complete the information.
- 3 Select **Primary provider**, if this provider is the physician-in-charge.
- 3 Immunizing providers regularly will be sent Doses Administered-UTD reports.
- 4 Answer all required questions, as noted by the *. Click **SAVE ENTRY**.


Example of a saved entry. Click **+ Add Provider** to add additional provider contacts if needed:

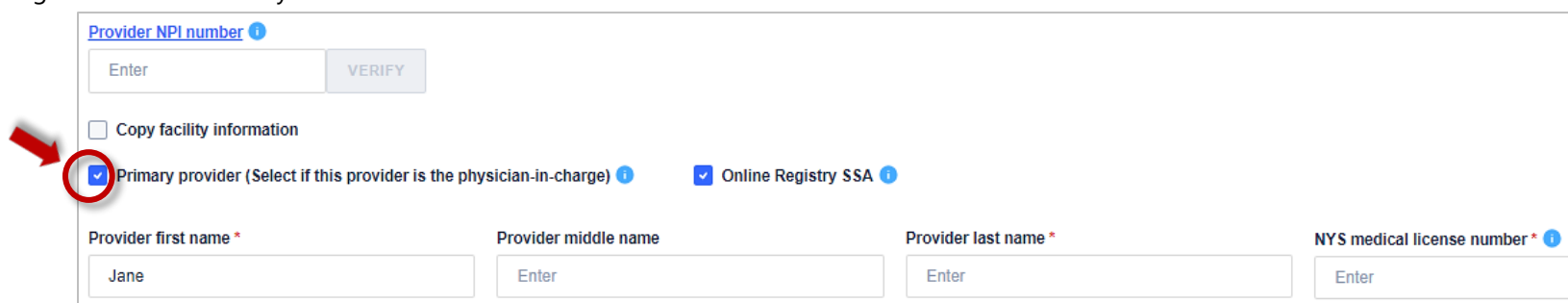
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NOTE: ☒ **One Primary Provider is required** for most facilities to be added and selected by checking the box before allowed to proceed. As part of the registration requirements, a **valid email address** of the provider-in-charge is required to receive the following:

- Reports on Doses Administered
- Up-to-Date measures for reporting facilities
- Alerts and notifications
- Access to the Online Registry
- Invite to programs, such as COVID-19 vaccine ordering, VFC, and VFA.

To assign a Primary provider, select the Primary provider checkbox when adding a provider, as shown above.

To update completed entries or entries missing the primary provider, click the edit  (pencil) icon to enable the display of primary provider selection check box. for the assignment as the Primary Provider:



The screenshot shows the 'Provider Details' form. At the top, there is a 'Provider NPI number' field with a 'VERIFY' button. Below this is a 'Copy facility information' checkbox. The 'Primary provider (Select if this provider is the physician-in-charge)' checkbox is checked and highlighted with a red circle and a red arrow. To its right is the 'Online Registry SSA' checkbox, which is also checked. Below these are four text input fields: 'Provider first name' (containing 'Jane'), 'Provider middle name' (containing 'Enter'), 'Provider last name' (containing 'Enter'), and 'NYS medical license number' (containing 'Enter').

Tooltips in Provider Details screen:

- **Primary Provider:**
Select if provider is the physician-in-charge, or the supervising pharmacist of pharmacy (independent/retail). Only one provider can be designated as Primary Provider.
- **NYS medical license number:**
Enter your 6-digit NYS medical license number.
- **Medicaid Provider number:**
Enter your 8-digit unique ID if you are enrolled to provide services to members of the Medicaid program. NYS.
- **Subscribe to Reports:** The DAR_UTD Report will be selected by default for the Primary Provider which cannot be removed.
 - DAR-UTD Report = Includes VFC Doses Administered/VFC Doses Received
 - Electronic Updates = Includes web service connections, vaccine codes, outages

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Adding Contact Information

To add a contact(s), complete all fields in the **Contact Details** screen. When finished, click **SAVE ENTRY**.

Enter your work information; do not submit your home address or personal contact information.

- 1 Select '☐ **Copy facility information**' if the information is the same as previously entered in the facility details. If different, manually complete the information.
- 2 You may subscribe to receive reports on Doses Administered-UTD reports and/or notices on Electronic Updates.
- 3 Answer all required questions, as noted by the *. Click **SAVE ENTRY**, then **SUBMIT** when all contacts have been added.

Contact Details
Unsaved Changes

Enter Contact information and click on Save Entry to save each contact to the grid. Multiple contacts can be added. At least one Contact is required.
Enter work information; do not submit your personal home address information. Do not use a general email address, such as frontend@practice.com.
Any contacts, listed below, who are no longer employed by this facility should be deleted immediately.

☒ Copy facility information

Contact first name *
Enter
Required

Contact middle name
Enter

Contact last name *
Enter

Role *
Select...

Title
Enter

Email *
Enter

Office phone number *
() - - Ext

Cell phone number
() - -

Fax number
() - -

Address line 1 *
17 E 102ND ST

Address line 2

Zip code *
10029 5204

City *
NEW YORK

State *
NEW YORK

Borough
QUEENS

Subscribe to reports
Select all that apply

Enter required data and fix errors

RESET
SAVE ENTRY

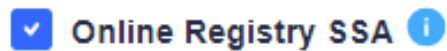
PREVIOUS
CLOSE
SUBMIT

Online Registry Site Security Administrator (SSA) Designation

To access the Online Registry (OR), each health care facility or private practice designates a **Site Security Administrator (SSA)**, also referred to as the **User Manager** of the facility or site. The facility registration process will allow your practice to set up an SSA account for the designated Site Security Administrator, who can then set up and manage additional user accounts for staff members at this site. SSA's who are not the supervising physician, need to register under the license number of a supervising physician, pharmacist, physician assistant, or nurse practitioner. Only one Provider or Contact within the facility can be designated at a time as the SSA. Please discuss with your team who will be designated as SSA before you start a facility registration.

Follow one of the three sets of next steps for the registration and SSA designation processes according to your role with the CIR:

When adding **Provider** or **Contact** information check the box near the top of the screen to designate the desired individual as the SSA:



Do not submit your personal home email address information or use a general email address, such as "frontdesk@practicename.com". An email account should be an individual's and not a shared account, and should be accessible by the individual.

1. Registrant and Primary Provider are the same and the designated SSA will be a different staff person.

- After adding yourself as the Primary Provider in Charge and Registrant (person first to register the practice), review the green check marks that your choices were recorded as intended, shown below.

Facility Details		Reporting		Providers		Contacts		Consent Forms	
Primary	Registrant	OR	SSA	Provider name	Provider NPI #	Medical license #	Medical license type	Provider email	
>	✓	✓		Emily Doctor Demo	1952442485	123456	MD - Medicine	eliang1@health.nyc.gov	

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

- Next, you will be required to enter an additional contact who will be the OR SSA for your facility. Check the SSA box ☒ **Online Registry SSA** ⓘ to indicate the designation.

Facility Details	Reporting	Providers	Contacts	Consent Forms		
Primary	Registrant	OR SSA	Contact name	Role	Title	Email
>	✓		jane doe	ADMINISTRATIVE		g1@health.nyc.gov

- Click submit and confirm the designated OR SSA in the pop-up that appears. An email will be sent to the SSA with instructions to confirm designation and to enter their email address. Next, the SSA will receive CIR account approval.

2. Primary Provider and SSA are the Same and the Registrant is Different



- The registrant can be a provider (who is not the primary provider in charge) or contact. Add yourself appropriately as a provider or contact.
- Add the name and email address of the primary provider and check ☐ **Primary contact** ⓘ. The system will prompt you to choose the SSA. Under the contacts tab, go back to click on edit to check the box to assign yourself as the SSA ☒ **Online Registry SSA** ⓘ
- The primary provider and designated SSA will receive email and should enter their email address in the 'Enter your email address for verification' field.
- After you click the submit button, a pop-up box displays the SSA Designation Agreement. Read and click **I Agree**.
- The primary provider and SSA will receive email notifications to approve SSA designation. Next, the SSA will receive CIR account approval.
 - Select **I Agree** to the designation and click **Confirm**.



Primary	Registrant	OR SSA	Provider name	Provider NPI #	Medical license #	Medical license type	Provider email
>	✓	✓	JACK provider test		333333	DO - Osteopathy	ff@gmail.com

Primary	Registrant	OR SSA	Contact name	Role	Title	Email
>	✓		Shi	ADMINISTRATIVE		e@health.nyc.gov

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

3. Registrant, Primary Provider and SSA Are the Same

- After you add yourself as the registrant (first to register the site), add yourself as the primary provider ☐ Primary contact 
- Under the contacts tab, go back to click on edit to check the box to assign yourself as the SSA ☒ Online Registry SSA 
- Once you click **Submit** you must confirm the SSA designation by checking the box that pops up. Then, read and click **I Agree** to the SSA Designation Agreement.

Facility Details		Reporting		Providers		Contacts		Consent Forms	
Primary	Registrant	OR SSA	Provider name	Provider NPI #	Medical license #	Medical license type	Provider email		
> ✓	✓	✓	Emily Doctor Demo	1952 	123456	MD - Medicine	 1@health.nyc.gov		

After completing the appropriate SSA designation steps for another staff:

- Confirm the SSA designation of the staff person by checking the box that pops up,
- SSA will receive emails,
- complete the, 'Enter your email address for verification' field,
- select **I Agree** to the **Confidentiality Statement Agreement**, and click **Confirm**.
- Read and click **I Agree** to the SSA Designation Agreement when prompted.
- Click **SUBMIT**.
- The system will prompt you to go back to choose an SSA if it was not completed:

Agreement

I, DEMO ZHANG, have read and understand the above statement and instructions. I agree to keep strictly confidential all Confidential Information I receive from the records of the Department of Health and Mental Hygiene Online Registry in the course of my employment at DEMO MEDICAL PC TEST. I understand fully the consequences to me if I disclose Confidential Information without necessary authorization. I have discussed, and will continue to discuss, with the Department of Health and Mental Hygiene Online Registry Security Administrator any questions I have about what is confidential or to whom I may disclose Confidential Information.

Primary provider name: Emily Doctor Demo

Enter your email address for verification *

☒ I Agree

Select radio button to agree to comply with the terms and conditions of the SSA Agreement and accept the Online Registry SSA Designation for

Facility name: DEMO MEDICAL PC TEST
Facility address: 100 MEDICAL STREET, BROOKLYN, NY - 11201
Facility phone number: (212) 100-1234
Facility fax number: (646) 661-2999
Facility email: emilydoctor@provider@gmail.com

☐ I Reject the designation

Select radio button to reject your designation as the Online Registry Site Security Administrator (SSA) for your facility. A Reason for rejection text box will be displayed on selection of this radio button.

CONFIRM

Add Contact

Assign a Contact as the Online Registry SSA. (Every non-immunizing school should have one Contact designated as the Online Registry SSA)

PREVIOUS **CLOSE** **SUBMIT**


Please recheck the information entered in each section before clicking Submit.

- Next, respond to the CIR action emails and approval email.

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Action Required on Consent to the Online Registry SSA Designation Agreement and link to OR SSA Agreement for E-Signature

Action Required - Consent on the CIR Online Registry SSA Designation Agreement and Online Registry SSA Agreement for SUNSHINE DAY CARE Inbox x

 **cir-facility-manager@health.nyc.gov**
to emilydohtest+test ▾ 1:55 PM (1 minute ago) ☆ ↶ ⋮

Dear Em Dohtest,

Emily Liang is designating you, **Em Dohtest**, to be the **Citywide Immunization Registry (CIR) Online Registry Site Security Administrator (SSA)** for **SUNSHINE DAY CARE - 10306N64**. The SSA is responsible for managing CIR Online Registry user access and setting up user IDs and passwords for additional facility or practice staff members. As the **SSA Designee** of this facility, you are required to acknowledge and agree to this authorization and the terms and conditions of the **SSA Agreement** to complete the registration process. Please click on the link below to review and acknowledge the **Online Registry SSA Designation Agreement and Online Registry SSA Agreement**.

[Link to Online Registry SSA Agreement](#)

Please note that this link will expire in 14 business days and you are required to acknowledge the agreement before the link expires.

If this designation is incorrect, please contact **Emily Liang** at emilyliang@health.nyc.gov and copy cir-reset@health.nyc.gov.

For additional assistance, please contact the Citywide Immunization (CIR) at cir@health.nyc.gov

Kindest regards,

The CIR Provider Support Team

CIR Phone: [347-396-2400](tel:347-396-2400)

CIR Fax: [347-396-2559](tel:347-396-2559)

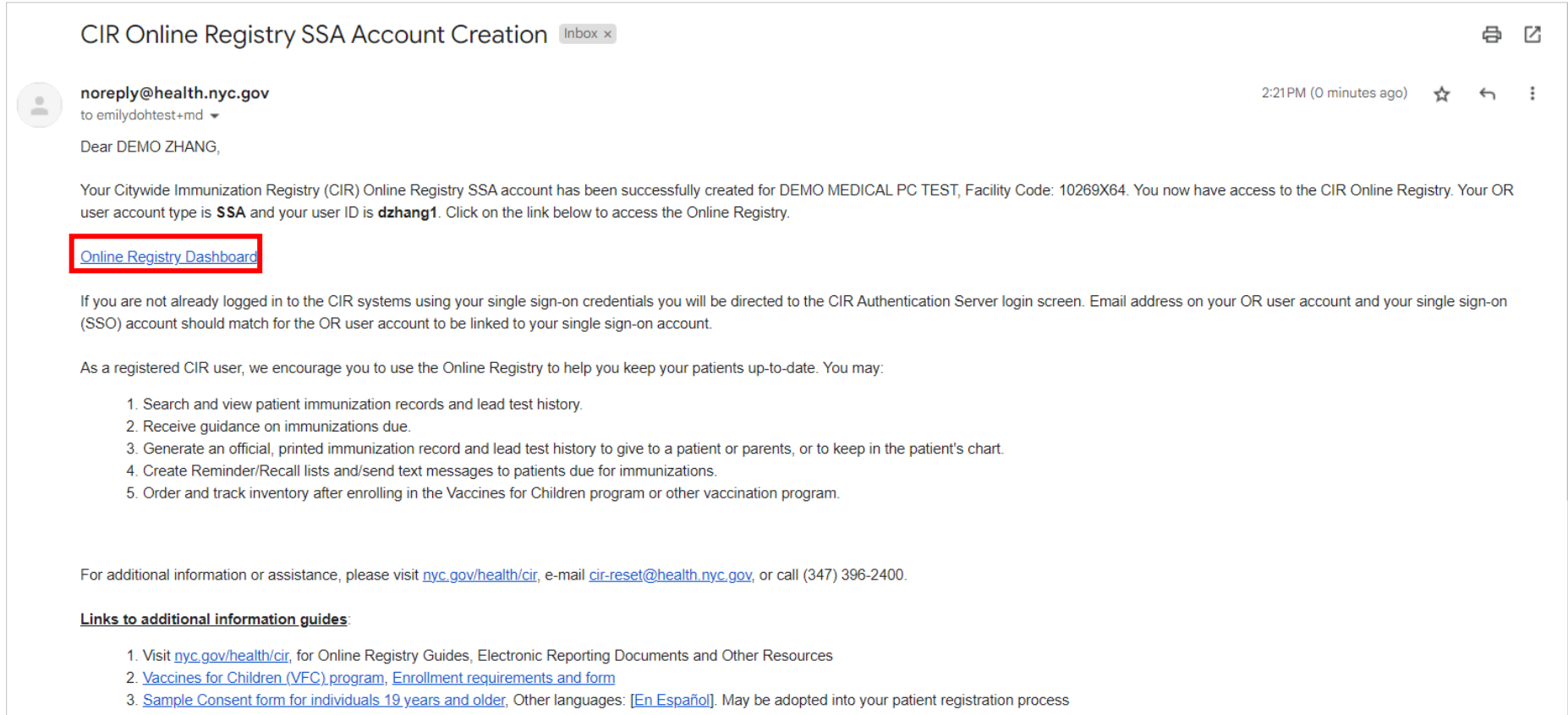
Email: cir@health.nyc.gov

Website: [Citywide Immunization Registry \(CIR\) - NYC Health](#)

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Receiving CIR Email of Online Registry SSA Account Approval

- The email confirmation you will receive once your Site Security Administrator has been approved by CIR and successfully created is shown below
- Click on the **Online Registry Dashboard** link to start accessing your facility/facilities you are linked to with your email.



All users will be presented with the [CIR Acceptable Use Policy User Agreement](#) during the user account set up.

The next pages show detailed screens of the SSA Designation process.


- Go to the section **NEW! Online Registry Welcome, Consent and Login screen** to learn about the Online Registry dashboard, linking accounts, the new OR Welcome screen and Consent to log-in screen.
- Go to the section **Site Security Administrator (SSA) -User Manager -How to Set Up Additional Users- Key Steps** to learn about managing additional User account at your site.

**Citywide Immunization Registry (CIR):
How to Register and Update Facility and Contact Information;
Designate an SSA**

Online Registry SSA Designation Agreement

- A pop-up screen and email will be generated after the site security administrator has been designated.
- Check **I Agree** and click **CONTINUE**.

Online Registry SSA Designation Agreement

 To access the Online Registry (OR), each health care facility or private practice designates a Site Security Administrator (SSA, also referred to as the User Manager) for the Online Registry application. The CIR creates an SSA account for the Security Administrator, who can then set up additional OR user accounts for staff members at this site. SSA's who are not the supervising physician need to register under the license number of a supervising physician, pharmacist, physician assistant, or nurse practitioner. Only one Provider or Contact within the facility can be designated as the SSA.

I hereby designate **DEMO ZHANG**, as Online Registry Site Security Administrator (SSA) for
Facility: **DEMO MEDICAL PC TEST**
Facility Address: **100 MEDICAL STREET, BROOKLYN, NY - 11201**
Facility Phone: **(212) 100-1234**
Facility Fax: **(646) 661-2999**
Facility Email: **er** **+provider@gmail.com**

☒ **I Agree ***

Select checkbox to authorize designee as the Online Registry Site Security Administrator (SSA) for your facility

CANCEL

CONTINUE

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

- **Example Site Administrator Designation Agreement Email:**

Agreement

"I, **DEMO ZHANG**, have read and understand the above statement and instructions. I agree to keep strictly confidential all Confidential Information I receive from the records of the Department of Health and Mental Hygiene Online Registry in the course of my employment at **DEMO MEDICAL PC TEST**. I understand fully the consequences to me if I disclose Confidential Information without necessary authorization. I have discussed, and will continue to discuss, with the Department of Health and Mental Hygiene Online Registry Security Administrator any questions I have about what is confidential or to whom I may disclose Confidential Information."

Primary provider name: Emily Doctor Demo

Enter your email address for verification *

em[redacted]@gmail.com


☒ **I Agree**

Select radio button to agree to comply with the terms and conditions of the SSA Agreement and accept the Online Registry SSA Designation for

Facility name: DEMO MEDICAL PC TEST
Facility address: 100 MEDICAL STREET, BROOKLYN, NY - 11201
Facility phone number: (212) 100-1234
Facility fax number: (646) 661-2999
Facility email: [emily\[redacted\]@gmail.com](mailto:emily[redacted]@gmail.com)

☐ **I Reject the designation**

Select radio button to reject your designation as the Online Registry Site Security Administrator (SSA) for your facility. A Reason for rejection text box will be displayed on selection of this radio button.



CONFIRM

- Once the SSA reads the **Confidentiality Agreement**, select **I Agree** and click **Confirm**
- Once the agreement has been completed and confirmed you will receive a submission confirmation.

Action confirmed

Thank you for reviewing and taking action on the OR SSA Designation agreement on **8/17/2023, 1:59:39 PM**. Your facility will be notified of the action you have taken.

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Online Registry Site Security Administrator Designation and Site Security Administrator Agreement

Online Registry SSA Designation and SSA Agreement

Please read this statement carefully. Make sure that you ask your Department of Health and Mental Hygiene ("DOHMH") Immunization Registry Security Administrator for clarification about anything you don't understand, then sign the Agreement. Refusal to sign the Agreement will result in immediate denial of access to Department of Health and Mental Hygiene records. By signing this Agreement, you agree as authorized user ("Authorized User") to comply with the terms of this Agreement when accessing DOHMH Online Registry ("Online Registry").

As Authorized User, you will have access to DOHMH medical and personally identifying records in the Online Registry and you are required by law to safeguard the confidentiality of these records (the "Confidential Information"). Unauthorized disclosure of Confidential Information is a violation of New York City Health Code Section 11.11 and state law, subject to civil and/or criminal prosecution, penalties, forfeitures and legal action. See Section 558(e) of the City Charter and Section 3.11 of the New York City Health Code. You must continue to comply with the confidentiality requirements of this Agreement after you are no longer employed by the facility or health care provider ("Facility") on behalf of which you access the Online Registry. You further agree that you are authorized by Facility to access the Online Registry as the Site Security Administrator ("Site Security Administrator") for Facility. In the course of accessing an immunization or lead test record, or adding an immunization to the Online Registry, Authorized User MAY NOT:

- a. Examine or read any document or computer record from the Online Registry containing Confidential Information, except on a "Need to Know" basis; that is, if required to do so in the course of official duties.
- b. Remove from a job site or copy any document or computer record containing Confidential Information unless authorized to do so, and if required in the course of official duties.
- c. Discuss the content of documents containing Confidential Information examined with any person unless both persons have authorization to do so.
- d. Discriminate, abuse or take any adverse action with respect to a person to whom the Confidential Information pertains.
- e. Create and distribute usernames and passwords for unauthorized users.
- f. Reveal or share individual personal computer access identification or passwords with other persons, even if such persons are also authorized to have computer access.
- g. Compile any aggregate data or statistics from the program database except as authorized by the director of the Immunization Registry and/or Lead Poisoning Prevention Program.
- h. Contact a person who is the subject of any DOHMH record except on official business, in the course of official duties.
- i. Degrade, destroy, or interfere with the integrity of any Confidential Information or any other information in the Online Registry.
- j. Transmit or upload to the Online Registry any false or misleading information.
- k. Interfere with the security of the Online Registry, including but not limited to, uploading or transferring to the Online Registry any malware, ransomware, spyware, or other malicious software.

The above restrictions apply to screen displays, data in electronic form, and printed data. Any printed patient record shall be treated as Confidential Information.

Online Registry SSA System Security Measures

- The security of the Online Registry is of the highest priority. System security is essential for the effective and efficient operation of the system. It is the responsibility of the Site Security Administrator (and authorized users) to maintain the highest possible degree of system security. If a security problem is discovered, it should be reported by telephone to the Department of Health and Mental Hygiene Online Registry Security Administrator immediately.
- Promptly inactivate accounts for staff that have left employment or a location.
- If there is any reason to believe that someone has obtained unauthorized access to the OR, it is the responsibility of the Site Security Administrator to immediately notify the Department of Health and Mental Hygiene Online Registry Security Administrator.

Copies of Completed SSA Agreements

- Immunizing facilities will have two SSA agreements shown as Complete.

DEMO MEDICAL PC TEST
Facility code: **10269X64**

Facility Details

Reporting

Providers

Contacts

Consent Forms

Online Registry Site Security Administrator (SSA) Designation Agreement
Status: ✓ Complete

Online Registry Site Security Administrator (SSA) Agreement
Status: ✓ Complete


CLOSE

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Changing Site Security Administrator (SSA)

- If the SSA needs to be changed you must indicate a reason for the change and then click **Continue**

Online Registry SSA Validation

 You have selected the Online Registry SSA checkbox for this provider. Note: Only one provider or contact within the facility can be designated as the Online Registry SSA. An email notification will be sent to the (a) Primary Provider, (b) user who previously authorized the SSA designation, and (c) previously designated SSA to notify them of the change submitted.

Emily Test who was previously added as the Online Registry SSA will no longer be assigned as the Online Registry SSA and their Online Registry SSA account will be changed to a Normal account if you proceed to add Em Dohtest as the Online Registry SSA. If the previous SSA - Emily Test needs to be deactivated you must manually delete the Provider/Contact.

Reason for new SSA designation *

Enter

Click Continue to proceed with the new SSA Designation.
Click Cancel to keep the previously designated SSA.

CANCEL

CONTINUE

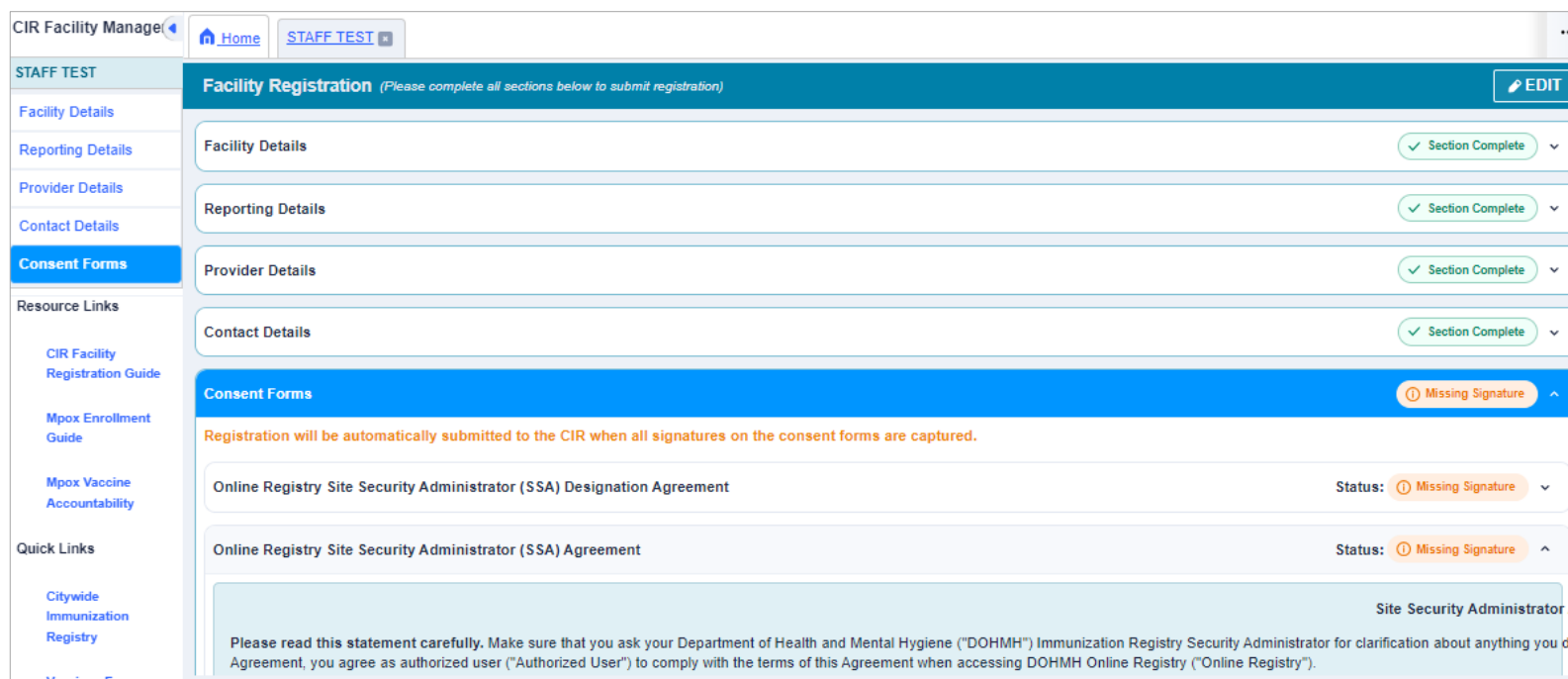
Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Submitting Your Registration

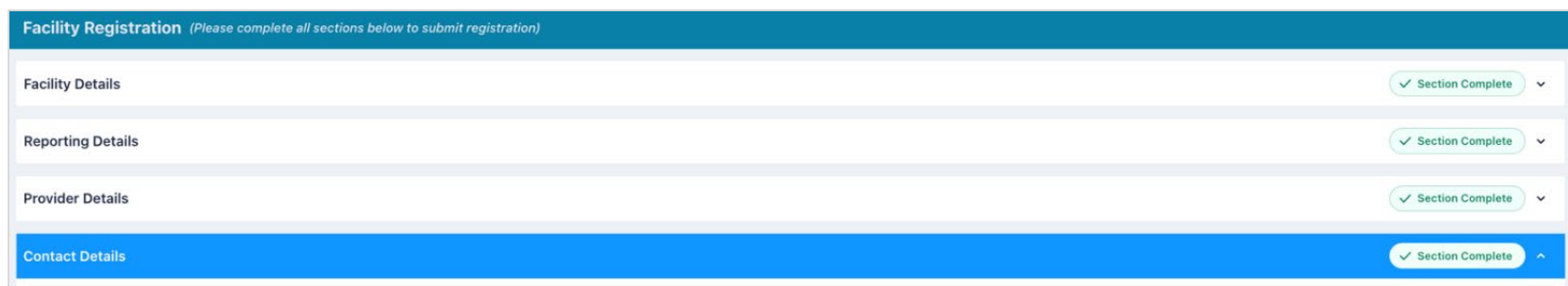
Before submitting, check to make sure all information entered is accurate across all registration screens. The application will not allow you to submit your registration if there are any incomplete required fields, as noted by the *. Once everything is complete, click **SUBMIT**.

NOTE: If your registration is locked for CIR review and you need to make additional edits, you may contact cir@health.nyc.gov. CIR will reject the submission so you may continue to make changes.

If you need to make changes after you submitted SSA designation agreements, but before CIR approval, you may click on the **EDIT** button that appears on the upper right corner.



Immunizing facilities will have four completed sections – facility details, reporting details, provider details, and contact details:



Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Facility Registration Approval

A pop-up window will appear on your screen immediately following successful registration of your facility. See example below, left. You will also receive a confirmation email containing the same information. Confirmation email will be sent to the Registrant and Primary Provider. Please allow a few minutes for the email to reach your inbox. If you do not receive a confirmation email, you can contact CIR at cir@health.nyc.gov. Your registration will be reviewed and subject to approval by CIR.

Upon approval, you will receive a **Welcome** letter with your **Facility Code** by email within two business days with further instructions regarding access to the CIR. Immunizing facilities receive instructions on reporting methods. Please have your **Facility Code** on hand and in any communications with CIR. For enrollment into special programs, visit the Resource links in the left navigations bar of the Facility Manager/Online Registry home page and www.nyc.gov/health/cir for more information.

If you vaccinate children (0 through 18 years) who are covered by Medicaid or who are uninsured, underinsured, American Indian or Alaska Native, you are encouraged to participate in the [Vaccines for Children \(VFC\) program](#), and for adults, the Vaccines for Adults (VFA) program.

Example of confirmation screen:

Confirmation

Registration for:

Facility: **ABC Test**
 Facility Address: **100 Test Ave, New York, NY - 10001**
 Facility Phone: **(212) 100-1234**
 Facility Fax: **(212) 100-1234**
 Facility Email: test@gmail.com

has been successfully submitted by **Emily** on **5/3/2022 at 4:04:17 PM**.

Your Registration ID is **R-7928066303078274048**.

The New York Citywide Immunization Registry (CIR) will contact you by email regarding your registration and **Facility Code**. For any inquiries on the status of your registration, please wait **two (2) business days** before contacting the CIR and be sure to provide your Registration ID.

Thank you for using CIR Facility Registration Site.

Kindest regards,

The CIR Provider Support Team
 CIR Phone: (347) 396-2400
 CIR Fax: (347) 396-2559
 Email: cir-facility-manager@health.nyc.gov
 Website: [Citywide Immunization Registry \(CIR\) - NYC Health](http://www.nyc.gov/health/cir)

A confirmation email has been sent to the Registrant, Primary Provider and CIR.
[Print this confirmation page for your record](#)

Warning: To secure your information, please close the browser after completing the registration.

OK

Example of confirmation email:

CIR Facility Registration Confirmation

cir@health.nyc.gov
 Tue 5/3/2022 4:04 PM
 To: Emily

Registration for

Facility: **ABC Test**
 Facility Address: **100 Test Ave, New York, NY, 10001**
 Facility Phone: **2121001234 x**
 Facility Fax: **2121001234**
 Facility Email: **test@gmail.com**

has been successfully submitted by **Jane Doe** on **05-03-2022 at 4:04:17 PM**.
 Your Registration ID is **R-7928066303078274048**.

The New York Citywide Immunization Registry (CIR) will contact you by email regarding your registration and **Facility Code**. For any inquiries on the status of your registration, please wait **two (2) business days** before contacting the CIR and be sure to provide your Registration ID.

Thank you for using CIR Facility Registration Site.

Kindest regards,

The CIR Provider Support Team
 CIR Phone: 347-396-2400
 CIR Fax: 347-396-2559
 Email: cir@health.nyc.gov
 Website: <http://www.nyc.gov/health/cir>

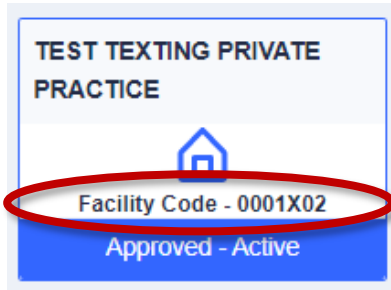
Reply | **Forward**

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

How To Find Your Facility Code

To find your facility code, log in to your dashboard. Once logged in, you can see your facility code in multiple places. If you are unable to find your facility code, you can email cir@health.nyc.gov or call 347-396-2400.

→ In tile view:



→ In list view:

Home

+ START NEW CIR REGISTRATION

Q CIR FACILITY LOOKUP

EXPORT

Filters

264 results

Facility name	Facility code	Registration status	Facility address	Last modified date	Last accessed date
> TEST TEXTING PRIVATE PRACTICE	0001X02	Approved - Active	2 LAFAYETTE ST, NEW YORK, NY - 10007	12/4/2020, 2:22:06 PM	<div>SELECT</div>

→ On top of an open tab:

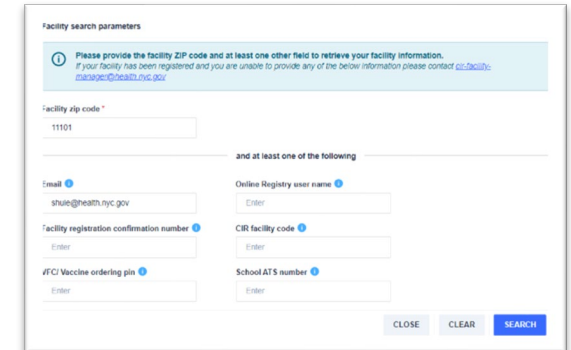


Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Updating Facility Information, CIR Facility Look Up

Log into your dashboard and click on the facility you wish to edit. (Edits can only be made to approved facilities. If your facility is still pending, edits are unable to be made). If your facility is not listed on your dashboard, click on [CIR FACILITY LOOKUP](#), [CIR FACILITY LOOKUP], to start a search. To search you will need the **Facility ZIP code** and one of these values: **Email**, **Online Registry username**, **Facility registration confirmation number**, **CIR facility code**, **VFC/ Vaccine ordering pin**, or **School ATS number**.

Large facilities should assign one key staff person to be the liaison between the facility and CIR, and responsible for updating information in the CIR Facility Registration dashboard when necessary.



Facility search parameters

Please provide the facility ZIP code and at least one other field to retrieve your facility information. If your facility has been registered and you are unable to provide any of the below information please contact cir@health.nyc.gov

Facility zip code *

11101

and at least one of the following

Email [?](#)

shue@health.nyc.gov

Online Registry user name [?](#)

Enter

Facility registration confirmation number [?](#)

Enter

CIR facility code [?](#)

Enter

VFC/ Vaccine ordering pin [?](#)

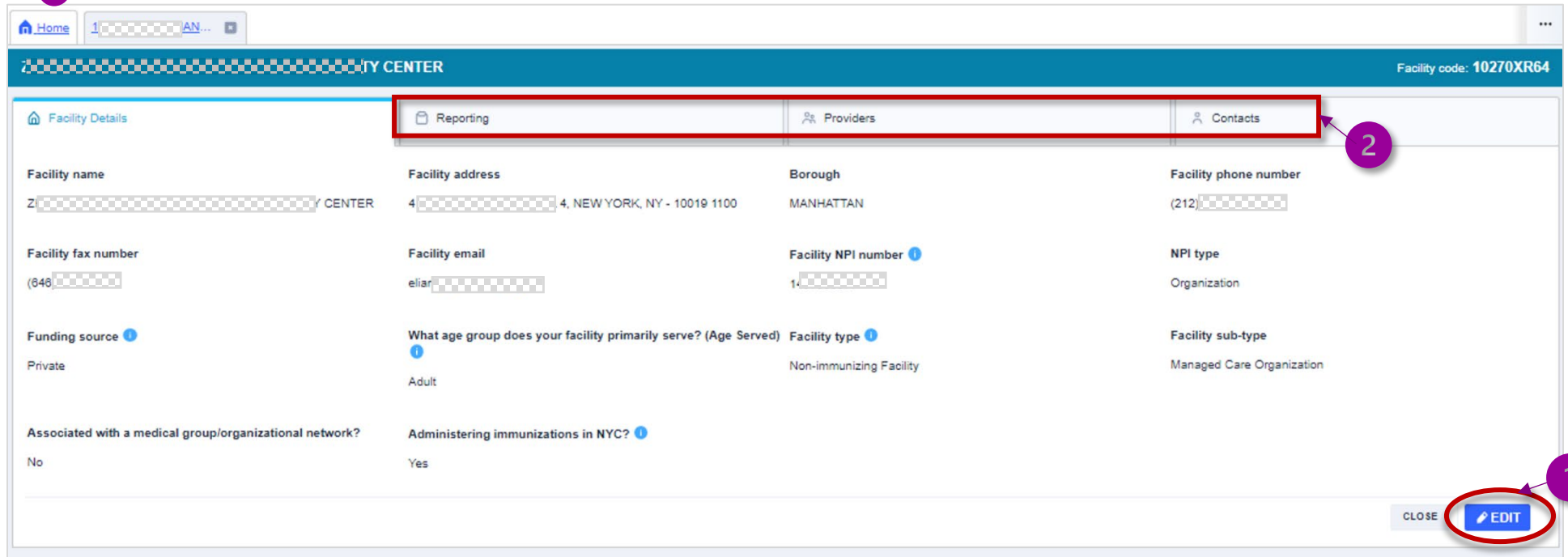
Enter

School ATS number [?](#)

Enter

CLOSE CLEAR SEARCH

- 1 Click on [EDIT](#) [the EDIT (pencil) button] on the bottom right-hand corner of the screen to edit facility details.
- 2 To edit reporting method, providers or contact details, click on the corresponding tab, and then click [EDIT](#).



Home 1 AN...

FACILITY CENTER Facility code: 10270XR64

Facility Details Reporting Providers Contacts

Facility name

ZIP CENTER

Facility address

4, NEW YORK, NY - 10019 1100

Borough

MANHATTAN

Facility phone number

(212)

Facility fax number

(646)

Facility email

elias

Facility NPI number [?](#)

1

NPI type

Organization

Funding source [?](#)

Private

What age group does your facility primarily serve? (Age Served) [?](#)

Adult

Facility type [?](#)

Non-immunizing Facility

Facility sub-type

Managed Care Organization

Associated with a medical group/organizational network?

No

Administering immunizations in NYC? [?](#)

Yes

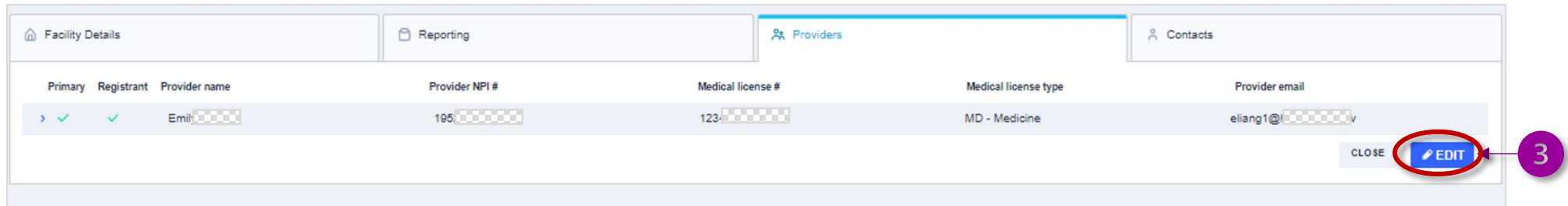
CLOSE [EDIT](#)

Some edits will require manual review by CIR. If you need to change the name and/or address of the facility, please send communication with informing CIR about the change, the reason and include your **Facility Code** to: cir@health.nyc.gov with the subject heading: **Change in facility name and/or address**. Providers are associated with the Facility Code of the vaccinating site's address and cannot be transferred.

NOTE: If your registration is locked for CIR review and you need to make additional edits, you may contact cir@health.nyc.gov.

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

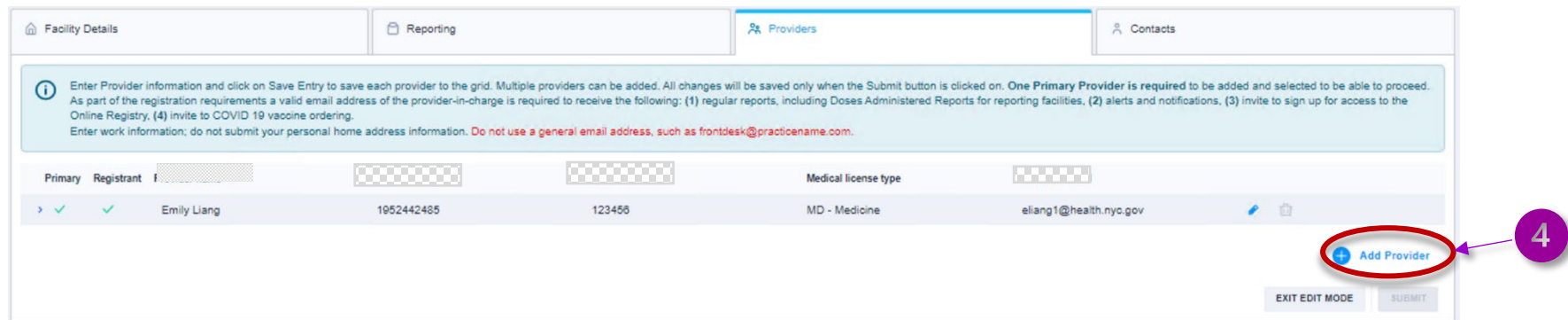
3 To edit a provider, click on **EDIT** to update information. To delete a contact, click on the trash can icon.



Primary	Registrant	Provider name	Provider NPI #	Medical license #	Medical license type	Provider email		
>	✓	✓	Emily Liang	1952442485	123456	MD - Medicine	eliang1@health.nyc.gov	CLOSE EDIT

4 To add a provider, click on **EDIT**, and then **+ Add Provider**. To delete a provider, click on the trash can icon.

If your facility is changing the provider-in-charge to a different provider, please send communication with a letterhead informing CIR about the change, the reason and include your **Facility Code** to: cir@health.nyc.gov with the subject heading: **Change in provider-in-charge**. The primary provider is also the default provider. If immunizations reported to CIR are missing the provider associated with the record, the default provider will be used for CIR reporting purposes.

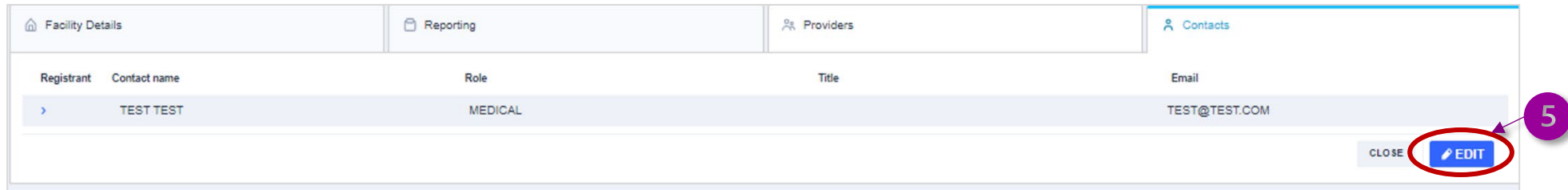


i Enter Provider information and click on Save Entry to save each provider to the grid. Multiple providers can be added. All changes will be saved only when the Submit button is clicked on. **One Primary Provider is required** to be added and selected to be able to proceed. As part of the registration requirements a valid email address of the provider-in-charge is required to receive the following: (1) regular reports, including Doses Administered Reports for reporting facilities, (2) alerts and notifications, (3) invite to sign up for access to the Online Registry, (4) invite to COVID 19 vaccine ordering. Enter work information; do not submit your personal home address information. **Do not use a general email address, such as frontend@practitionername.com.**

Primary	Registrant	Provider name	Provider NPI #	Medical license #	Medical license type	Provider email		
>	✓	✓	Emily Liang	1952442485	123456	MD - Medicine	eliang1@health.nyc.gov	+ Add Provider

EXIT EDIT MODE SUBMIT

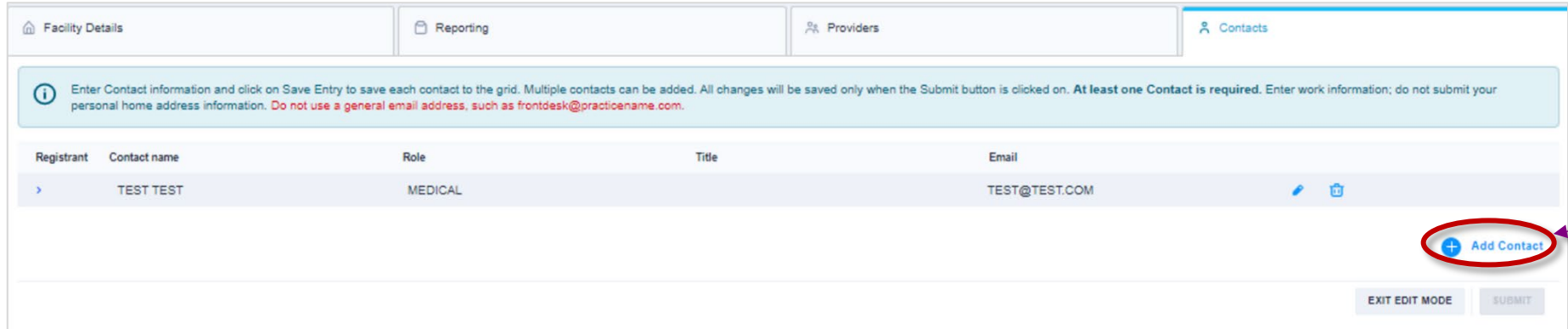
5 To edit a contact, click on **EDIT** to update information.



Registrant	Contact name	Role	Title	Email	
>	TEST TEST	MEDICAL		TEST@TEST.COM	CLOSE EDIT

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

6 To add a contact, click on **EDIT**, then **+ Add Contact**. To delete a contact, click on the trash can icon.



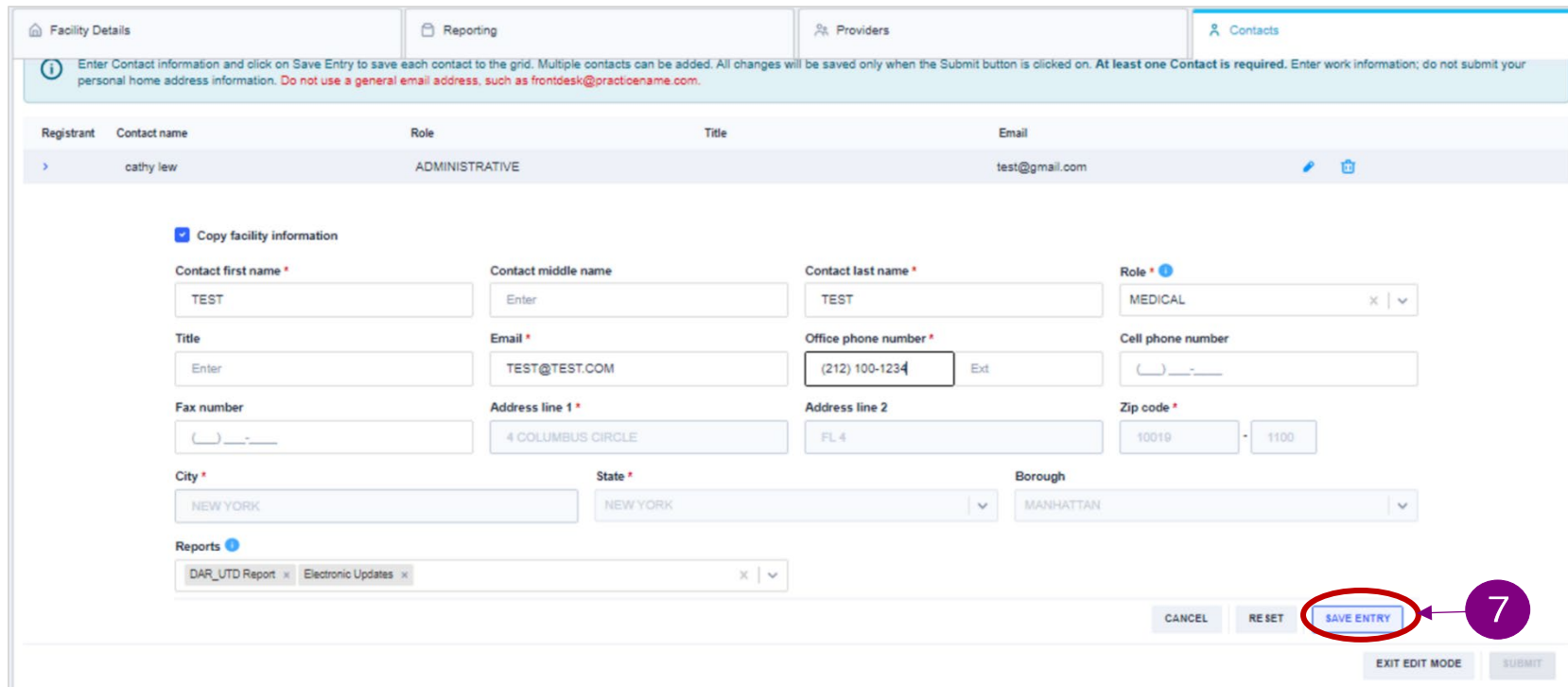
Facility Details | Reporting | Providers | **Contacts**

Enter Contact information and click on Save Entry to save each contact to the grid. Multiple contacts can be added. All changes will be saved only when the Submit button is clicked on. **At least one Contact is required.** Enter work information; do not submit your personal home address information. **Do not use a general email address, such as frontdesk@practice.com.**

Registrant	Contact name	Role	Title	Email	
>	TEST TEST	MEDICAL		TEST@TEST.COM	

+ Add Contact | EXIT EDIT MODE | SUBMIT

7 Click on **SAVE ENTRY** to save new contacts. For changes, save the edits.



Facility Details | Reporting | Providers | **Contacts**

Enter Contact information and click on Save Entry to save each contact to the grid. Multiple contacts can be added. All changes will be saved only when the Submit button is clicked on. **At least one Contact is required.** Enter work information; do not submit your personal home address information. **Do not use a general email address, such as frontdesk@practice.com.**

Registrant	Contact name	Role	Title	Email
>	cathy lew	ADMINISTRATIVE		test@gmail.com

☒ Copy facility information

Contact first name *
Contact middle name
Contact last name *
Role *

Title
Email *
Office phone number *
Cell phone number

Fax number
Address line 1 *
Address line 2
Zip code * -

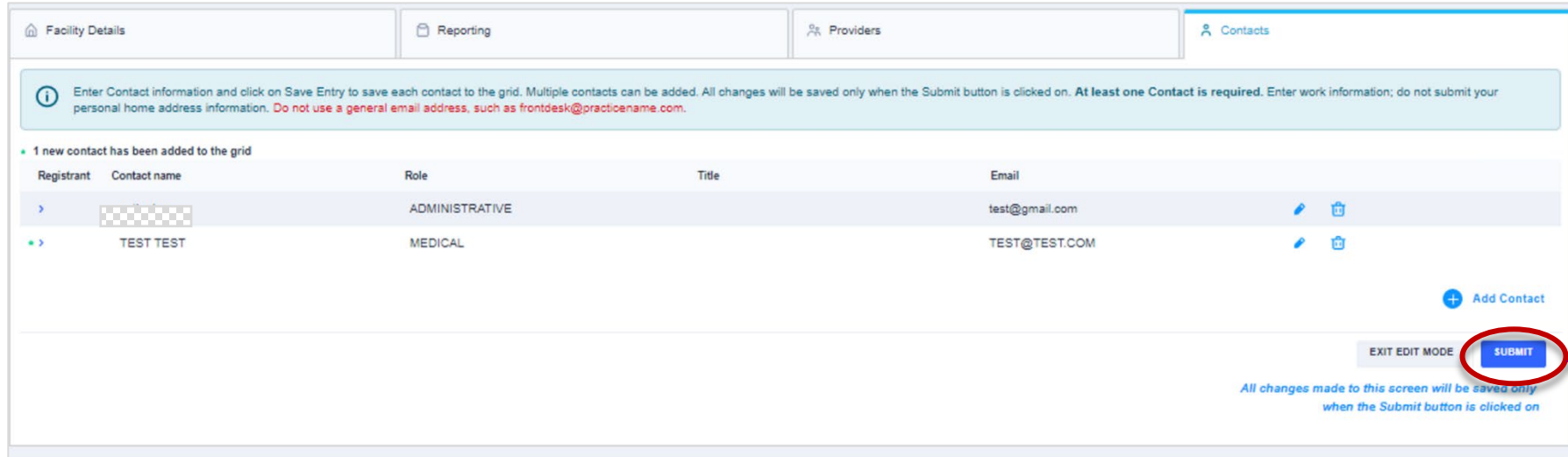
City *
State *
Borough

Reports

CANCEL | RESET | **SAVE ENTRY** | EXIT EDIT MODE | SUBMIT

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

8 Click **SUBMIT** to submit all changes



Facility Details Reporting Providers Contacts

Enter Contact information and click on Save Entry to save each contact to the grid. Multiple contacts can be added. All changes will be saved only when the Submit button is clicked on. **At least one Contact is required.** Enter work information; do not submit your personal home address information. *Do not use a general email address, such as frontdesk@practice.com.*

1 new contact has been added to the grid

Registrant	Contact name	Role	Title	Email
>		ADMINISTRATIVE		test@gmail.com
+>	TEST TEST	MEDICAL		TEST@TEST.COM

+ Add Contact

EXIT EDIT MODE **SUBMIT**

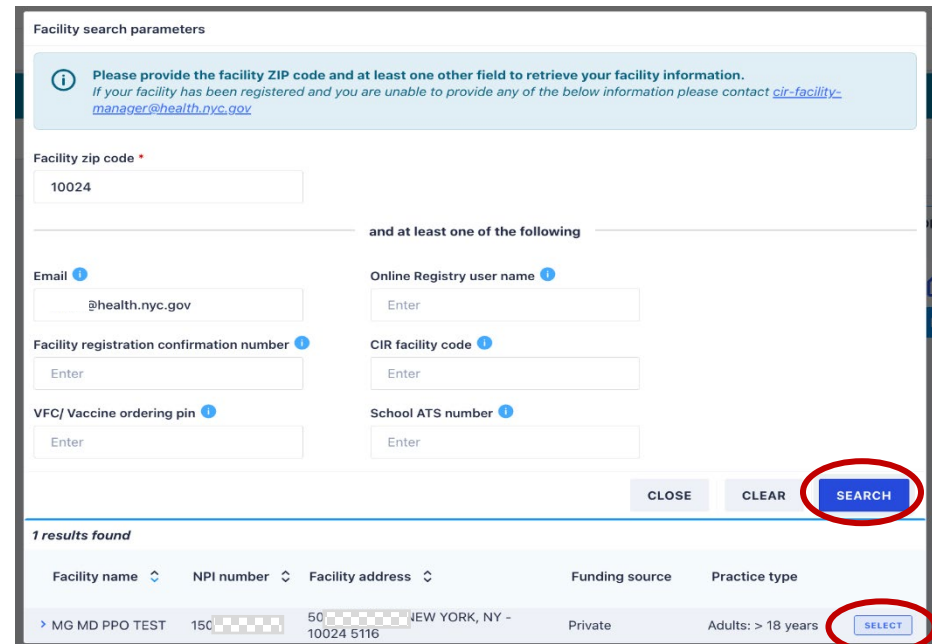
All changes made to this screen will be saved only when the Submit button is clicked on

Questions about updating your facility registration with CIR? Contact **CIR**: Email cir@health.nyc.gov or call 347-396-2400.

How to Add Additional Contacts

To add additional non-registrant users, on your CIR dashboard first click **CIR FACILITY LOOKUP**.

- 1 Enter the facility zip code and at least one other field, such as your email.
- 2 Click Search.
- 3 Once the facility is found, click Select in the results section.



Facility search parameters

Please provide the facility ZIP code and at least one other field to retrieve your facility information. If your facility has been registered and you are unable to provide any of the below information please contact cir-facility-manager@health.nyc.gov

Facility zip code *

10024

and at least one of the following

Email 1

@health.nyc.gov

Online Registry user name 1

Enter

Facility registration confirmation number 1

Enter

CIR facility code 1

Enter

VFC/ Vaccine ordering pin 1

Enter

School ATS number 1

Enter

CLOSE CLEAR **SEARCH**

1 results found

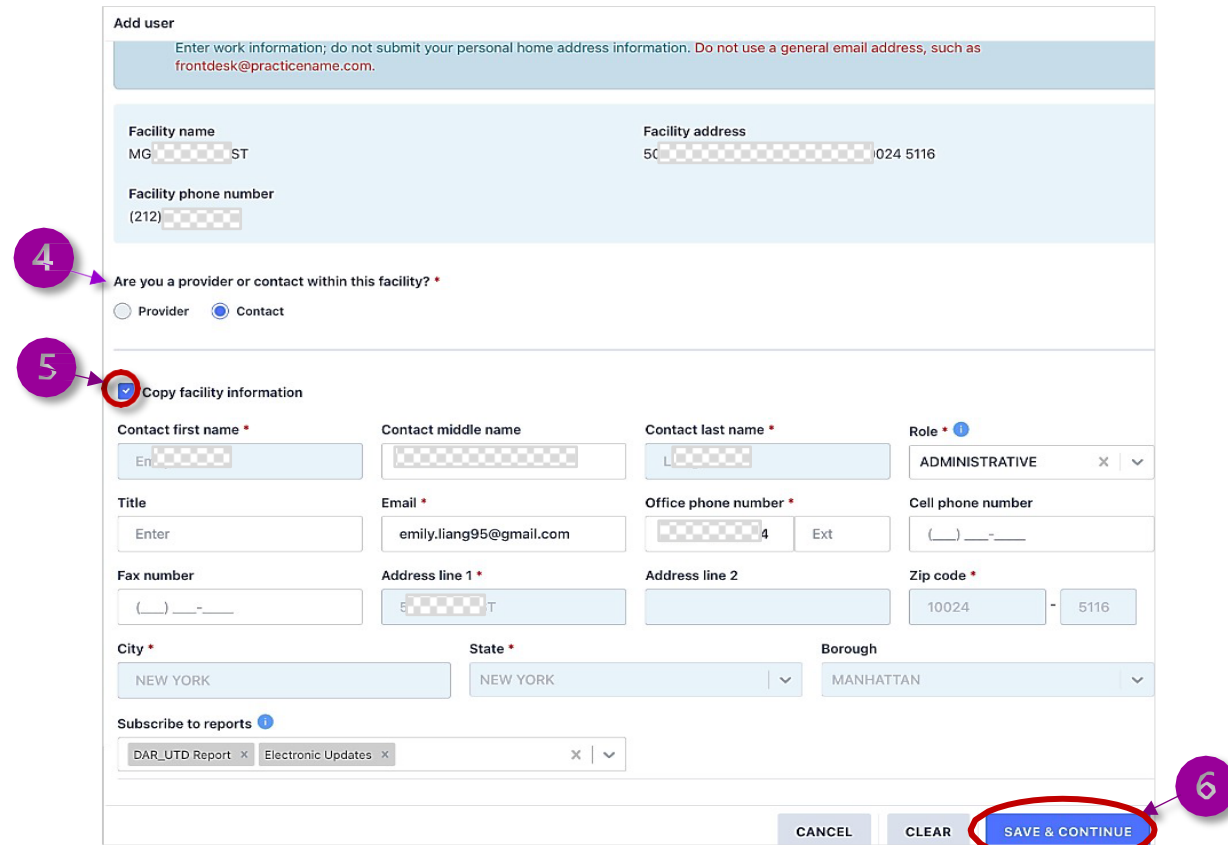
Facility name	NPI number	Facility address	Funding source	Practice type
> MG MD PPO TEST	150	50 JEW YORK, NY - 10024 5116	Private	Adults: > 18 years

SELECT

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

- 4 Choose if you are a provider or contact at the facility.
- 5 Select ☐ **Copy facility information** if the information is the same as previously entered in the facility details. If different, manually complete the information.
- 6 Answer all required questions, as noted by the *. Click **SAVE & CONTINUE** when all contacts have been added.

An email will be sent to the Registrant of the facility and provider-in-charge of any additions.



Adding new Provider-in-Charge

If your facility is adding a new provider-in-charge, replacing the previous provider, please send communication with a letterhead informing CIR about the change, the reason and include your **Facility Code** to: cir@health.nyc.gov with the subject heading: **Change in provider-in-charge**. No more than one provider-in-charge may be associated with a facility code at a time. The primary provider is also the default provider. If immunizations reported to CIR are missing the provider associated with the record, the default provider will be used for CIR reporting purposes.

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Help

- If you need help with any step of the process the quick link to the **CIR Facility Registration Guide** is circled below:

Promoting and Protecting the City's Health

NYC Health
Welcome to Citywide Immunization Registry

The Citywide Immunization Registry (CIR) is a database of patient immunization records submitted by New York City (NYC) health care providers since 1995. It is accessible to health care providers, schools, individuals, and agencies concerned with public health to help en... ▲

CIR Facility Manager

Resource Links

CIR Facility Registration Guide

Mpox Enrollment Guide

Mpox Vaccine Accountability

Quick Links

Citywide Immunization Registry

Vaccines For Children

COVID 19 Vaccination Program

Manage Profile

Contact Us



Subscribe to [Health Alert Network](#) (HAN) for DOHMH News and Alerts

+ START NEW CIR REGISTRATION | Q CIR FACILITY LOOKUP | EXPORT

Filters

Sort Facilities By System default

3 results

BOOKS DAY CARE	MEDICAL PC
 Facility Code - 10036N00 Approved - Active	 Facility Code - 10035X00 Approved - Active

Single Sign-on (SSO) - Authentication

Single sign-on log in page:

- All users must create a single sign-on account to access the Online Registry and the CIR Facility Manager
- Click **Register** to create your account
- If you already created a single sign-on account, enter your email and password then click **Sign In**

CIR AUTHENTICATION SERVER

Sign in to your account

i Please read carefully before proceeding:

You are viewing this message because all users must now register with the CIR Authentication Server to create a Single-Sign-on (SSO) account to access the CIR Online Registry and the CIR Facility Manager application even if you already have an Online Registry account.

- CIR Online Registry users: when creating your SSO account, the email address on your OR user account and your (SSO) account should match.
- You will have access to your individual Online Registry accounts linked to the same email address as long as the sites are affiliated.

Please email cir@health.nyc.gov with questions.

Email

Password

☐ Remember me

[Forgot Password?](#)

Sign In

New user? [Register](#)

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Single sign-on (SSO) account creation:

- When you create your Single Sign-on (SSO) account, the email address on your online registry user account and SSO account must match.
- You will have access to all sites under the same umbrella code for which you have the same email address linked to your online registry accounts.
- After you fill in your information, click **Register**.

Register



Please read carefully before proceeding:

You are viewing this message because all users must now register with the CIR Authentication Server to create a Single Sign-on (SSO) account to access the CIR Online Registry and the CIR Facility Manager application even if you already have an Online Registry account.

- Click on the 'Register' link below to create your Single Sign-on (SSO) account.
- CIR Online Registry users: when creating your SSO account, the email address on your OR user account and your (SSO) account should match.
- You will have access to your individual Online Registry accounts linked to the same email address as long as the sites are affiliated.

Please email cir@health.nyc.gov with questions.

First name

Last name

Email

Password

* Password should have a minimum of 8 characters, with at least one number and one upper case letter.

Confirm password

[« Back to Login](#)

Register

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

CIR Acceptable Use Policy

- All users will view this screen that replaces the Acceptable Use Policy User Agreement paper form during the user account set up.
- Click **Accept** to agree and acknowledge the terms and condition of the single sign-on account.

Terms and Conditions

i Please read carefully before proceeding:

You are viewing this message because all users must now register with the CIR Authentication Server to create a Single Sign-on (SSO) account to access the CIR Online Registry and the CIR Facility Manager application even if you already have an Online Registry account.

- Click on the 'Register' link below to create your Single Sign-on (SSO) account.
- CIR Online Registry users: when creating your SSO account, the email address on your OR user account and your (SSO) account should match.
- You will have access to your individual Online Registry accounts linked to the same email address as long as the sites are affiliated.

Please email cir@health.nyc.gov with questions.

System Security Measures to be followed by all Authorized Users of the CIR applications.

Please read this statement carefully before agreeing to the System Security Measures.

1. The security of the CIR applications is of the highest priority. System security is essential for the effective and efficient operation of the system. It is the responsibility of all Authorized Users to maintain the highest possible degree of system security. If a security problem is discovered, it should be reported by telephone to the Site Security Administrator immediately.
2. Create passwords that are not easy to guess or to find using a password decoding program. Password should have a combination of 8 or more characters, with at least one number and one upper case letter.
3. Keep the password confidential; do not write it down.
4. Do not share usernames and passwords. Each Authorized User must log in separately to register facility, report immunizations, add or look up patients, and for all other activities performed online.
5. Change passwords regularly (every 90 days)
6. Authorized Users may not use a username and password account created for one location of employment at another location.
7. If a password has been lost, stolen, or has been otherwise obtained by another person, or if Authorized User has any reason to believe that someone has obtained unauthorized access to CIR Applications, it is the responsibility of the Authorized User to immediately notify the Site Security Administrator.

Decline

Accept

- Once you register you will receive an email verification to activate your account
- You should verify your email within 30 minutes of receiving the email verification.

CIR AUTHENTICATION SERVER

Email verification



Please read carefully before proceeding:

You are viewing this message because all users must now register with the CIR Authentication Server to create a Single Sign-on (SSO) account to access the CIR Online Registry and the CIR Facility Manager application even if you already have an Online Registry account.

- Click on the 'Register' link below to create your Single Sign-on (SSO) account.
- CIR Online Registry users: when creating your SSO account, the email address on your OR user account and your (SSO) account should match.
- You will have access to your individual Online Registry accounts linked to the same email address as long as the sites are affiliated.

Please email cir@health.nyc.gov with questions.



You need to verify your email address to activate your account.

An email with instructions to verify your email address has been sent to your address [d*****@n.com](#).

Haven't received a verification code in your email?

[Click here](#) to re-send the email.

[« Back to Login](#)

For CIR Authentication Server Account issues, contact: cir@health.nyc.gov

- Click **Link to email address verification** to activate your Single Sign-on account

Verify email

External Inbox x



CIR Authentication Server <cir-single-sign-on@health.nyc.gov>

to

10:42 AM (10 minutes ago)



Someone has created a CIR Authentication Server account with this email address. If this was you, click the link below to verify your email address

[Link to e-mail address verification](#)

This link will expire within 30 minutes.

If you didn't create this account, just ignore this message.

Sent from the New York City Department of Health & Mental Hygiene. This email and any files transmitted with it may contain confidential information and are intended solely for the use of the individual or entity to whom they are addressed. This footnote also confirms that this email message has been swept for the presence of computer viruses.

↩ Reply

↩ Reply all


➦ Forward

Multi-factor Authentication (MFA)

- You will receive an email with an access code so that your login can be remembered for 30 calendar days
- Enter the access code, check **Remember device for 30 days**, and click **Submit**

CIR AUTHENTICATION SERVER



 **Please read carefully before proceeding:**

New Sites

Click on the 'Register' link below to create your Single Sign-On (SSO) account. After creating the SSO account, follow the steps to register your facility and get access to the CIR Online Registry.

Previously Registered Sites

After creating a SSO account you may:

- Update your CIR facility details and facility contact information
- Update and submit electronically signed CIR Online Registry access forms 'Site Security Agreements (SSA)'.
 - To access the Online Registry a Site Security Administrator (User Manager) must be designated. The Security Administrator, can set up additional user accounts for staff members at this site. Please follow the CIR Facility Registration Guide.

Please email cir@health.nyc.gov with questions.

Please check your email to obtain the Access Code that was sent to you, and then type it below and click the Submit button

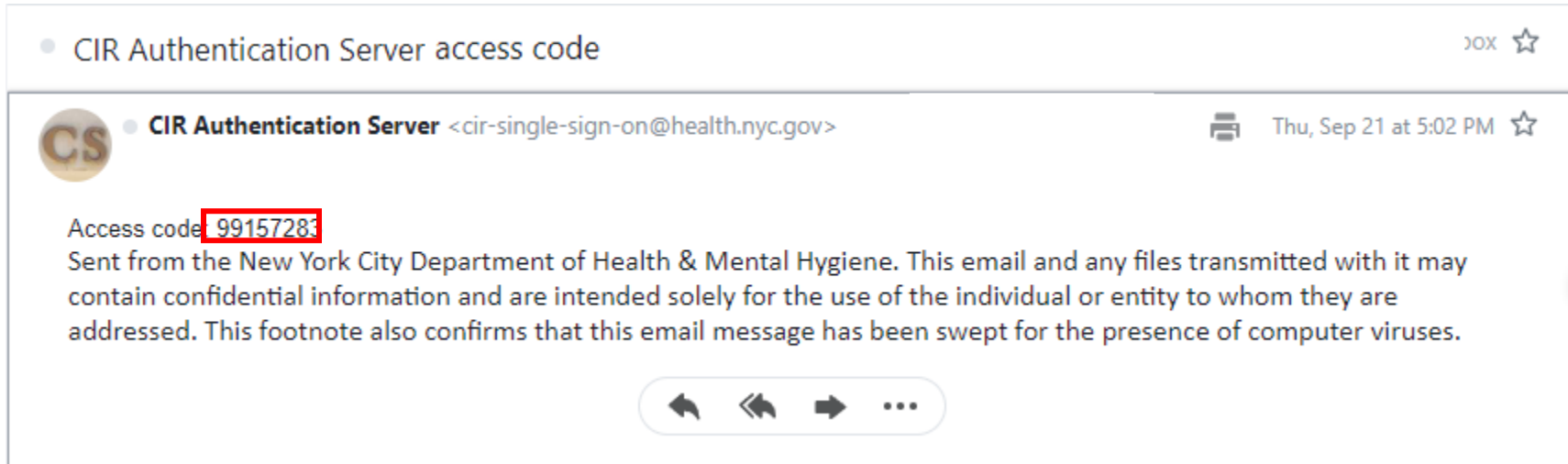
Access Code

Remember device for 30 days ☐

Submit **Resend Code** **Cancel**

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

- Example email sending an MFA access code:



Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Single Sign-on Troubleshooting

Link Online Registry Accounts to SSO Account

- If the email address associated with your Online Registry do not match the email address for the Single Sign-On account, the following screen will appear:

Link Online Registry Account

To access the CIR Online Registry, you need to have one or more active Online Registry accounts linked to your Single Sign-on (SSO) account. Users who have multiple Online Registry accounts can link their accounts to a Single sign-on account as long as the accounts are under the same facility umbrella determined by your organization and the email address of the Online Registry accounts match the email of the SSO account.

Associated Online Registry Accounts

No Online Registry accounts were found with an email address that matches your SSO email address. Please contact your facility Online Registry Site Security Administrator (SSA) if you need an Online Registry account created.

Note: If you have Online Registry accounts, under the same Facility Umbrella and has matching email address, that are not displayed for linking, please contact cir@health.nyc.gov with the subject line: 'Online Registry accounts not displayed in the Associated Online Registry Accounts list.' Please include your Facility Name, Facility Code and OR Username in the email.

CLOSE

- If you have Online registry accounts under multiple facility umbrella codes that match the email address on the Single Sign-On account, the following screen will appear:
- Please contact cir-reset@health.nyc.gov or call (347) 396-2400 and provide the reference number that was generated for you.

Link Online Registry Account

The system has identified duplicate email addresses on more than one Online Registry account that do not belong to the same facility umbrella.

Please contact CIR at (347) 396-2400 and provide the reference number **1694014211726** to resolve this issue.

You can also contact the Citywide Immunization (CIR) at cir@health.nyc.gov.

CLOSE

NEW! Online Registry Welcome, Consent and Log-in screens

Starting on October 3, 2023, at 1 pm (EST), the Online Registry log-in screen will be replaced with the **CIR Authentication Server log-in screen**. At that time, previous OR users will no longer use their Online Registry User ID and Online Registry password. Instead, the **CIR Authentication Server log-in screen** will prompt Users to create a **Single Sign-on (SSO)** account to access the **CIR Online Registry** and the **CIR Facility Manager** applications. The account will be tied to the individual's work email address and a new password that they will create.

Online Registry Linked Accounts

- Before accessing the OR **Welcome page** and **log-in** screen the first time using Single-Sign-on, practices/sites under the same facility umbrella can be linked to your Single Sign-on account if your email is already linked to an OR account of the site. This process needs to be done only one time. If you do not see a site listed, please contact cir-reset@health.nyc.gov. If you do not have any associated sites, simply click **CLOSE** the modal.
- Click **Link** to link a facility

Reminder for all Online Registry users to bookmark www.nyc.gov/health/cir to click on the **CIR Online Registry GO** icon to log in to the **CIR Authenticator Server** tool for access to the OR dashboard:



Link Online Registry Account

To access the Online Registry you need to have one or more active Online Registry accounts linked to your single sign-on account. **Only Online Registry accounts within the same facility umbrella and can be linked to one single sign-on account.**

The system identified the following unlinked Online Registry accounts, within the same facility umbrella, with an email address matching your SSO account. Click on the Link button displayed next to each matching result to link the accounts. This is a one-time process.

All linked accounts will be displayed on the Online Registry home page.

Associated Online Registry Accounts

The system identified the following unlinked Online Registry accounts with an email address matching your SSO account. Click on the **Link** button displayed next to each matching result to link the accounts. This is a one-time process. All linked accounts will be displayed on the Online Registry home page.

Filters

2 results

Facility name	Facility code	OR username/ID	OR account type	Facility Address	
DEMO MEDICAL PC TEST	10269X64	dzhang1	Normal	100 MEDICAL STREET, BROOKLYN, NY - 11201	LINK
DEMO MEDICAL PC TEST	10269X64	dzhang2	SSA	100 MEDICAL STREET, BROOKLYN, NY - 11201	LINK

CLOSE

Online Registry Linked Accounts Dashboard

- Your facility's email is linked to that you have an Online Registry account will appear on the dashboard
- Click **Select** to open into the Online Registry view of the specific facility
- You have the option to unlink any facility but clicking **Unlink**

Promoting and Protecting the City's Health

NYC
Health

Demo Zhang
emilydohtest+md@gmail.com [→]

Welcome to Citywide Immunization Registry

Resource Links

Online Registry
Resources

Quick Links

Citywide Immunization
Registry

Vaccines For Children

CIR Facility Manager

COVID 19 Vaccination
Program

Manage Profile

Contact Us

LINK ONLINE REGISTRY ACCOUNT

EXPORT

Filters

2 results

Sort Accounts By System default

DEMO MEDICAL PC TEST

Facility code - 10269X64
Username - dzhang1
Account type - Normal

Unlink Select

DEMO MEDICAL PC TEST

Facility code - 10269X64
Username - dzhang2
Account type - SSA

Unlink Select

Unlinking an account

- Click **Confirm** to unlink a facility

DEMO MEDICAL PC TEST

Facility code - 10269X64
Username - dzhang1
Account type - Normal

Unlink Select

DEMO MEDICAL PC TEST

Facility code - 10269X64
Username - dzhang2
Account type - SSA

Unlink Select

Unlink OR account dzhang1 from SSO account emilydohtest+md@gmail.com?

Are you sure you want to unlink this OR account from SSO account: emilydohtest+md@gmail.com?

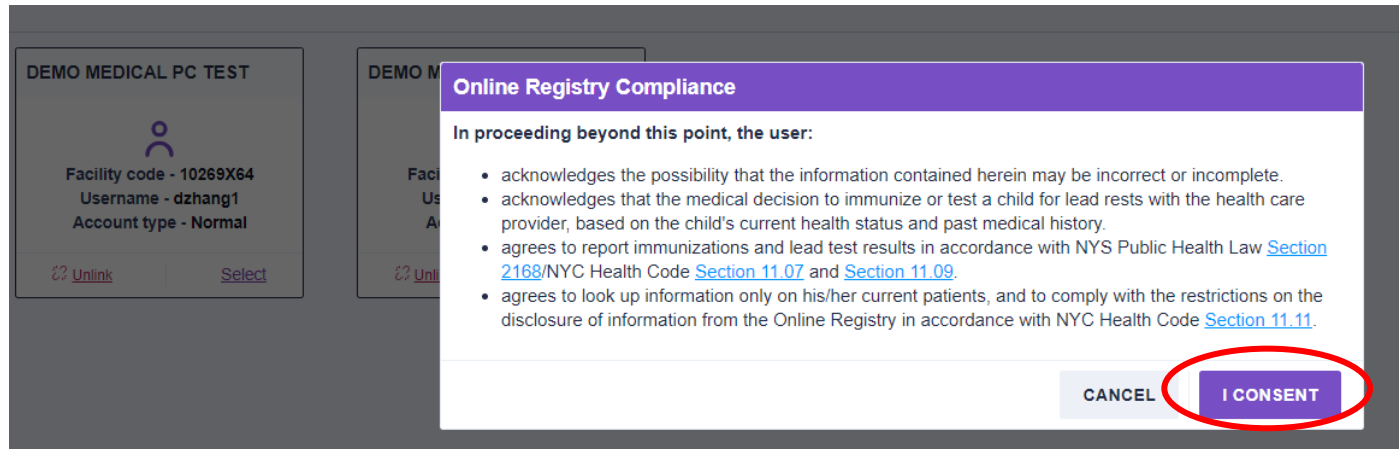
Once unlinked, the facility will no longer be displayed or accessible when logged in through this SSO account. All OR accounts must be linked to an SSO account to be accessible.

CANCEL CONFIRM

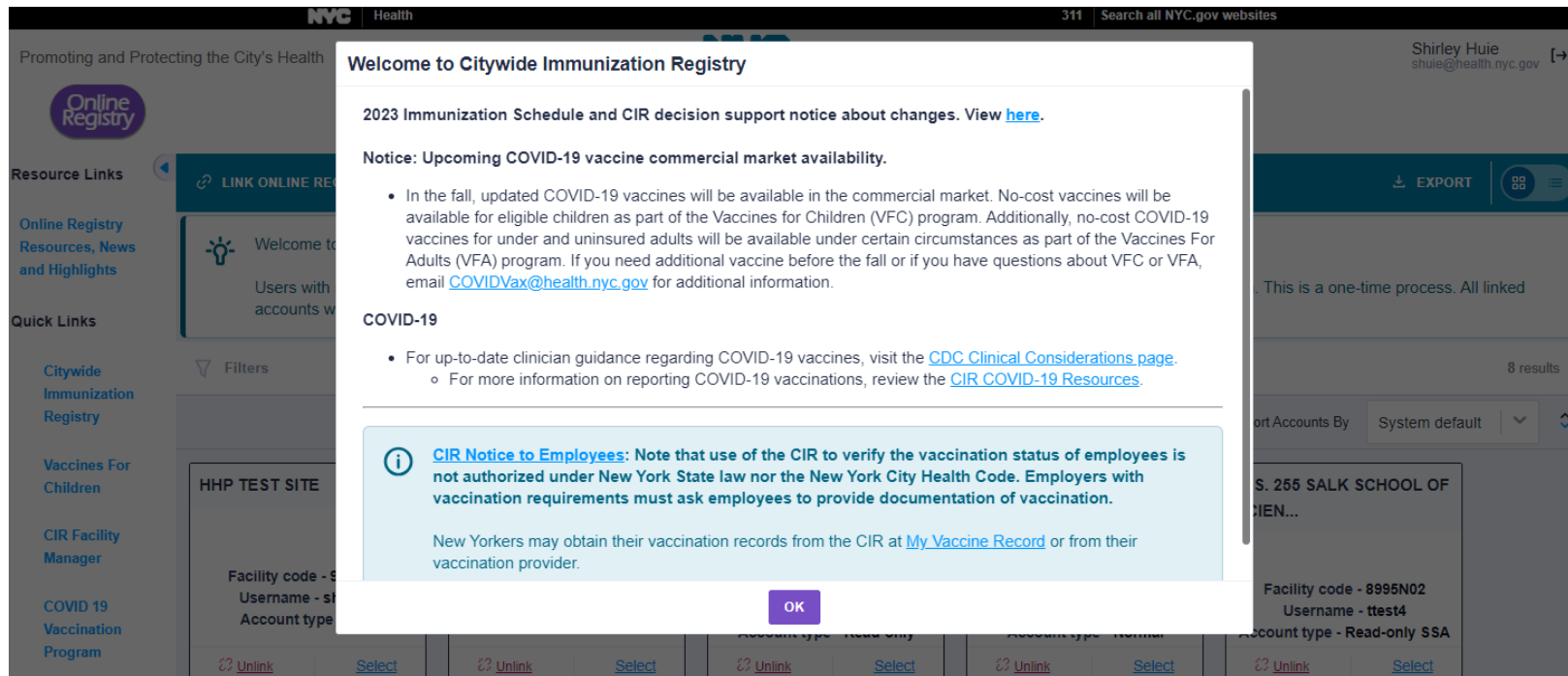
Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Online Registry Welcome, Consent and Log-in screens

- Click **I Consent** to agree and acknowledge to comply with the New York State Public Health Laws, Rules and Regulations.



- After clicking **I Consent** the NEW Online Registry **Welcome** Page will appear



Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Online Registry Application -Log-in success

New Home button to the Online Registry Single Sign-on dashboard.



Welcome to the Online Registry.

In the future, after you login to the system, you will be presented with a list of patients who have been viewed by users at your facility, DEMO MEDICAL PC TEST.

However, at this moment there are no patients in the list. Please begin by performing a patient search. You can perform a search by clicking on the "Search" icon, above.

For assistance please click on "Help", above.

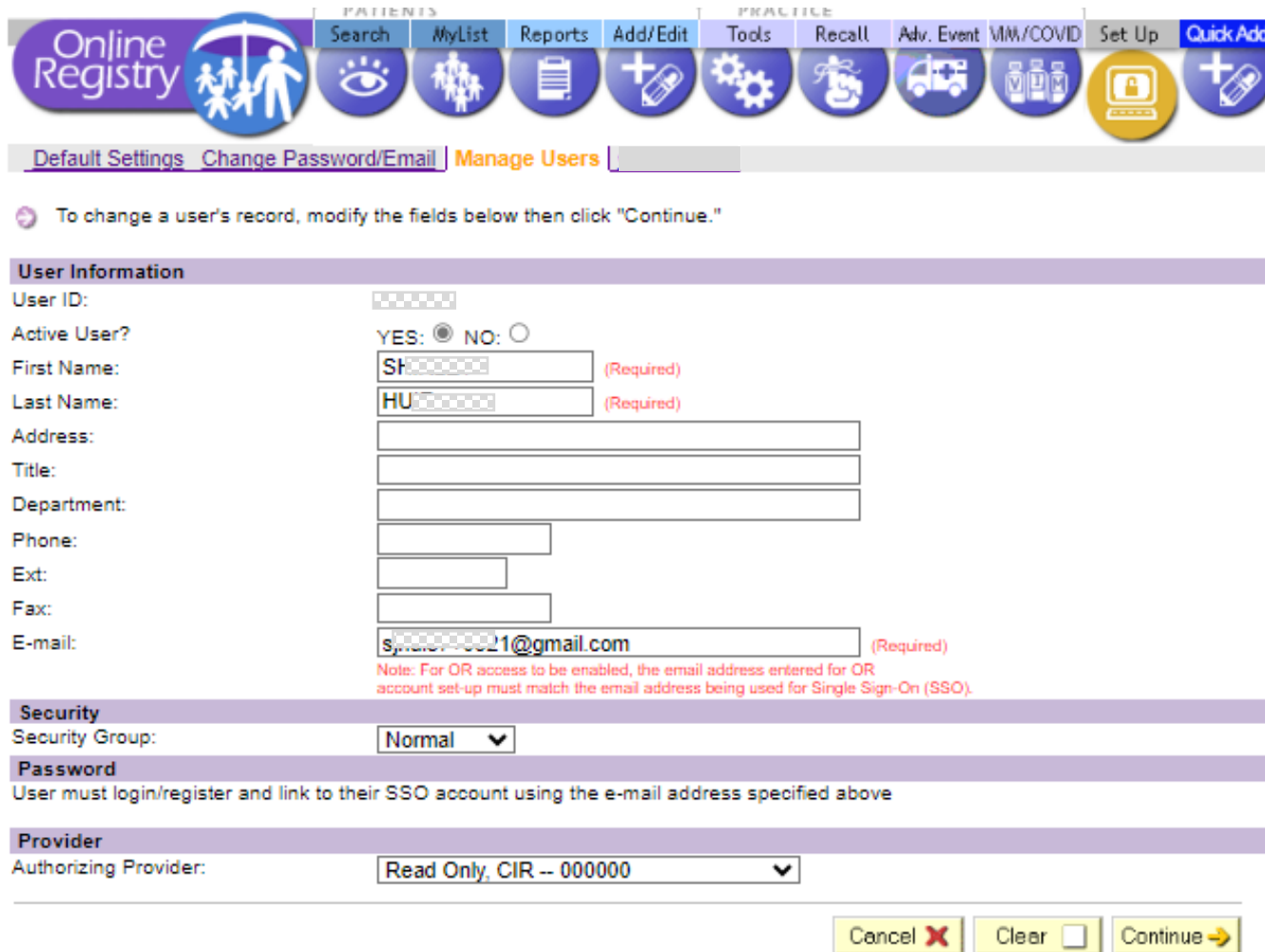
The Citywide Immunization Registry 42-09 28th Street, 5th Floor, CN 21, Long Island City, NY 11101-4132 347-396-2400	Healthy Homes Program (HHP) 125 Worth Street, CN 58, New York, NY 10013 646-632-6023
--	--

Reminder for all Online Registry users to bookmark www.nyc.gov/health/cir to click on the CIR Online Registry GO icon to log in to the CIR Authenticator Server tool for access the OR dashboard:



Site Security Administrator (SSA) -User Manager -How to Set Up Additional Users- Key Steps

The designated SSA role is to Add/Modify Users from the Set-Up Manager Users screen. As of October 3, 2023, the SSA will no longer add the email address. Instead, the new User will be prompted by automatic email to go through the Single Sign-on and Multi-factor Authentication process to access the Online Registry dashboard. SSA's will continue to obtain the [Authorized User Confidentiality Agreement and Acceptable Use Protocol](#) form from each user and maintain a file at the worksite. Do not send forms to CIR.



The screenshot shows the 'Online Registry' interface with a navigation bar at the top containing icons for PATIENTS (Search, MyList, Reports, Add/Edit, Tools, Recall, Adv. Event, MM/COVID) and PRACTICE (Set Up, Quick Add). Below the navigation bar, the 'Manage Users' tab is selected. A message states: 'To change a user's record, modify the fields below then click "Continue."'.

User Information

User ID: [text box]
 Active User? YES: ☒ NO: ☐
 First Name: [text box] (Required)
 Last Name: [text box] (Required)
 Address: [text box]
 Title: [text box]
 Department: [text box]
 Phone: [text box]
 Ext: [text box]
 Fax: [text box]
 E-mail: [text box] (Required)
 Note: For OR access to be enabled, the email address entered for OR account set-up must match the email address being used for Single Sign-On (SSO).

Security

Security Group: [Normal] ▼

Password

User must login/register and link to their SSO account using the e-mail address specified above

Provider

Authorizing Provider: [Read Only, CIR -- 000000] ▼

Buttons: Cancel [X], Clear [X], Continue [→]

For OR access to be enabled, the email address entered for OR account set-up must match the email address being used for Single Sign-On (SSO).

As of October 3rd, SSA's will no longer reset User accounts after the initial set-up. The User will be able to reset their own account via the CIR Authentication Server tool, which are accessible from the CIR homepage: www.nyc.gov/health/cir. Users can update their profile using the **Single sign-on (SSO) User Profile Manager** located in the Online Registry dashboard home, left navigation bar under Quicks Links.

Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

New account added by SSA:

The feedback message in green is shown below after a new account is created.

The User will receive an email and the SSA is reminded to inform the new User to check their email box for a link to complete the OR account set-up process.

The screenshot shows the NYC Online Registry dashboard. At the top, there's a navigation bar with tabs for PATIENTS (Search, MyList, Reports, Add/Edit) and PRACTICE (Tools, Recall, Adv. Event, MM/COVID). Below this is a row of icons representing various functions. A welcome message on the right says "Welcome Shirley Huie (9009X01 (CIR))" and "Address: 42-09 28 STR". Below the navigation bar, there are links for "Default Settings", "Change Password/Email", "Manage Users", and "Create SSA". A green checkmark icon is next to a message: "User shuie55 was created. Please have the user check his/her email for a link to register/login to Single Sign-On (SSO) and then link to his/her new Online Registry account. Please be aware that there may be a delay of up to an hour for receipt of the email." Below this message, there's a purple bar with the text "Add New User" and a yellow "Continue" button with a right arrow. At the bottom, there's another purple bar with the text "View/Modify Users".

During the set-up process, there will be prompts to check email and click through two screens.

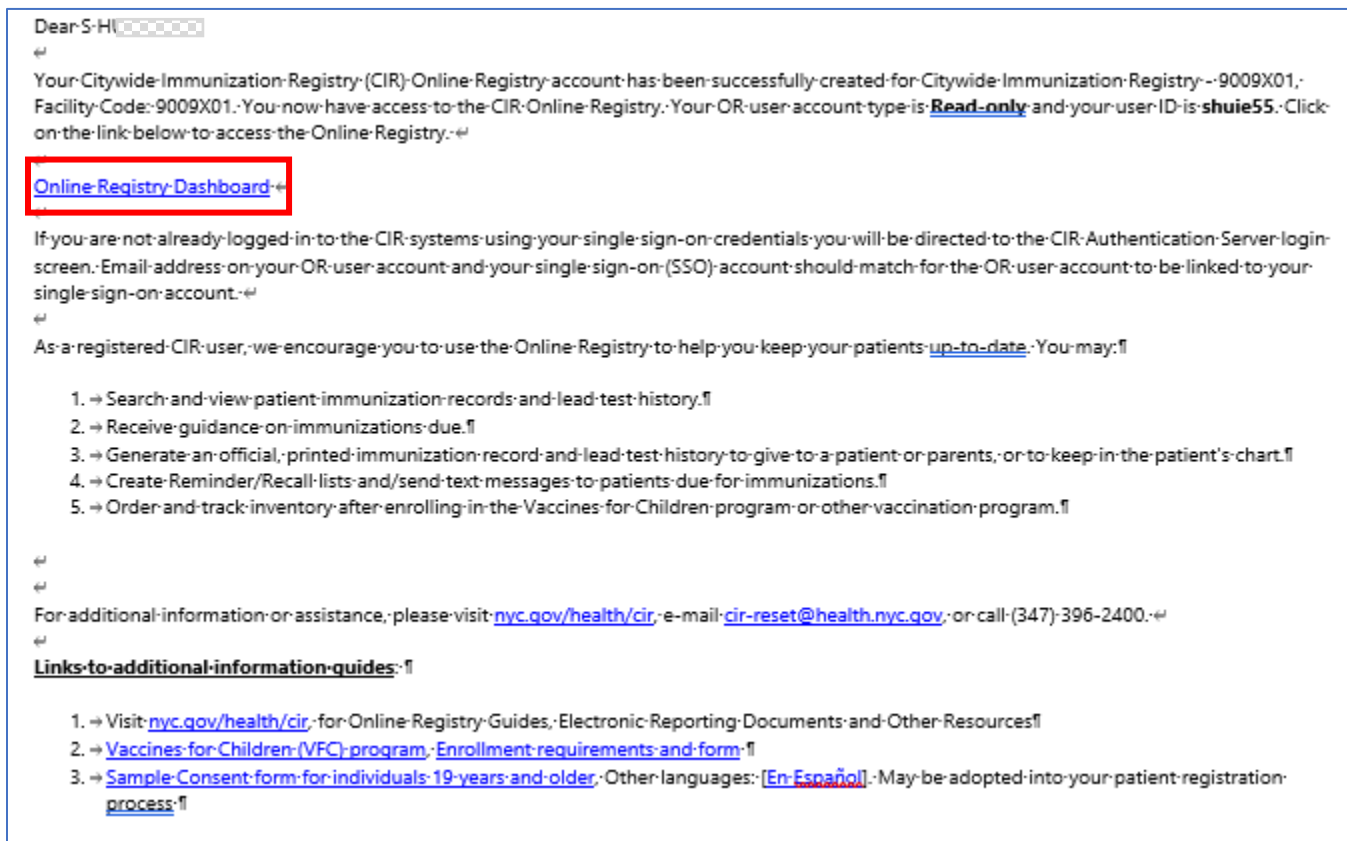
Reminder for all Online Registry users to bookmark www.nyc.gov/health/cir to click on the **CIR Online Registry GO** icon to log in to the **CIR Authenticator Server** tool for access the OR dashboard:



Citywide Immunization Registry (CIR): How to Register and Update Facility and Contact Information; Designate an SSA

Sample email received by user automatically from their SSA during account set up process.

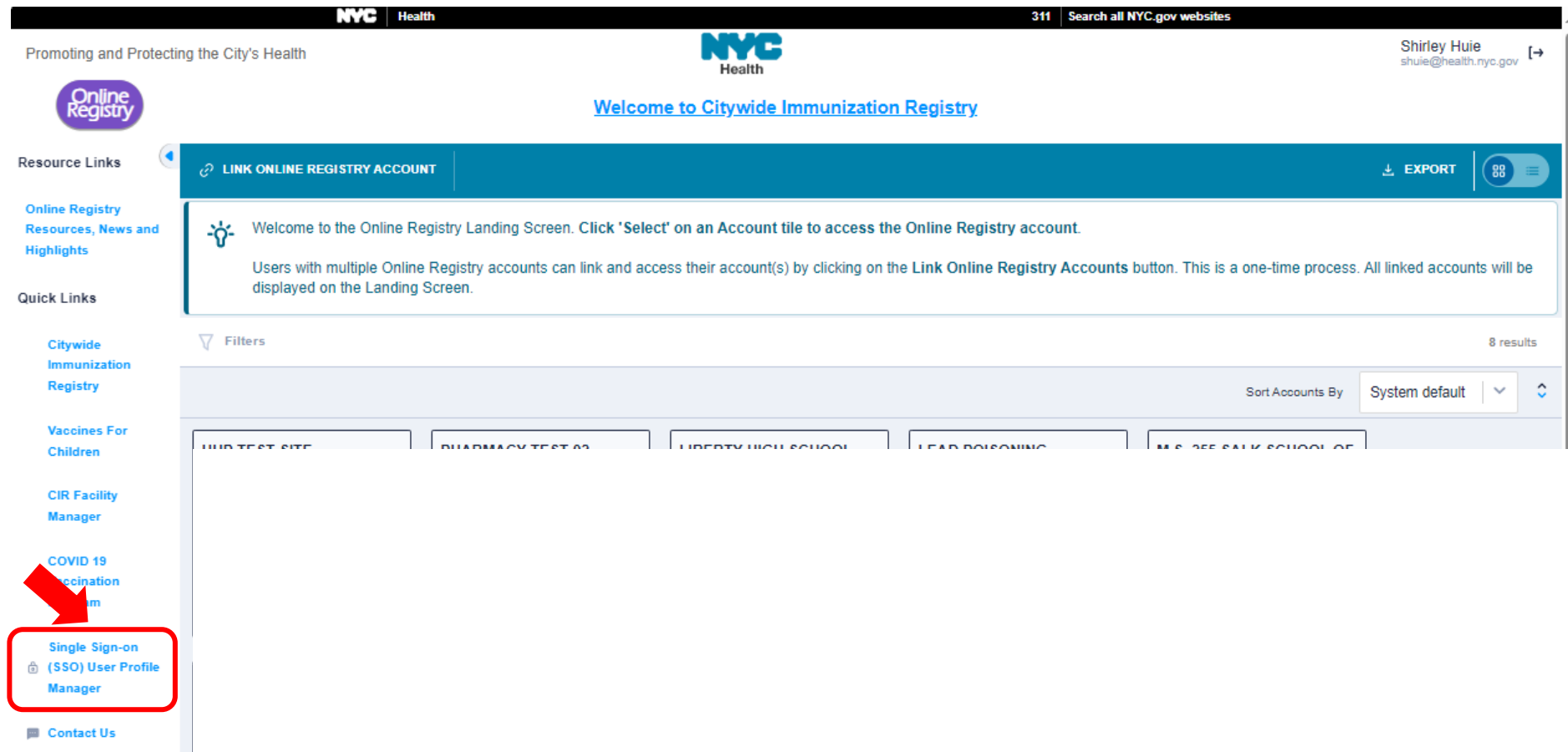
- Click on the **Online Registry Dashboard** link to start accessing your facility/facilities your OR account is linked to.



New users will follow the steps outlined in **Online Registry Welcome, Consent and Log-in screens**.

Single sign-on (SSO) User Profile Manager

NOTE: Users can update their profile, password, email by clicking on the **Single Sign-on User Profile Manager** found in the left navigation bar under Quick Links. (See next page).



The screenshot displays the NYC Health Citywide Immunization Registry (CIR) interface. At the top, the NYC Health logo is visible, along with the user's name, Shirley Huie, and email address, shuie@health.nyc.gov. The main heading is "Welcome to Citywide Immunization Registry". Below this, there is a section for "LINK ONLINE REGISTRY ACCOUNT" with an "EXPORT" button. A message box states: "Welcome to the Online Registry Landing Screen. Click 'Select' on an Account tile to access the Online Registry account. Users with multiple Online Registry accounts can link and access their account(s) by clicking on the Link Online Registry Accounts button. This is a one-time process. All linked accounts will be displayed on the Landing Screen." Below the message box, there is a "Filters" section and a "Sort Accounts By" dropdown menu set to "System default". A table of accounts is partially visible, with columns for "HUB TEST SITE", "PHARMACY TEST SITE", "LIBERTY HIGH SCHOOL", "LEAD POISONING", and "MS 355 PARK SCHOOL OF". In the left navigation bar, under the "Quick Links" section, the "Single Sign-on (SSO) User Profile Manager" link is highlighted with a red box and a red arrow.

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- Click on the **Account** tab to edit account information including email address, first and last name. Click [Save](#) to save changes.

[Back to Facility Registration](#)
[Sign out](#)

Account
>

[Password](#)
[Authenticator](#)

Edit Account * Required fields

Email *

First name *

Last name *

- Click on the **Password** tab to change password. Click [Save](#) to save changes.

Account

Password >

Authenticator

Change Password

All fields required

Password

New Password

Confirmation

Save

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Single Sign-on (SSO) User Profile Manager-optional authenticator not managed or supported by CIR

The authenticator shown here is not managed or supported by CIR and is optional for the user. Instead, we have implemented a multifactor authentication where a code sent to the user's email must be entered on the CIR Authentication screen, per device used by the user, every 30 days.

Account

Password


Authenticator >

Authenticator * Required fields

1. Install one of the following applications on your mobile:

- Microsoft Authenticator
- Google Authenticator
- FreeOTP

2. Open the application and scan the barcode:



Unable to scan?

3. Enter the one-time code provided by the application and click Save to finish the setup.

Provide a Device Name to help you manage your OTP devices.

One-time code *

Device Name

Cancel
Save