

## **Online Registry – Patient Level COVID-19 Lot Number Modifications**



www.nyc.gov/health/cir

**Incorrect Lot Number** If you have already recorded a COVID-19 immunization event for a patient of your practice in the Online Registry and need to change the lot number associated with the patient's COVID-19 immunization event, please follow the steps below.

Note: If the incorrect lot number is assigned to multiple patients' COVID-19 immunization events, you will need to complete these steps for each individual patient.

1. Search for and select the existing patient record.

To search for a patient from My List:

- Click on the My List icon.
- Search for the patient by first and last name.
- Select the patient record by clicking on the patient's name in the list below.
- To report 1<sup>st</sup> and 2<sup>rd</sup> doses of COVID vaccine, please use the <u>Adult (condemic</u>) screen to Search for your patient and enter the immunization information required. Each time someone at Citywide Immunization Registry finds a patient using Search, they are added to MyList. New patients reported to CIR via EMRs are not automatically added to MyList. To help manage and update your list, use the <u>Refresh MyList</u> feature. To kerw a patient record, click on the patient's name. To Remove From List, check oner more boxes and click the "Remove" button at the bottom of the page. (The selected patients will no longer appear on this page. They will not be deleted from the Registry.)

You may update a patient's status to let CIR know if the patient is no longer being seen at your practice. Click the Yes/No toggle in the Active column to the left of the patient's name. Update the information at the bottom of "Update Patient Info" screen that appears.

Search MyList	<sup>or</sup> View MyList	• Tip
first name -or- last name TestFirst TestLast	v patients accessed Show per page and Jump to	You can set your viewing defaults in Set Up
TestFirst TestLast		the ming delates in <u>dec og</u>
Reser C GOP		

					LEGEND				
€ =lmmu	nizations DUE	NOW		Immunizations DUE SOON	O=lmm	unizations UP	TO DATE	O=Immun	ization status not ava
Remove	CIR Id	Active	Imm Status	Last/First	Sex 🔎	DOB	Address	Home Phone	Mobile Phone
	788619422	Ves	•	Test, Testfirst	F	12/12/2012			
	791772962	Yes		Jughead, Archie	М	05/22/1999	27 Wimpole Street Bronx, NY 10460		678-849-4166
	791771661	Ves	۷	Testpancakes, Testbanana	м	07/14/1953	1 Elvis Lane New York, NY 10001	929-475-3100	929-475-3100
	791759821	Ves	•	Testdaughter, Testmvrjanet	F	02/22/2017	26 47th Street Brooklyn, NY 90210		678-849-4166
	791774121	Ves		Longersurnamelongersurnam, Longnamelongnamelongname	F	03/18/1983	33 Wind Road Bronx, NY 60410	678-366-7857	678-849-4166
	791772981	Ves	۷	Thomson, Testdup	М	03/18/1983	54 Southern Blvd Bronx, NY 10460	678-366-7857	
	791772961	Ves	0	Thomson, Testdup	М	03/18/1983	45 Southern Blvd Bronx, NY 10460		678-849-4166

To search for a patient from Search:

- Click on the **Search** icon.
- Complete all search fields, • then click Continue.
- You can also add new patients and perform an advanced search on this screen using the "Add New Patient" and "Advanced Search" tabs.



Or complete all fields below to find a patient's record in the CIR. All fields must match exactly. To search by medic number, CIR number or other demographics, use Advanced Search.





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- 2. Search for and select the patient in My List.
- Click on the Add/Edit icon, then the "Modify History" tab.



4. Scroll down to the COVID-19 immunization event. Check the box next to "Modify or Delete".

0 event/s	
Varicella 0 event/s	
HepA 0 event/s	
Meningococcal (MenACWY) 0 event/s	
Human Papillomavirus 0 event/s	
Adult Pneumococcal (PCV & PPSV) 0 event/s	
H1N1 Influenza 0 event/s	
COVID-19 1 event/s	04/27/2021 COVID-19, Ad26, 0.5 mL dose (Janssen) 67y 9m Given by this practice Lot No: 011FAKE Exp. Date: 1/23/2089 Fund Type: PUBLIC Modify or Delete
Other 0 event/s	,

🔶 Change

Clear

Continue ->

5. Click Continue ->

Continue 🤿

6. On the next screen click the bubble next to "Delete", then click Continue

COVID-19 1 event/s	O Modify Event or       ● Delete Event         04       /       27       /       2021       (mm/dd/yyyy)         ● Given by this practice?       ○ Another?         COVID-19, Ad26, 0.5 mL dose (Janssen)       ✓         Lot:       011FAKE   Janssen Products, LP  12/31/2089   PUBLIC ✓
Other 0 event/s	

7. Confirm that the information on the screen is correct, then click

Online Registry	Search MyList Reports Add/Edit Tools R		Chelp ClogOut Welcome Kara Hoffman Facility: Clywide Immunization Registry (CIR)	
_			Address: 42-09 28 STREET	
Current Immuniz		<u>nunity</u>	Image: System	953 Male
2. Make changes 3. Check for acc	unization Events you wish to modify or delete. to Immunization Events you selected, double-check, then click the " suracy, then click the "Confirm" or "Change" button at the bottor in to the patient record.) Existing Event Information			
COVID-19	Date: 04/27/2021 Vaccine Name: COVID-19, Ad26, 0.5 mL dose (Janssen) Given by: This Practice	Lot Number: 011FAKE Manufacturer: JANSSEN Expiration Date: 12/31/2069 Vaccine Fund Type: PUBLIC		
	You are requesting to DELETE this event.			
		- Change Cancel 🗙 Confirm 🖌		

- 8. Once the event is deleted, from the current screen click on the **Adult** icon.
- Patient demographic information should already be filled in.
- If anything is missing, you can type it in here.
- The "Mother's Maiden Name", "Mother's Date of Birth", and "VFC Eligibility" fields will only show for patients under 19 years of age.

Oplino Search MyList Repo	rts Add/Edit Tools	CE Recall Adv. Event MM/	COVID Set Up Adult PHelo CorOut
Registry (Carlos and Carlos and C			Welcome Kara Hoffman Facility: Citywide Intmunization Re Molecular 42-09 28 STREET
Vaccine			
Quick-Add Adult Patients a	nd Vaccination	ns	$\checkmark$
Fill out the form below to report vaccinations f up and report vaccinations.	or adult patients. For p	atients under 19 year	s of age, use the Search or MyList screen to look
For additional instructions, see <u>Quick Guide</u> , <u>O</u>	nline Registry Reportin	<u>g COVID-19 Highligh</u>	its, or <u>Online Registry Help Guide for Pharmacists</u> .
For Vaccine Information Statements (VISs) click	: <u>here</u> (opens new wind	low).	
Patient Information Fields marked with * are required.			
First Name*	Middle Name		Last Name*
TestFirst			TestLast
Sex Assigned at Birth *			Date of Birth*
O Male 💿 Female 🔿 Unknown			12/12/2012
Mother's Maiden Name*		Mother's Date of E	lirth*
TestMother		12/12/1972	
VFC Eligibility*			
			x 🗸

For patients under 19 years of age, use My List if reporting immunizations other than COVID-19 or Influenza.

9. Scroll down and enter the patient's COVID-19 immunization information.

0	Enter the patient's	Race*     Ethnicity*       NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER     X       Not Hispanic or Latino     X
	race and ethnicity.	Building*     Street*     Apartment/Suite       42-09     28th Street
0	The "Vaccination Date" field will automatically default to today.	Phone*     Phone Type*①     Email Address       (000) 000-0000     Mobile     ×   ~   test@health.nyc.gov
	Make sure to enter the correct date.	Immunization Events         Click "Add Event" button to enter multiple immunization events.         Vaccination Date*       Vaccine Administered*
0	Select the correct COVID-19 vaccine lot.	04/02/2021     COVID-19, mRNA, 0.5 mL dose (Modern ×   ~     010M20A Moderna, Inc. 12/3 ×   ~       Add Lot Number       Route of Administration*     Priority Group
0	Enter all COVID-19 vaccine administration information.	Intramuscular       X       V       Comorbidity?       Persons aged 16-64 years wit X       V         Add Event       X       X       X       X       X       X       X       X
		Reset Confirm

10. When you are finished entering the COVID-19 immunization event information, click "Confirm".

