



ARKANSAS DEPARTMENT OF HEALTH

AFIX and Reminder/Recall Reports

AIAC Immunization Summit

August 17, 2018

Rachel Odom, VFC/AFIX Coordinator

Objectives

- **Learn to run WebIZ AFIX Snapshot Reports**
- **Learn to produce a WebIZ immunization reminder list**

A	Assessment
F	Feedback
I	Incentive
X	Exchange

Childhood Assessment

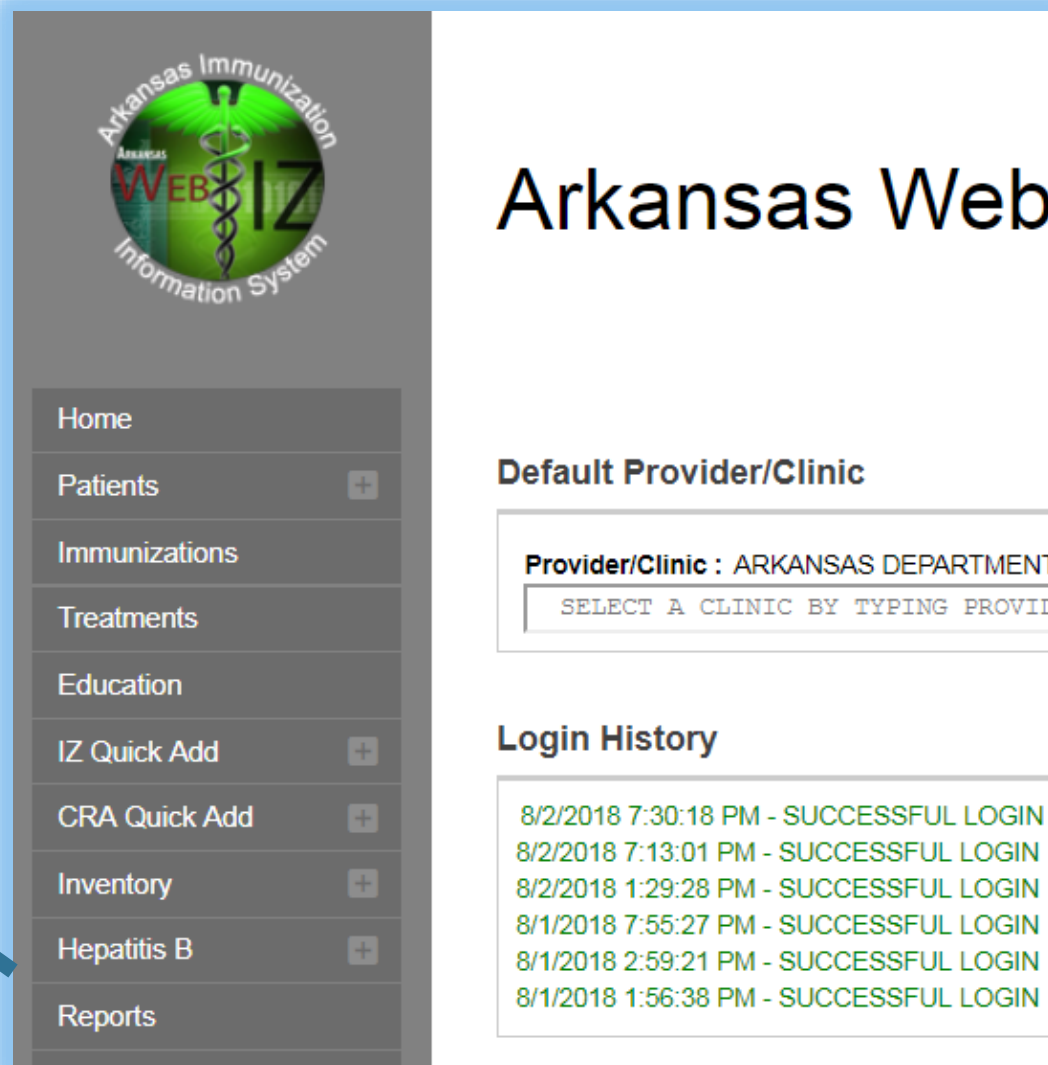
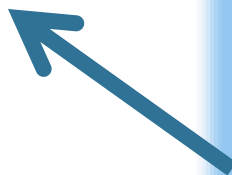
- 24 through 35 months as of 2nd birthday

Adolescent Assessment

- 13 through 17 years of age as of current date

AFIX Data Snapshot Reports

Reports



Arkansas Immunization Information System

Arkansas WebIZ

Default Provider/Clinic

Provider/Clinic : ARKANSAS DEPARTMENT OF HEALTH
SELECT A CLINIC BY TYPING PROVIDER/CLINIC

Login History

- 8/2/2018 7:30:18 PM - SUCCESSFUL LOGIN
- 8/2/2018 7:13:01 PM - SUCCESSFUL LOGIN
- 8/2/2018 1:29:28 PM - SUCCESSFUL LOGIN
- 8/1/2018 7:55:27 PM - SUCCESSFUL LOGIN
- 8/1/2018 2:59:21 PM - SUCCESSFUL LOGIN
- 8/1/2018 1:56:38 PM - SUCCESSFUL LOGIN

Coverage Statistics

AFIX Data Snapshot Reports

Clinic Immunization Count

Dosage Report

Doses Administered

Eligibility Category Patient Count Report

Healthcare Worker Immunizations

Immunization Rates

Invalid Doses

Patient Counts by Age and Insurance Source

Patients Aged Out of their VFC Eligibility Code

Vaccinations by Funding Source

Daily Vaccinations Report

AFIX Data Snapshot Reports ?

Cancel

Create New Data Snapshot

Filter Options

Provider/Clinic:

Assessment Type

Visit Type

☐ Show Master Rate Comparison Data

Filter



Create New Data Snapshot

Create Snapshot i

Cancel Create

Provider/Clinic: ARKANSAS DEPARTMENT OF HEALTH, LHU-ARKANSAS DEPARTMENT OF HEALTH (0001)

Assessment Type * !

AFIX CHILDHOOD
AFIX ADOLESCENT
ON-DEMAND CHILDHOOD
ON-DEMAND ADOLESCENT

Assessment Type * !

AFIX CHILDHOOD
AFIX ADOLESCENT
ON-DEMAND CHILDHOOD
ON-DEMAND ADOLESCENT

On-Demand Childhood

Create Snapshot 

Cancel

Create

Provider/Clinic: ARKANSAS DEPARTMENT OF HEALTH, LHU-ARKANSAS DEPARTMENT OF HEALTH (0001)

Assessment Type *

ON-DEMAND CHILDHOC ▼

Series/Antigens

- 4 DTaP
- 3 Polio
- 1 MMR
- UTD Hib
- UTD Hep B
- 1 VAR
- UTD PCV
- UTD RV
- 1 Flu
- 2 Hep A
- 4:3:1:3:3:1:4 Series

As of Date

CURRENT DATE ▼

08/02/2018



Feedback Date (AFIX Visit Date)

MM/DD/YYYY



Age Range

24-35 MONTHS

Age Range by Date of Birth

08/03/2015 - 08/02/2016

Compliance by Age

24 MONTHS

Series/Antigens

- 4 DTaP
- 3 Polio
- 1 MMR
- UTD Hib
- UTD Hep B
- 1 VAR
- UTD PCV
- UTD RV
- 1 Flu
- 2 Hep A
- 4:3:1:3:3:1:4 Series

Age Range

24-35 MONTHS

Compliance by Age

24 MONTHS

Create Snapshot

Cancel

Create

Provider/Clinic: ARKANSAS DEPARTMENT OF HEALTH, LHU-ARKANSAS DEPARTMENT OF HEALTH (0001)

Assessment Type *

ON-DEMAND CHILDHOC ▼

Series/Antigens

- 4 DTaP
- 3 Polio
- 1 MMR
- UTD Hib
- UTD Hep B
- 1 VAR
- UTD PCV
- UTD RV
- 1 Flu
- 2 Hep A
- 4:3:1:3:3:1:4 Series

As of Date

CURRENT DATE ▼

08/02/2018



Feedback Date (AFIX Visit Date)

MM/DD/YYYY



Age Range

24-35 MONTHS

Age Range by Date of Birth

08/03/2015 - 08/02/2016

Compliance by Age

24 MONTHS

Cancel

Create

AFIX Data Snapshot Reports ?

Cancel

Create New Data Snapshot

Filter Options

Provider/Clinic: ARKANSAS DEPARTMENT OF HEALTH, LHU-ARKANSAS DEPARTMENT OF HEALTH (0001)

SELECT A CLINIC BY TYPING PROVIDER, CLINIC, VFC PIN, OR CLINIC CODE ✕

Assessment Type

Visit Type

☐ Show Master Rate Comparison Data

Filter ▼

Date	Retained Until	Assessment Type	Visit Type	
08/02/2018	09/01/2018	ON-DEMAND CHILDHOOD		Reports ? ✕
06/01/2018	06/01/2021	MASTER RATE COMPARISON ADOLESCENT		Reports ? ✕

Reports



AFIX EXCEL FORMAT

AFIX PDF FORMAT

NOT UTD / MISSING IMM PATIENT LISTING

SINGLE ANTIGEN ASSESSMENT

MISSED OPPORTUNITIES PATIENT LISTING

INVALID DOSE PATIENT LISTING

PATIENT ROSTER

AFIX PDF Options



Assessment Type: On-Demand Childhood

- | | |
|--|---|
| <input checked="" type="checkbox"/> 4 DTaP | <input checked="" type="checkbox"/> 3 Polio |
| <input checked="" type="checkbox"/> 1 MMR | <input checked="" type="checkbox"/> UTD Hib |
| <input checked="" type="checkbox"/> UTD Hep B | <input checked="" type="checkbox"/> 1 VAR |
| <input checked="" type="checkbox"/> UTD PCV | <input checked="" type="checkbox"/> UTD RV |
| <input checked="" type="checkbox"/> 1 Flu | <input checked="" type="checkbox"/> 2 Hep A |
| <input checked="" type="checkbox"/> 4:3:1:3:3:1:4 Series | |

If a checkbox is unselected, the vaccine will not appear on the PDF output within the graph.

Milestones

- ☐ Healthy People 2020 Targets
- ☐ Jurisdiction Average
- ☐ County Average

Cancel

Run Report

Childhood Immunization Summary

Provider: ARKANSAS DEPARTMENT OF HEALTH
Clinic: LHU-ARKANSAS DEPARTMENT OF HEALTH

VFC PIN: 0001



As Of Date: 08/02/2018

Assessment Date: 08/02/2018

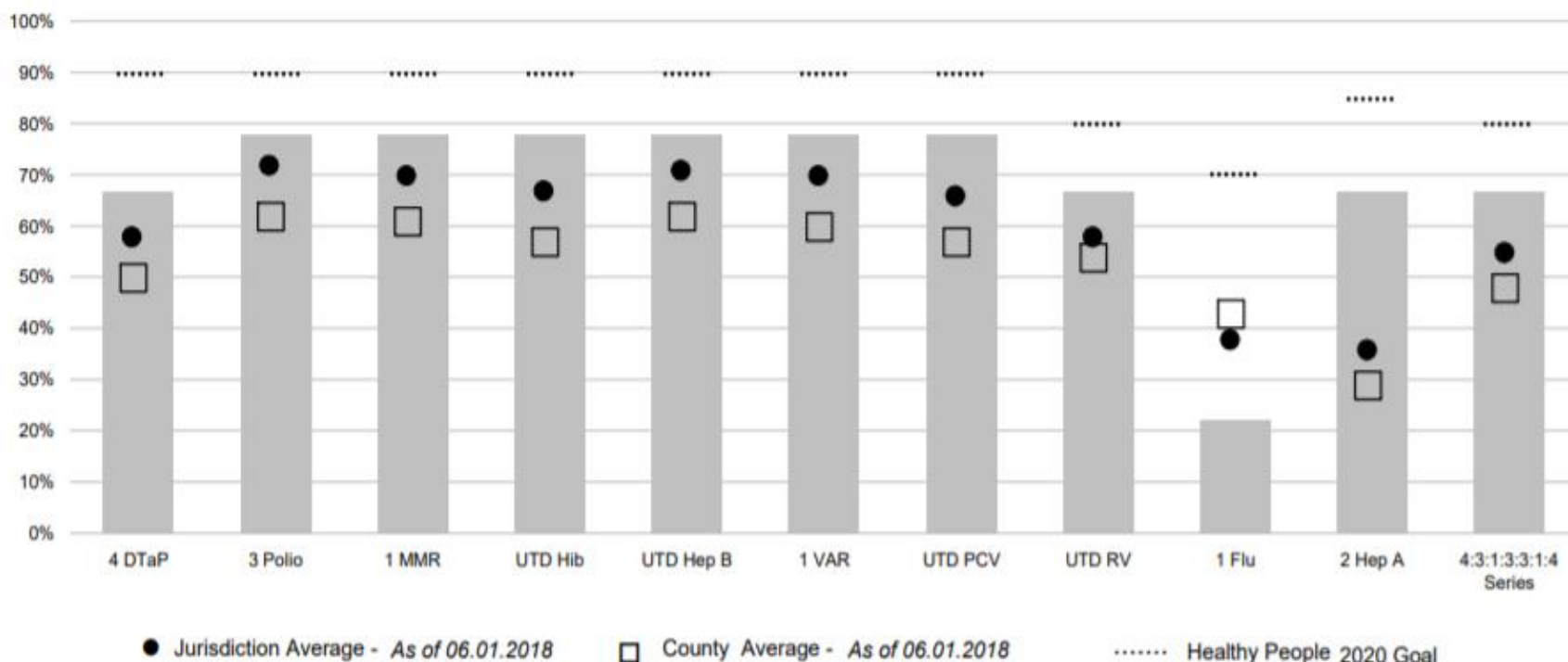
Feedback Date:

Ages Assessed: 24-35 MONTHS

Birthdate Range: 08/03/2015 - 08/02/2016

Compliance by Date: 24 MONTHS

Assessment of Immunization Rates | 9 Patient Records Assessed



The following vaccines and doses are recommended for this patient population.

	Doses Up To Date		Jurisdiction	County	Healthy	
	#	%	Avg.	Avg.	People	
4 DTaP	6	67%	56%	52%	90%	4 valid doses of DTaP
3 Polio	7	78%	70%	64%	90%	3 valid doses of Polio
1 MMR	7	78%	68%	63%	90%	1 valid dose of MMR
UTD Hib	7	78%	65%	59%	90%	Patient Series Status Complete for Hib
UTD Hep B	7	78%	69%	64%	90%	Patient Series Status Complete for Hep B
1 VAR	7	78%	68%	62%	90%	1 valid dose of Varicella
UTD PCV	7	78%	64%	59%	90%	Patient Series Status Complete for PCV
UTD RV	6	67%	56%	56%	80%	Patient Series Status Complete for RV
1 Flu	2	22%	36%	45%	70%	1 valid dose of influenza vaccine for the prior completed season. Flu season is defined as July 1 through June 30.
2 Hep A	6	67%	34%	31%	85%	2 valid doses of Hep A
4:3:1:3:3:1:4 Series	6	67%	53%	50%	80%	Valid number of doses or Patient Series Status of complete for 4 DTaP, 3 Polio, 1 MMR, UTD Hib, UTD Hep B, 1 Varicella and UTD PCV

*Patient Series Status Complete is a status defined by the CDSi logic. A patient can achieve a Complete status by meeting all of the ACIP recommendations for the patient series. For some AFIX childhood and adolescent assessments, this status can be achieved with a range of doses depending on the age at first vaccination, the vaccine product administered, and/or patient age.

Immunization rates and missed opportunities calculations only include immunization data that has been reported to the IIS.

Doses Up To Date
%

Jurisdiction
Avg.

County
Avg.

Healthy
People

4 DTaP

6

67%

56%

52%

90%

4 valid doses of DTaP

Childhood Immunization Summary

Provider: ARKANSAS DEPARTMENT OF HEALTH
Clinic: LHU-ARKANSAS DEPARTMENT OF HEALTH

VFC PIN: 0001



As Of Date: 08/02/2018
Assessment Date: 08/02/2018
Feedback Date:

Ages Assessed: 24-35 MONTHS
Birthdate Range: 08/03/2015 - 08/02/2016
Compliance by Date: 24 MONTHS

Missed Opportunity Assessment | 9 Patient Records Assessed

	4 DTaP	3 Polio	1 MMR	UTD Hib	UTD Hep B	1 VAR	UTD PCV	UTD RV	1 Flu	2 Hep A	4:3:1:3:3:1: 4 Series
# of Patients with a Missed Opportunity *	1	0	0	0	0	0	0	0	3	1	1
% of Patients with a Missed Opportunity	11%	0%	0%	0%	0%	0%	0%	0%	33%	11%	11%

* Missed Opportunities:

Patient has not received the appropriate number of doses to meet the AFIX assessment measurement requirement and WAS eligible to receive the vaccination on the date of the last immunization visit (includes influenza). Eligibility is defined by the recommended date in the vaccination forecast.

Patient has not received the appropriate number of doses to meet the AFIX assessment measurement requirement, WAS eligible to receive the vaccination on the date of the last immunization visit, AND received an incorrect dose of vaccine (includes influenza) that resulted in an "incorrect vaccine administration"

Patient has an exemption or refusal noted for the specified vaccine.

	4 DTaP	3 Polio
# of Patients with a Missed Opportunity *	1	0
% of Patients with a Missed Opportunity	11%	0%

Not Up To Date / Missing Immunizations List

Not Up To Date / Missing Immunizations Patient Listing Options

Series/Antigens

☒ 4 DTaP

☒ 3 Polio

☒ 1 MMR

☒ UTD Hib

☒ UTD Hep B

☒ 1 VAR

☒ UTD PCV

☒ UTD RV

☒ 1 Flu

☒ 2 Hep A

As Of Date

08/02/2018

Age Range

24 THROUGH 35 MONTHS

Age Range by Date of Birth

08/03/2015 - 08/02/2016

Compliance by Age

24 MONTHS

☐ Include Additional UTD and Not UTD Detail

☐ Include Dose Numbers for Missing Vaccines

Output

☒ PDF

☐ EXCEL

Cancel

Run Report

Not Up To Date / Missing Immunizations Report

Provider: ARKANSAS DEPARTMENT OF HEALTH
Clinic: LHU-ARKANSAS DEPARTMENT OF HEALTH

VFC PIN: 0001



Assessment Date: 08/02/2018

Age Range: Age Range: 24 -35 MONTHS as of 08/02/2018

Series: 4 DTaP, 3 Polio, 1 MMR, UTD Hib, UTD Hep B, 1 VAR, UTD PCV, UTD RV, 1 Flu, 2 Hep A

Summary

Totals

4 DTaP	3
3 Polio	2
1 MMR	2
UTD Hib	2
UTD Hep B	2
1 VAR	2
UTD PCV	2
UTD RV	3
1 Flu	6
2 Hep A	3
Patients	7

Patient Listing

Patient Name	Patient ID	DOB	Missing Vaccine(s)	Missing Reason(s)	Last Imm Date
[REDACTED]	[REDACTED]	08/30/2015	Flu	Missed Opportunity (Flu)	05/12/2017
[REDACTED]	[REDACTED]	08/24/2015	Flu	Missed Opportunity (Flu)	07/20/2017
[REDACTED]	[REDACTED]	09/02/2015	DTaP, Hep A	Missed Opportunity (DTaP), Missed Opportunity (Hep A)	12/15/2017



Single Antigen Assessment

Single Antigen Assessment Options

Series/Antigens

DTaP *

4

MMR *

1

Hep B *

3

PCV *

4

Hep A *

2

Polio *

3

Hib *

4

VAR *

1

RV *

3

As Of Date

08/02/2018



Age Range

24 THROUGH 35 MONTHS

Age Range by Date of Birth

08/03/2015 - 08/02/2016

Compliance by Age

24 MONTHS

Output



PDF



EXCEL

Cancel

Run Report

Single Antigen Assessment

Provider: ARKANSAS DEPARTMENT OF HEALTH
Clinic: LHU-ARKANSAS DEPARTMENT OF HEALTH

VFC PIN: 0001



Assessment Date: 08/02/2018

Age Range: 24-35 MONTHS as of 08/02/2018

Assessment Type: On-Demand Childhood

Birthdate Range: 08/03/2015 - 08/02/2016

Series: DTaP 4, Polio 3, MMR 1, Hib 4, Hep B 3, VAR 1, PCV 4, RV 3, Hep A 2

Childhood	Age Milestone: Months	3		5		7		13		16		19		24	
	Denominator	9		9		9		9		9		9		9	
Vaccine	Dose	# Complete	Complete %	# Complete	Complete %	# Complete	Complete %	# Complete	Complete %	# Complete	Complete %	# Complete	Complete %	# Complete	Complete %
DTaP	1	6	67%	7	78%	8	89%	8	89%	8	89%	8	89%	8	89%
DTaP	2	0	0%	4	44%	6	67%	7	78%	7	78%	7	78%	7	78%
DTaP	3	0	0%	0	0%	4	44%	7	78%	7	78%	7	78%	7	78%
DTaP	4	0	0%	0	0%	0	0%	1	11%	2	22%	4	44%	6	67%
Polio	1	6	67%	7	78%	8	89%	8	89%	8	89%	8	89%	8	89%
Polio	2	0	0%	4	44%	6	67%	7	78%	7	78%	7	78%	7	78%
Polio	3	0	0%	0	0%	4	44%	7	78%	7	78%	7	78%	7	78%
MMR	1	0	0%	0	0%	0	0%	4	44%	6	67%	6	67%	7	78%
Hib	1	6	67%	7	78%	8	89%	8	89%	8	89%	8	89%	8	89%
Hib	2	0	0%	4	44%	6	67%	7	78%	7	78%	7	78%	7	78%
Hib	3	0	0%	0	0%	2	22%	7	78%	7	78%	7	78%	7	78%
Hib	4	0	0%	0	0%	0	0%	2	22%	4	44%	4	44%	4	44%
Hep B	1	7	78%	7	78%	8	89%	8	89%	8	89%	8	89%	8	89%
Hep B	2	6	67%	7	78%	7	78%	8	89%	8	89%	8	89%	8	89%
Hep B	3	0	0%	2	22%	5	56%	6	67%	6	67%	6	67%	7	78%
VAR	1	0	0%	0	0%	0	0%	5	56%	6	67%	6	67%	7	78%
PCV	1	6	67%	7	78%	8	89%	8	89%	8	89%	8	89%	8	89%
PCV	2	0	0%	4	44%	6	67%	7	78%	7	78%	7	78%	7	78%
PCV	3	0	0%	0	0%	4	44%	7	78%	7	78%	7	78%	7	78%
PCV	4	0	0%	0	0%	0	0%	4	44%	6	67%	6	67%	6	67%
RV	1	6	67%	7	78%	7	78%	7	78%	7	78%	7	78%	7	78%
RV	2	0	0%	4	44%	6	67%	6	67%	6	67%	6	67%	6	67%
RV	3	0	0%	0	0%	2	22%	3	33%	3	33%	3	33%	3	33%
Hep A	1	0	0%	0	0%	0	0%	5	56%	6	67%	6	67%	6	67%
Hep A	2	0	0%	0	0%	0	0%	0	0%	0	0%	2	22%	6	67%

Childhood	Age Milestone: Months	19		24	
	Denominator	9		9	
Vaccine	Dose	# Complete	Complete %	# Complete	Complete %
DTaP	1	8	89%	8	89%
DTaP	2	7	78%	7	78%
DTaP	3	7	78%	7	78%
DTaP	4	4	44%	6	67%

Invalid Dose Patient Listing

Invalid Dose Patient Listing Options

Series/Antigens

☒ 4 DTaP

☒ 3 Polio

☒ 1 MMR

☒ UTD Hib

☒ UTD Hep B

☒ 1 VAR

☒ UTD PCV

☒ UTD RV

☒ 1 Flu

☒ 2 Hep A

As Of Date

08/02/2018



Age Range

24 THROUGH 35 MONTHS

Age Range by Date of Birth

08/03/2015 - 08/02/2016

Compliance by Age

24 MONTHS

☐ Only include patients that are NOT UTD

Output

☒ PDF ☐ EXCEL

Cancel

Run Report

Patient Listing

Patient Name	Patient ID	DOB	Vaccine	Series	Date Given	Historical or Administered	Vaccination Clinic	Invalid Reason
[REDACTED]	[REDACTED]	[REDACTED]	Varicella	1 VAR	02/27/2017	H	PATIENT RECORD	Age: Too young, Allowable Vaccine: Invalid administration
[REDACTED]	[REDACTED]	[REDACTED]	Varicella	1 VAR	04/11/2017	H	PATIENT RECORD	Age: Too young, Allowable Vaccine: Invalid administration
[REDACTED]	[REDACTED]	[REDACTED]	Hep A, ped/adol, 2D	2 Hep A	04/11/2017	H	PATIENT RECORD	Age: Too young, Allowable Vaccine: Invalid administration
[REDACTED]	[REDACTED]	[REDACTED]	MMR	1 MMR	01/23/2017	H	PATIENT RECORD	Age: Too young, Allowable Vaccine: Invalid administration



Invalid Reason

Age: Too young, Allowable Vaccine: Invalid administration

Allowable Vaccine: Invalid administration

Preferable Interval: Too short

Patient Roster

Patient Roster Options ✕

Assessment Type: ON-DEMAND CHILDHOOD

As Of Date

08/02/2018



Age Range

24 THROUGH 35 MONTHS

Age Range by Date of Birth

08/03/2015 - 08/02/2016

Compliance by Age

24 MONTHS

Output



PDF



EXCEL

Cancel

Run Report

Patient Roster

Provider: ARKANSAS DEPARTMENT OF HEALTH
Clinic: LHU-ARKANSAS DEPARTMENT OF HEALTH

VFC PIN: 0001



Assessment Type: On-Demand Childhood

Age Range: 24-35 MONTHS as of 08/02/201

Assessment Date: 08/02/2018

Age Range by Date of Birth : 08/03/2015 - 08/02/2016

Compliance by Age: 08/02/2018

Last Name	First Name	Patient ID	DOB	Age	Last Vaccination Date	County	Patient Status	Status Effective Date	Ethnicity
[REDACTED]	[REDACTED]	[REDACTED]	08/02/2015	2Y 10M 13D	04/19/2017		ACTIVE	06/08/2017	Not Hispanic or Latino
[REDACTED]	[REDACTED]	[REDACTED]	08/24/2015	2Y 11M 9D	07/20/2017		ACTIVE	09/28/2017	
[REDACTED]	[REDACTED]	[REDACTED]	08/04/2015	2Y 4M 14D	11/29/2017	FRANKLIN	ACTIVE	11/29/2017	Not Hispanic or Latino
[REDACTED]	[REDACTED]	[REDACTED]	08/06/2015	2Y 11M 3D	05/12/2017	CRAIGHEAD	ACTIVE	05/12/2017	Not Hispanic or Latino
[REDACTED]	[REDACTED]	[REDACTED]	08/24/2015	2Y 4M 12D		PRAIRIE	ACTIVE	05/22/2018	Not Hispanic or Latino
[REDACTED]	[REDACTED]	[REDACTED]	10/10/2015	2Y 9M 20D	04/28/2017	UNION	ACTIVE	06/22/2018	Hispanic or Latino
[REDACTED]	[REDACTED]	[REDACTED]	08/02/2015	2Y 11M 0D	12/07/2016	UNION	ACTIVE	10/06/2017	Not Hispanic or Latino
[REDACTED]	[REDACTED]	[REDACTED]	08/07/2015	2Y 7M 16D	03/09/2016	UNION	ACTIVE	07/01/2016	
[REDACTED]	[REDACTED]	[REDACTED]	10/02/2015	2Y 9M 13D	08/07/2017	MADISON	ACTIVE	11/13/2017	Not Hispanic or Latino

On-Demand Adolescent

NSAS DEPARTMENT OF HEALTH, LHU-ARKANSAS DEPARTMEN... PATIENT SEARCH Support RACHEL

Create Snapshot ⓘ

Cancel Create

Provider/Clinic: ARKANSAS DEPARTMENT OF HEALTH, LHU-ARKANSAS DEPARTMENT OF HEALTH (0001)

Assessment Type *⚠

AFIX CHILDHOOD
AFIX ADOLESCENT
ON-DEMAND CHILDHOOD
ON-DEMAND ADOLESCENT

Assessment Type *⚠

AFIX CHILDHOOD
AFIX ADOLESCENT
ON-DEMAND CHILDHOOD
ON-DEMAND ADOLESCENT

Create Snapshot

Cancel

Create

Provider/Clinic: ARKANSAS DEPARTMENT OF HEALTH, LHU-ARKANSAS DEPARTMENT OF HEALTH (0001)

Assessment Type *

ON-DEMAND ADOLESCEN ▼

Series/Antigens

- UTD Hep B
- 2 MMR
- 2 VAR
- 1 Tdap
- UTD MCV
- UTD HPV
- 1 HPV
- 1 Flu
- 2 Hep A
- UTD Polio

As of Date

CURRENT DATE ▼

08/02/2018



Feedback Date (AFIX Visit Date)

MM/DD/YYYY



Age Range

13-17 YEARS

Age Range by Date of Birth

08/03/2000 - 08/02/2005

Compliance by Date

08/02/2018



Series/Antigens

- UTD Hep B
- 2 MMR
- 2 VAR
- 1 Tdap
- UTD MCV
- UTD HPV
- 1 HPV
- 1 Flu
- 2 Hep A
- UTD Polio

Age Range

13-17 YEARS

Compliance by Date

08/02/2018

AFIX PDF Options



Assessment Type: On-Demand Adolescent

- | | |
|---|---|
| <input checked="" type="checkbox"/> UTD Hep B | <input checked="" type="checkbox"/> 2 MMR |
| <input checked="" type="checkbox"/> 2 VAR | <input checked="" type="checkbox"/> 1 Tdap |
| <input checked="" type="checkbox"/> UTD MCV | <input checked="" type="checkbox"/> UTD HPV |
| <input checked="" type="checkbox"/> 1 HPV | <input checked="" type="checkbox"/> 1 Flu |
| <input checked="" type="checkbox"/> 2 Hep A | <input checked="" type="checkbox"/> UTD Polio |

If a checkbox is unselected, the vaccine will not appear on the PDF output within the graph.

Milestones

- ☒ Healthy People 2020 Targets
- ☒ Jurisdiction Average
- ☒ County Average

Cancel

Run Report

Adolescent Immunization Summary

Provider: ARKANSAS DEPARTMENT OF HEALTH
Clinic: LHU-ARKANSAS DEPARTMENT OF HEALTH

VFC PIN: 0001



As Of Date: 08/02/2018

Assessment Date: 08/02/2018

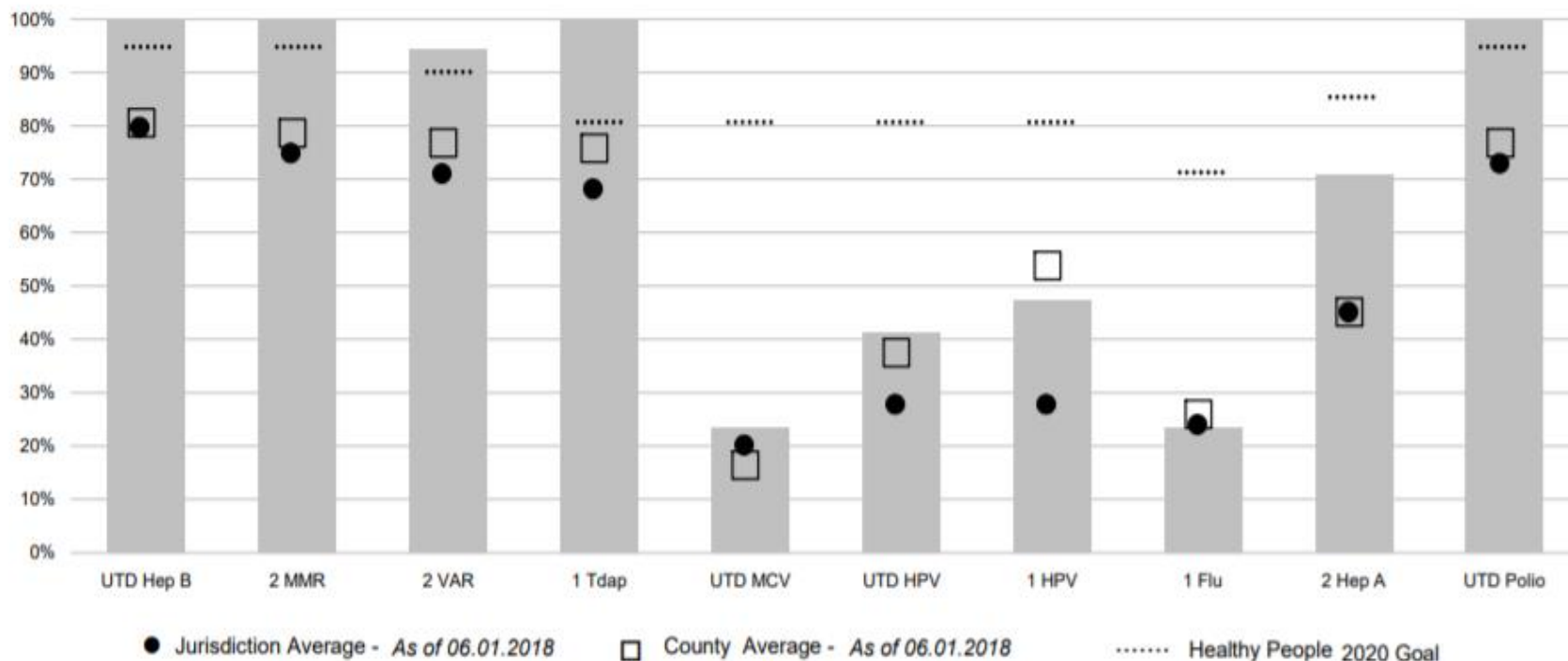
Feedback Date:

Ages Assessed: 13-17 YEARS

Birthdate Range: 08/03/2000 - 08/02/2005

Compliance by Date: 08/02/2018

Assessment of Immunization Rates | 17 Patient Records Assessed



Patient Reminder/Recall Report

Patient Management

- Birth Vaccinations
- Inactivate Patients
- Patient Detail with Services
- Patient List By Insurance Source
- Patient List/Counts By Clinic Report
- Patient Reminder/Recall**
- Patient Roster
- Patient VFC Eligibility History
- Patients By Birth Facility Type
- Patients First Seen
- Patients with Active Exemptions
- Patients with Adverse Reactions
- Patients with Notes
- Patients with Vaccine Refusals
- Vaccine Recall
- Patients with Precautions / Contraindications

Patient Reminder/Recall

Add Reminder/Recall Run

Patient Reminder/Recall

Choose filters for existing Reminder/Recall Runs. Click "View" to see the details of the Reminder/Recall run or select a specific Reminder/Recall Run and click the applicable button to view extracts, reports, etc.

Add Reminder/Recall Run



View

Provider/Clinic : LHU-SW-HEMPSTEAD CO-HOPE, LHU-SW-HEMPSTEAD CO-HOPE

SELECT A CLINIC BY TYPING PROVIDER, CLINIC, VFC PIN, OR CLINIC CODE



Cancel

Provider	Clinic	Run Name	Run Schedule Date	Run Completed Date	Reminder/Recall From Date	Reminder/Recall Through Date	# of Patients in Run	# of Patients Assessed		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>			<input type="button" value="Clear Filters"/>	
<input checked="" type="radio"/> LHU-SW-HEMPSTEAD CO-HOPE	LHU-SW-HEMPSTEAD CO-HOPE	13YEARS JULY	07/17/2018	07/17/2018	06/01/2018	07/01/2018	301	576		<input type="button" value="Reprocess"/> <input type="button" value="View"/>
<input type="radio"/> LHU-SW-HEMPSTEAD CO-HOPE	LHU-SW-HEMPSTEAD CO-HOPE	17 YEAR OLD	06/13/2018	06/13/2018	05/01/2018	06/13/2018	0	59		<input type="button" value="Reprocess"/> <input type="button" value="View"/>

Patient Reminder/Recall

Click "Create"/"Update" to save the record or "Cancel" to return to the previous page.



Add

Create

Cancel

Run Name

Provider/Clinic : LHU-SW-HEMPSTEAD CO-HOPE , LHU-SW-HEMPSTEAD CO-HOPE

SELECT A CLINIC BY TYPING PROVIDER, CLINIC, VFC PIN, OR CLINIC CODE



Run Schedule Date * Run Completed Date

MM/DD/YYYY



MM/DD/YYYY



Reminder/Recall Date Range *

From: MM/DD/YYYY



Through: MM/DD/YYYY



Age Range *

From:

Through:

UOM:

MONTHS



Options To Target Patients Included For Reminder/Recall

Patient Eligibility



Occupation



County



City



Zip Code

99999-9999

Gender



☐ Ignore Calling For "Do Not Include Patient in Reminder/Recall"

- ☐ Ignore Setting For "Do Not Include Patient in Reminder/Recall"?
☐ Only Include Patients With Address (i.e., Street Address, City, State, Zip)?
☐ Increment Patient Reminders/Recall Count?
 Exclude Patients After Number of Reminders/Recalls Without Subsequent Vaccination
☐ Generate Reminder/Recall Event?
☐ Include Patients Due For Vaccinations (Reminders)?
☐ Include Patients Overdue For Vaccinations (Recalls)?
 Minimum Number Of Days Past Due To Include Maximum Number Of Days Past Due To Include
☒ Exclude Patients with Less than 2 non- Influenza/H1N1-09 Vaccinations?
☐ Exclude patients with one or more vaccine refusals?

Vaccine Series and Optional Dose (Note: Leave Dose blank to include all doses in series)

<input type="checkbox"/>	Vaccine Series	Dose Number
<input checked="" type="checkbox"/>	DTaP / TD / Tdap	<input type="text"/>
<input checked="" type="checkbox"/>	H1N1-09	<input type="text"/>
<input checked="" type="checkbox"/>	Hep A	<input type="text"/>
<input checked="" type="checkbox"/>	Hep B	<input type="text"/>
<input checked="" type="checkbox"/>	Hib	<input type="text"/>
<input checked="" type="checkbox"/>	HPV	<input type="text"/>
<input checked="" type="checkbox"/>	Influenza	<input type="text"/>
<input checked="" type="checkbox"/>	Meningococcal	<input type="text"/>
<input checked="" type="checkbox"/>	MMR	<input type="text"/>
<input checked="" type="checkbox"/>	Pneumococcal	<input type="text"/>
<input checked="" type="checkbox"/>	Polio	<input type="text"/>
<input checked="" type="checkbox"/>	Rotavirus	<input type="text"/>
<input checked="" type="checkbox"/>	Varicella (CPOX)	<input type="text"/>
<input checked="" type="checkbox"/>	Zoster	<input type="text"/>

Create

Cancel

<input type="radio"/>	LHU-SW-HEMPSTEAD CO-HOPE	LHU-SW-HEMPSTEAD CO-HOPE	JULY 2013	07/01/2013	07/01/2013	07/01/2013	07/01/2013	199	449		Reprocess	View
<input type="radio"/>	LHU-SW-HEMPSTEAD CO-HOPE	LHU-SW-HEMPSTEAD CO-HOPE	JUNE WITHOUT HEP A	06/10/2013	06/11/2013	06/03/2013	06/03/2013	110	455		Reprocess	View
<input type="radio"/>	LHU-SW-HEMPSTEAD CO-HOPE	LHU-SW-HEMPSTEAD CO-HOPE	JUNE 2013	06/03/2013	06/04/2013	06/03/2013	06/03/2013	209	444		Reprocess	View

Unvaccinated Report	Report	
Dymo Labels	Avery Labels	Postcard
Full Extract	Auto-Dialer Email Extract	Auto-Dialer Phone Number Extract



Unvaccinated Report



Arkansas WebIZ Unvaccinated Report

August 02, 2018

Reminder Criteria

Reminder Run Name: 13YEARS JULY

Run Schedule Date: 07/17/2018

Run Completed Date: 07/17/2018

Reminder Date From: 06/01/2018

Reminder Date Through: 07/01/2018

of Patients in Run: 301

of Patients Assessed: 576

Vaccine Series: DTaP / TD / Tdap - 1, Meningococcal - 1, HPV - 1

Other Criteria: Generate Reminder/Recall Event? Y
Include Patients Due For Vaccinations (Reminders)? Y
Include Patients Overdue For Vaccinations (Recalls)? Y
Exclude Patients with Less than 2 non-Influenza/H1N1 Vaccinations? Y

Provider: [REDACTED]

Clinic: [REDACTED]

Age Range From (years): 12

Age Range Through (years): 13

School Dist: ALL SCHOOL DISTRICTS

School: ALL SCHOOLS

VFC Eligibility:

Gender: Both

City:

County:

Zip:

- DOB: [REDACTED]

Home Phone: [REDACTED]

HPV9 (1), MCV4 (MENACTRA) (1)

Work Phone:

Cell Phone:

County: [REDACTED]

Email:

Primary Contact:

Relationship:

Gender: Female

Reminder Date: 12/24/2016

Age At Date: [REDACTED]

Most Recent Refusal:

VFC Eligibility:

Primary Insurance:

Default Clinic: [REDACTED]

Most Recent Immunization Date: 10/10/2014

Most Recent Immunization Clinic: [REDACTED]

Immunization History: DTaP / TD / TDAP(02/24/2006 05/09/2006 04/04/2007 10/26/2009) POLIO(02/24/2006 05/09/2006 04/04/2007) HIB(02/24/2006 05/09/2006 04/04/2007 10/26/2009) PNEUMOCOCCAL(02/24/2006 05/09/2006 04/04/2007) HEP A(04/04/2007 10/26/2009) HEP B(02/24/2006 05/09/2006 04/04/2007) MMR(04/04/2007) VARICELLA (CPOX)(04/04/2007) INFLUENZA(11/07/2008 10/28/2011 11/20/2012 11/15/2013 10/10/2014)



Missing Vaccines

[REDACTED] - DOB: [REDACTED] Home Phone: [REDACTED] HPV9 (1), MCV4 (MENACTRA) (1)
[REDACTED] Work Phone: [REDACTED]
County: [REDACTED] Cell Phone: [REDACTED]
Email: [REDACTED]
Gender: Female Primary Contact: [REDACTED] Relationship: [REDACTED]
Reminder Date: 12/24/2016 Age At Date: [REDACTED] Most Recent Refusal: [REDACTED]
VFC Eligibility: [REDACTED] Primary Insurance: [REDACTED]
Default Clinic: [REDACTED]
Most Recent Immunization Date: 10/10/2014 Most Recent Immunization Clinic: [REDACTED]
Immunization History: DTAP / TD / TDAP(02/24/2006 05/09/2006 04/04/2007 10/26/2009) POLIO(02/24/2006 05/09/2006 04/04/2007) HIB(02/24/2006 05/09/2006 04/04/2007 10/26/2009) PNEUMOCOCCAL(02/24/2006 05/09/2006 04/04/2007) HEP A(04/04/2007 10/26/2009) HEP B(02/24/2006 05/09/2006 04/04/2007) MMR(04/04/2007) VARICELLA (CPOX)(04/04/2007) INFLUENZA(11/07/2008 10/28/2011 11/20/2012 11/15/2013 10/10/2014)

Vaccine History

Contact Information

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