

Mass Vaccination

Purpose of this document

Background: The mass vaccination (MV) feature of the Wisconsin Immunization Registry (WIR) allows authorized users to add certain immunizations for a new client or an existing client. This feature will be available during months when clients are receiving immunizations designated by the state of Wisconsin as mass vaccinations and may not be available at other times.

Definition: A mass vaccination is a vaccination that many clients receive during a specific time, such as the seasonal influenza immunization dispensed during the flu season.

Access: The following user roles have access to Mass Vaccination functions:

- IR Administrator
- IR Inventory Control
- IR Mass Vaccination
- IR Typical User

Topics Covered:

- Finding Clients Using Mass Vaccination
- Entering Client Information Using Mass Vaccination
- Entering Immunization Information Using Mass Vaccination

After reviewing this document, you should be able to:

- Find clients (MV).
- Enter new clients (MV).
- Add mass vaccinations.
- Use 2D barcode scanners during mass vaccination exercises.



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Finding clients using mass vaccination

1) Important: Always search for an existing client record before adding a new client in WIR. Select Add Mass Vaccination under the Mass Vaccination section of the menu panel.



 Enter search criteria in the Client Search Criteria screen. You have several fields to search for your client. It is best to first look up the client by the first four characters of their last name and first three characters of their first name.

Client Search Criter	ia		
Last Name / Barcode		Gender O M O F O N/A	Find
First Name		SSN	
Middle Name		Phone	
Mother's Maiden Last		Chart #	
Mother's First Name			
Birth Date			



Search tips

- Last Name/Barcode: We recommend that you supply four characters of the last name only.
- First Name: We recommend that you supply three characters of the first name only.
- If multiple matches are found and you are unable to determine which client record is the correct match, you can add more criteria to the client search to narrow down the results, such as:
 - **DOB** can be used to narrow down common last name and first name combinations.
 - SSN will produce a single name match. SSN must have been entered in WIR previously. Many providers do not enter the SSN in WIR for security reasons.
 - **Phone** is not recommended due to potential changes over time or incomplete entries.
 - **Chart #** will produce a single name match but must have been entered previously in WIR. Chart numbers are organization-dependent, meaning you can only search for your organization's chart number.

3) Select the Find button.

Client Search Criteria					
Last Name / Barcode	CLIE	Gender O M O F O N/A	Find		
First Name	IMA	SSN			
Middle Name		Phone]		
Mother's Maiden Last		Chart #			
Mother's First Name					
Birth Date					

- 4) After you select **Find**, there are 3 possible outcomes:
 - i) Multiple Matches Found: The matches will be displayed in a table under the Client Search Criteria box. Select the correct client's last name based on correct Birth Date or Middle Name, which will be underlined and in blue. Selecting the client's last name will take you to the Enter Mass Vaccination screen.

	Last Na	ime	First Name	Middle Name	Birth Date	Chart #	Mother's Maiden First	Mother's Maiden Last	Gender	Telephone
Г	<u>CLIENT</u>		IMA	BONNIE	02/02/1974		DOE	JANE	F	
	CLIENT		IMA	Q	10/13/1980		MARIE	SMITH	F	555-4444

ii) **One Match Found:** The **Enter Mass Vaccination** screen for that individual will be displayed automatically.

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iii) **No Match Found:** The **Enter New Client** screen will display. This screen will auto populate with the client information you entered.

Personal Information	Save			
No clients were found	for the requested search criter	ria.		
Please complete the fi	elds to add it as a new client i	n WIR.		Cancel
Last Name	CLIENT	SSN		
First Name	IMA	Gender	🔘 M 🔘 F 💿 Unknown	
Middle Name	С	Birth Date		
Suffix	~	County	~	
Mother's Maiden Last		Country of Birth	UNITED STATES V	
Mother's First Name				

Entering client information using mass vaccination

- When entering client information for mass vaccination, you have two options:
 - i) The **Enter New Client** screen will display when no clients match your search.
 - ii) You can also access the Enter New Client (MV) option from the menu panel.



• The **Enter New Client (MV)** screen is divided into two parts: *Personal Information* and *Responsible Person Information*.

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Personal Information

- Enter required information (fields with blue labels).
- Optional fields can be filled out as desired. DHS strongly recommends including Mother's Maiden Last Name and Mother's First Name.

Personal Information	Save			
No clients were found	for the requested search crite	ria.		
Please complete the fi	elds to add it as a new client i	n WIR.		Cancel
Last Name	CLIENT	SSN		
First Name	IMA	Gender	🔘 M 💿 F 🔵 Unknown	
Middle Name	R	Birth Date	10/01/1980	
Suffix	~	County	~	
Mother's Maiden Last	Johnson	Country of Birth	UNITED STATES V	
Mother's First Name	Anne			

- To cancel entry of the new client record prior to saving, select the **Cancel** button.
- To save the client information with no responsible person information and move on to the **Enter New Mass Vaccination** screen, select the **Save** button.
- If additional contact information is desired, complete the **Responsible Person Information** section, then select the **Save** button.

Responsible Person Information

The Enter New Client screen in the Mass Vaccination module is different in that users are *not required to enter any* **Responsible Person Information** on the **Enter New Client (MV)** screen.

When filling out the Responsible Person Information section:

- Enter the required "Relation" information (defaults to "Self" if left blank)
 - "Relation" is required because WIR assumes there is at least one responsible person for each client. For most adults the responsible person is the client themselves.
- Fill out other fields as desired:
 - Notices?: Check this box if the client chooses to receive reminder/recall notices.
 - Primary?: Check this box if the responsible person's address should appear on client reports and screen readers within WIR.
- Completed client information will be saved upon selecting the Save button.
- To cancel the client information prior to saving, select the **Cancel** button.
- For more details about the "Notices?" and "Primary?" checkboxes, refer to the Manage Clients job guide.



Personal Inform	Save				
No clients were fou					
Please complete th	Cancel				
Last Nai]	SSN		
First Na	me IMA		Gender		
T li St Mai			Ochider		
Middle Na	me C		Birth Date	10/01/1980	
Su	ffix	~	County	DANE 🗸	
Mother's Maiden La	ast Johnson		Country of Birth	UNITED STATES V	
Mother's First Na	me Anne				
Responsible Per	rson Information				
Last Name	Client		Street Address	123 Main St	
First Name	ma		Other Address		
Middle Name	C		P.O. Box		
Relation	Self	~	City	Madison	
Phone (prim)		7	State	WI 🗸 Zip 53711	+4
Extension	Туре	~	E-Mail		
Phone (sec)			Language	ENGLISH	~
Extension	Туре	~	Notices?	Primary? V	



If the Responsible Person Information section is not filled out:

If no Responsible Person information is added, WIR will still automatically add the client's name, the "Self" Relation, and will check the "Notices?" checkbox as shown below. No contact information will be added.

Client Info	ormation	Respons	ible Pe	rson(s)	Client C	omment	(s)		
<u>Responsible</u>	Person Lis	ting							
Select Las	t Name	First Name	e Rela	tionship	City	Notices	Primary	Address Validation	New
TES	TCLIENT	KATELYN	Self			Yes		Not Validated	Сору
									Delete
<u>Details for R</u> Last Update	<u>Responsible</u> d:	Person: KA	ATELYN	TESTCLI	<u>ENT</u> not vet va	lidated			
	<u></u>			Stroot					
Last Name	TESTCLIEN	T		Address	5				Next
First Name	KATELYN			Other Address	r				Cancel
Middle Name				P.O. Box	(
Relation	Self		~	City	(
Phone (prim)	<u> </u>	-		State	• •	Zip	+4	4	
Extension	Т	уре	~	E-Mai	I				
Phone (sec)	<u> </u>			Language	ENGLISH	ł		~	
Extension	Т	ype	~	Notices?	· 🔽	Prima	ry? 🗌		



Entering immunization information using mass vaccination

After you have found an existing client or added a new client, the Enter Mass Vaccination screen displays. There are 4 sections:

- Client Information
- History
- New Immunizations
- Historical Immunizations

Client Infor	mation								
Client Name (F	First - MI -	Last)		DOB	Gender	Mother's Maiden	Tracki	ng Schedule	Chart #
IMA C. CLIEN	IT			10/01/1980	F	JOHNSON		ACIP	
Address				123	Main St, MAI	DISON, WI 53711			
Comments									*
E	Ethnicity			~		Race		~	
History									
	Vaccine	Group			Date Admini	stered		Trade Nam	e
	Influe	nza			11/15/20	21		FluMist	
Site	Test	Site - Katelyn		~					
New Immur	nizations	(2)							
Date Provided	d [04/	28/2022		Ordering Aut	hority Unkn	own	~		
Date Provideo Remove Imm	d (þ4/ nunization	28/2022	Frade Name-L djuvant(optio	Ordering Auti _ot nal)	hority Unkn Dose	own Administered f Dose Eligibilit	✓ ³ y y	Body Sit Immunization	te Route
Date Provideo Remove Imm	d (<u>þ4/</u> nunization OVID-19	28/2022	Frade Name-L djuvant(optio	Ordering Auti ot nal)	hority Unkn Dose Full 🗸	own Administered E Dose Eligibilit Unknown	Sy y y	Body Sit Immunization	te Route
Date Provideo Remove Imm	d (<u>þ4/</u> nunization OVID-19	28/2022 A	Frade Name-L djuvant(optio	Ordering Auti Lot Inal)	hority Unkn Dose Full V	own Administered I Dose Eligibilit Unknown	> By y > > >	Body Sit Immunization intramuscular	te Route V
Date Provideo Remove Imm	d [<u>p4/</u> nunization OVID-19 nfluenza	28/2022	frade Name-L djuvant(optio	Ordering Autinal)	hority Unkn Dose	own Administered f Dose Eligibilit Unknown Unknown	> 3y y >	Body Sin Immunization intramuscular	te Route V
Date Provideo Remove Imm	d [<u>p4/</u> nunization OVID-19 nfluenza	28/2022	Frade Name-L djuvant(optio	Ordering Auti nal)	hority Unkn	own Administered I Dose Eligibilit Unknown Unknown	× 3y y v v	Body Sit Immunization intramuscular intramuscular	te Route V
Date Provideo Remove Imm CCC	d [<u>p4/</u> nunization OVID-19 Influenza	28/2022	Trade Name-L djuvant(optio	Ordering Autinal)	hority Unkn	own Administered f Dose Eligibilit Unknown Unknown	▼ 3y y ▼ (▼) (▼)	Body Sit	te Route
Date Provideo Remove Imm CCC V Int Historical In Remove Immu	d [p4/ nunization OVID-19 nfluenza mmuniza unization	28/2022	rrade Name-L djuvant(optio	Ordering Auti nal)	hority Unkn	own Administered E Dose Eligibilit Unknown Unknown Lot Number	v 3y v v v v	Body Sin Immunization intramuscular intramuscular Provider Org	te Route V
Date Provideo Remove Imm CCC Int Historical In Remove Immu CCC	d [<u>p4/</u> nunization OVID-19 nfluenza Immuniza unization	28/2022	rade Name-L djuvant(optio	Ordering Autinal)	hority Unkn	own Administered E Dose Eligibilit Unknown Unknown Lot Number	▼ 3y y ▼ (▼) (▼) (Body Sit Immunization intramuscular intramuscular Provider Org	te Route V
Date Provided Remove Imm CCC VIIII Historical In Remove Immu VIIII	d [<u>p4/</u> nunization DVID-19 Influenza unization DVID-19 [fluenza [28/2022 A A D tions (2) Date Prov 04/28/2022 04/28/2022	vided	Ordering Auti nal)	hority Unkn	own Administered E Dose Eligibilit Unknown Unknown Unknown	× 3y y v (v) (v) (v) (v) (v) (v) (v)	Body Sit Immunization intramuscular intramuscular Provider Org	te Route V V

- 1) Client Information
 - a) Review this information to verify the correct client is indicated.
 - b) Ethnicity and Race: It is important to collect and document both race and ethnicity whenever these fields are blank.

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- 2) History
 - a) No action is required in the History section. It should be used for client assessment purposes only. This section displays any vaccinations administered in the past 28 days to assess if a live vaccine was administered within that time period, and also to check if any mass vaccination doses were ever administered.
- 3) New Immunizations (vaccines administered from WIR Inventory)

	Site C	te Central City Hospital								
New In	nmunizatio	ons (2)								
Date Pro	vided	09/27/2022	Ord	ering Auth	nority	Unkr	nown	~		
Remove	Immunizati	ion A	Trade Name-Lot djuvant(optional)		Dos	e	Administered By Dose Eligibility		Body Site Immunization R	oute
	COVID-19	9		~	Full	~	Unknown	~		~
								~	intramuscular	~
	Influenza	Fluzone\123	4567\public	~	Full	~	Unknown	~	left arm	~
				~			No Insurance	~	intramuscular	~

Historical Immunizations (2)

a) Use the Site drop-down list to select the site where the vaccination(s) are being administered.

Note: Immunization choices are limited to those vaccinations identified as mass vaccinations by the state of Wisconsin, and those vaccinations for which the selected site has inventory in WIR.

- b) Fill out the required fields: Date Provided, "Remove" checkbox*, Immunization, Trade Name-Lot, Dose, and Immunization Route.
- c) Complete as many of the other fields as able:: Ordering Authority, Administered By, Body Site, and Dose Eligibility.
- 4) Historical Immunizations (vaccines administered previously, usually by another provider)

Histori	cal Immuniza	ations (2)			
Remove	Immunization	Date Provided	Trade Name	Lot Number	Provider Org
	COVID-19	08/05/2022	Moderna6-11Y/ 18+BOOSTI V	3333	WIR Physicians
	Influenza	09/27/2022	~		

Note: Choices are limited to those vaccinations identified as mass vaccinations by the state of Wisconsin.

- a) Fill out the required fields: "Remove" checkbox*, Immunization, Date Provided, and Trade Name.
- b) Fill out optional fields as able: Lot Number and Provider Org.
- c) Best practice is to fill out as much information as possible so the client can have the most complete record in WIR.

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***Important:** Use the "Remove" checkbox correctly! Checking "Remove" means you **do not** want to add an entry for that vaccination to the client's immunization history.

- a) If the **Remove checkbox is selected:** You are **not** adding this vaccination to the client record.
- b) If the **Remove checkbox is NOT selected:** You **are** adding this vaccination to the client's immunization history.
- 5) To save the New and/or Historical Immunization(s) to the client's immunization history, select the **OK** button at the bottom of the screen.
 - a) WIR will return to the **Client Search Criteria** screen with a confirmation message displayed at the top right of the screen in blue. At this point the user is back on the client search screen and can immediately enter another mass vaccination.

Client Search Criter	ia	Immunization(s) added.
Last Name / Barcode	[Gender $\bigcirc_{M} \bigcirc_{F} \bigcirc_{N/A}$ Find
First Name		SSN
Middle Name		Phone
Mother's Maiden Last		Chart #
Mother's First Name]
Birth Date		

Using 2D barcode scanners during mass vaccination exercises

Find clients by scanning ID

- 1) Ensure the Client Search Criteria screen is the active window.
- 2) Place the cursor in Last Name/Barcode field.
- 3) Scan the 2D barcode on driver's license or ID.

Create clients by scanning ID

- 1) Ensure the Enter New Client (MV) screen is the active window.
- 2) Place the cursor in Last Name field.
- 3) Scan the 2D barcode on the client's driver's license or ID.

Set up scanners and prepare for mass vaccination event

For detailed instructions on setting up scanners and preparing for a mass vaccination event, please refer to <u>DHS publication P-02867</u> located in the DHS Publication Library.

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- 1) Prior to the event, **acquire barcode scanners** capable of reading the small 2D barcodes located on most vaccine vials/syringes.
- Before the event, ensure inventory is up to date. This can be done through accepting inbound transfers, manual entry or by scanning the 2D barcode located on most vaccine cartons.
 - a. In the **Add Vaccine Inventory Information** screen, verify that the site in the upper left is correct, then scan the 2D barcode.

Add Vaccine Inventory Information						
Site:	Pediatrics - 2nd Floor		Also display inactive Trade Name	es	Save	
Trade Name:	ACAM2000		```		Cancel	
Manufacturer:			<u> </u>	•0		
NDC:			· · · · · · · · · · · · · · · · · · ·	-		
Lot Number:]		
Dose:		\checkmark				
Expiration Date:						
Funding Program:	Private	~				
Lot Active:	Yes	~				
Quantity on Hand:						
Cost Per Dose (\$):						
Input Source:						
Update Source:						

b. Confirm the information on the **Barcode Scan Inventory** screen is correct, then select **Save** to add the vaccine to inventory.

	Barcode Scan Inventory											
					Sit	e: Peo	liatrics -	2nd Flo	юг	\sim		
Funding Program: Private Public												
	Save Cancel											
	NDC	Manufacturer	Trade Name	Lot Number	Expiration Date	Dose Size	Public	Inv On Hand	Amount	Action	Reason	Remove Line
	70461-0120-03	Seqirus	FLUAD Quadrivalent	FLUADQUAD	01/01/2024	0.5	Ν	0	10	Add 🗸	Receipt of Inventory V	



3) Create a Barcode Report: Select Barcode Reports under the Inventory section of the menu panel. The barcode report can be used when entering immunizations. A different barcode is created for each body site, administering clinician, dose eligibility, etc. Using this report can increase the speed of data entry.



Select the correct site from the dropdown at the top of the page.

- a. Add items within each category to the barcode report by selecting the item and selecting the **Add Item** button.
- b. Once all necessary items have been selected, select the **Generate** button at the top of the screen.

Site: Ped	liatrics - 2nd Floor	
No report was found Generate		
Administrating Clinicians		1 selected item
Ordering Authorities		1 selected item
Body Sites		2 selected items
Administration Routes		1 selected item
Dose Level Eligibilities		2 selected items
Vaccine Lots		2 selected items
BioThrax, ATF12345, PRIVATE	a Add Item	FluLaval Quadrivalent, 456456456, PRI
Boostrix, 234567, PRIVATE	Add All	
Flucelvax Quadrivalent, 22212, PUE	Remove Item	
Gardasil 9, R017134, PUBLIC Heplisav-B, 12345NC, PRIVATE	Remove All	
Pediarix, GSKFlulaval, PUBLIC	Print on separate page	
RabAvert, D7652224F, PRIVATE	Sort: TN, Funding Funding, TN	

c. Locate the report link at the top of the screen above the **Generate** button.



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d. Be sure to test the barcode report and scanners prior to the mass vaccination event. Note: To protect the report, it is best practice to laminate it or place it in a clear plastic sleeve.

Example of barcode report:



LEFT DELTOID Body Site



INTRAMUSCULAR Administration Route



Medical Assistance Dose Eligibility



FluLaval 12345L 01/28/2026 PRIVATE



No Insurance Dose Eligibility

RIGHT DELTOID

Body Site



FluLaval Quadrivalent 456456456 12/21/2022 PRIVATE

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