

# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### Description of this guide:

This guide describes basic TennIIS functionality for **MEDICAL OFFICE USERS**. This guide does *not* include health department, pharmacy, or school/childcare facility users (see separate quick reference guides for alternate user types).

### Included in this guide:

- [Searching for a Patient](#)
- [Adding a Patient](#)
- [Editing Demographic Information](#)
- [Viewing a Patient's Vaccinations](#)
- [Adding Administered Vaccinations](#)
- [Adding Historical Vaccinations](#)
- [Editing Vaccination Information](#)
- [Deleting Vaccinations](#)
- [Generating the official TN Certificate of Immunization](#)
- [Changing Patient Status Between Active/Inactive](#)
- [Adding Vaccinator Name as Default](#)
- [Adding Route and Site as Default](#)
- [Adding Vaccination Volume as Default](#)

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# Tennessee Immunization Information System (TennIIS)

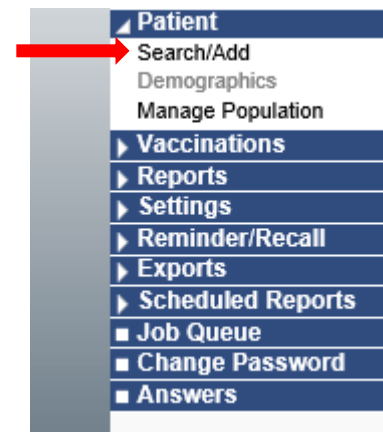
## Medical Office User Quick Reference Guide

### Searching for a Patient

- 1) Using the Navigation Menu, click on the "Patient" menu heading.



- 2) Click "Search/Add".



- 3) Enter search criteria using these three search tips:

- Enter patient's first name and last name
- OR
- Enter patient's first name or last name and birth date
- OR
- Enter "%" (wildcard) in the first and last name fields to replace multiple characters

**Patient Search** Click here to use the "advanced" search

|                        |            |                              |  |
|------------------------|------------|------------------------------|--|
| First Name or Initial: |            | ID:                          |  |
| Last Name or Initial:  |            | SIIIS Patient ID / Bar Code: |  |
| Birth Date:            | mm/dd/yyyy | Chart Number:                |  |
|                        |            | Organization Medical ID:     |  |
|                        |            | SSN:                         |  |
|                        |            | Passport #:                  |  |
|                        |            | Visa #:                      |  |

**Family and Address Information:**

|                      |               |                       |        |
|----------------------|---------------|-----------------------|--------|
| Guardian First Name: |               | Mother's Maiden Name: |        |
| Street:              |               |                       |        |
| City:                |               | State:                | Select |
| Zip Code:            |               | Phone Number:         |        |
| Country:             | United States |                       | X      |

Note: When searching by First and Last Name, you may use the wildcard character % to replace multiple characters and \_ to replace a single character.  
☐ Check here if adding a new patient.

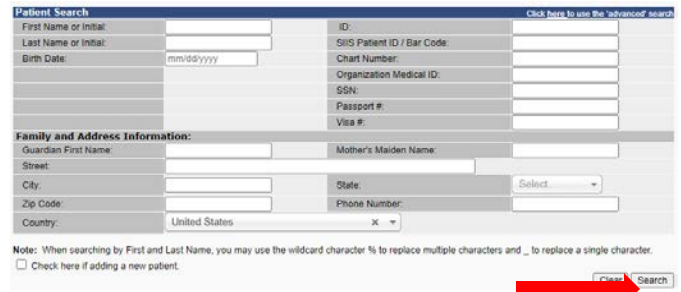
Clear Search

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# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

4) Click "Search".



**Patient Search** [Click here to use the 'advanced' search](#)

First Name or Initial:  ID:   
 Last Name or Initial:  SIIS Patient ID / Bar Code:   
 Birth Date:  Chart Number:   
 Organization Medical ID:   
 SSN:   
 Passport #:   
 Visa #:

**Family and Address Information:**

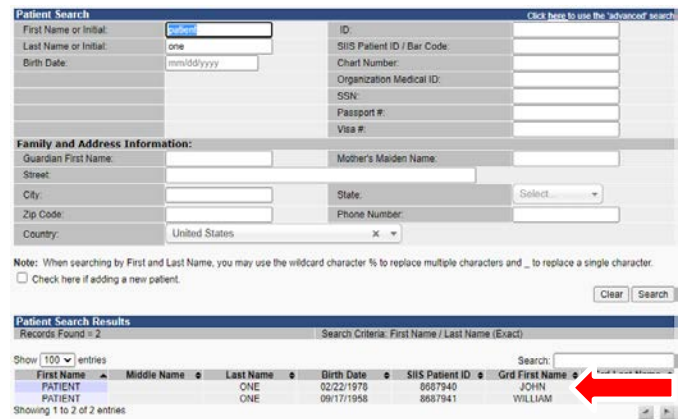
Guardian First Name:  Mother's Maiden Name:   
 Street:   
 City:  State:    
 Zip Code:  Phone Number:   
 Country:  United States

Note: When searching by First and Last Name, you may use the wildcard character % to replace multiple characters and \_ to replace a single character.  
☐ Check here if adding a new patient.

5) TennIIS will take you directly to the Patient Demographic Master View if an exact match is found.

If multiple patient search results display below, select the correct patient to view the Patient Demographic Master View.

Sort Patient Search Results by clicking on the black arrow located at the top of each column.



**Patient Search** [Click here to use the 'advanced' search](#)

First Name or Initial:  ID:   
 Last Name or Initial:  SIIS Patient ID / Bar Code:   
 Birth Date:  Chart Number:   
 Organization Medical ID:   
 SSN:   
 Passport #:   
 Visa #:

**Family and Address Information:**

Guardian First Name:  Mother's Maiden Name:   
 Street:   
 City:  State:    
 Zip Code:  Phone Number:   
 Country:  United States

Note: When searching by First and Last Name, you may use the wildcard character % to replace multiple characters and \_ to replace a single character.  
☐ Check here if adding a new patient.

**Patient Search Results**

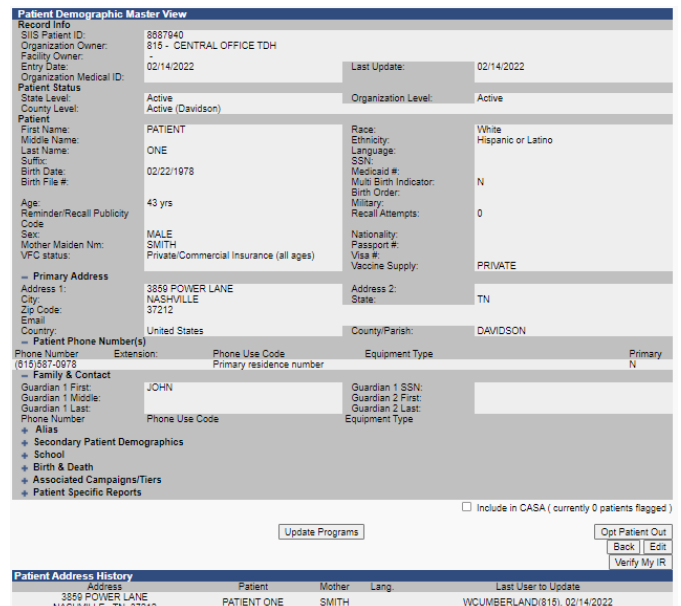
Records Found: 2 Search Criteria: First Name / Last Name (Exact)

Show 100 entries

|         | First Name | Middle Name | Last Name | Birth Date | SIIS Patient ID | Grd First Name |
|---------|------------|-------------|-----------|------------|-----------------|----------------|
| PATIENT | ONE        |             | ONE       | 02/22/1978 | 8687940         | JOHN           |
| PATIENT | ONE        |             | ONE       | 09/17/1958 | 8687941         | WILLIAM        |

Showing 1 to 2 of 2 entries

6) Patient Demographic Master View will display.



**Patient Demographic Master View**

**Record Info**

SIIS Patient ID: 8687940  
 Organization Owner: 815 - CENTRAL OFFICE TDH  
 Facility Owner:   
 Entry Date: 02/14/2022 Last Update: 02/14/2022  
 Organization Medical ID:

**Patient Status**

State Level: Active  
 County Level: Active (Davidson)  
 Organization Level: Active

**Patient**

First Name: PATIENT  
 Middle Name: ONE  
 Last Name: ONE  
 Suffix:   
 Birth Date: 02/22/1978  
 Birth File #:

Age: 43 yrs  
 Reminder/Recall Publicity Code:   
 Sex: MALE  
 Mother Maiden Nm: SMITH  
 VFC status: Private/Commercial Insurance (all ages)

**Primary Address**

Address 1: 3859 POWER LANE  
 City: NASHVILLE  
 Zip Code: 37212  
 Email:   
 Country: United States  
 Address 2:   
 State: TN  
 County/Parish: DAVIDSON

**Patient Phone Number(s)**

Phone Number: (615) 587-0073  
 Extension:   
 Phone Use Code:   
 Equipment Type:   
 Primary residence number:

**Family & Contact**

Guardian 1 First: JOHN  
 Guardian 1 Middle:   
 Guardian 1 Last:   
 Phone Number:   
 Phone Use Code:   
 Equipment Type:

Guardian 1 SSN:   
 Guardian 2 First:   
 Guardian 2 Last:   
 Equipment Type:

☐ Include in CASA (currently 0 patients flagged)

**Patient Address History**

| Address                                | Patient     | Mother | Lang             | Last User to Update |
|--|-------------|--------|------------------|---------------------|
| 3859 POWER LANE<br>NASHVILLE, TN 37212 | PATIENT ONE | SMITH  | WCUMBERLAND(815) | 02/14/2022          |

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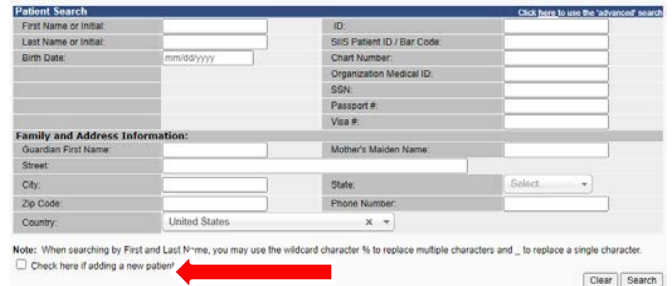
# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### Adding a Patient

Note: Before attempting to add a new patient, search using all [methods listed above](#) to avoid creating duplicate records.

- From the [Patient Search/Add Page](#) click the "Check here if adding a new patient" checkbox at the bottom of the Patient Search field.



**Patient Search** Click here to use the 'advanced' search

First Name or Initial:  ID:   
 Last Name or Initial:  SIS Patient ID / Bar Code:   
 Birth Date:  Chart Number:   
 Organization Medical ID:   
 SSN:   
 Passport #:   
 Visa #:

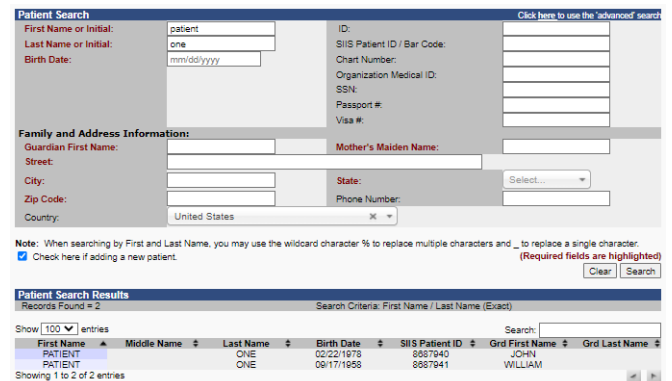
**Family and Address Information:**

Guardian First Name:  Mother's Maiden Name:   
 Street:   
 City:  State:  Select...  
 Zip Code:  Phone Number:   
 Country:  United States X

Note: When searching by First and Last Name, you may use the wildcard character % to replace multiple characters and \_ to replace a single character.  
☐ Check here if adding a new patient ← Clear Search

- Enter all of the required information (highlighted in red):

- First name or Initial
- Last name or Initial
- Birth date
- Guardian's first name
- Mother's maiden name
- Complete mailing address



**Patient Search** Click here to use the 'advanced' search

First Name or Initial:  patient ID:   
 Last Name or Initial:  one SIS Patient ID / Bar Code:   
 Birth Date:  mm/dd/yyyy Chart Number:   
 Organization Medical ID:   
 SSN:   
 Passport #:   
 Visa #:

**Family and Address Information:**

Guardian First Name:  Mother's Maiden Name:   
 Street:   
 City:  State:  Select...  
 Zip Code:  Phone Number:   
 Country:  United States X

Note: When searching by First and Last Name, you may use the wildcard character % to replace multiple characters and \_ to replace a single character.  
☒ Check here if adding a new patient. (Required fields are highlighted) Clear Search

**Patient Search Results** Search Criteria: First Name / Last Name (Exact)

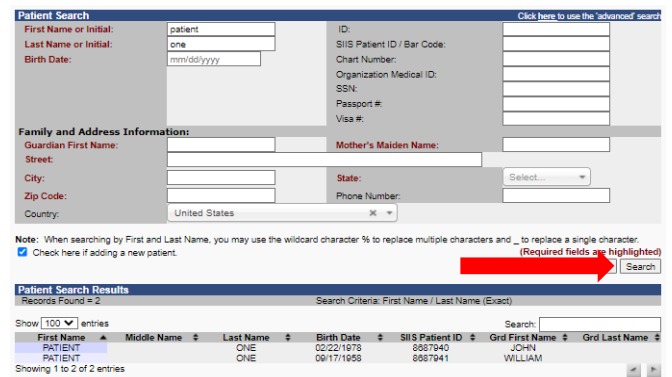
Records Found: 2

Show:  100 entries

| First Name | Middle Name | Last Name | Birth Date | SIS Patient ID | Grd First Name | Grd Last Name |
|------------|-------------|-----------|------------|----------------|----------------|---------------|
| PATIENT    | ONE         | ONE       | 02/22/1973 | 8887040        | JOHN           | WILLIAM       |
| PATIENT    | ONE         | ONE       | 09/17/1958 | 8887041        | JOHN           | WILLIAM       |

Showing 1 to 2 of 2 entries

- Click "Search".



**Patient Search** Click here to use the 'advanced' search

First Name or Initial:  patient ID:   
 Last Name or Initial:  one SIS Patient ID / Bar Code:   
 Birth Date:  mm/dd/yyyy Chart Number:   
 Organization Medical ID:   
 SSN:   
 Passport #:   
 Visa #:

**Family and Address Information:**

Guardian First Name:  Mother's Maiden Name:   
 Street:   
 City:  State:  Select...  
 Zip Code:  Phone Number:   
 Country:  United States X

Note: When searching by First and Last Name, you may use the wildcard character % to replace multiple characters and \_ to replace a single character.  
☒ Check here if adding a new patient. (Required fields are highlighted) Search

**Patient Search Results** Search Criteria: First Name / Last Name (Exact)

Records Found: 2

Show:  100 entries

| First Name | Middle Name | Last Name | Birth Date | SIS Patient ID | Grd First Name | Grd Last Name |
|------------|-------------|-----------|------------|----------------|----------------|---------------|
| PATIENT    | ONE         | ONE       | 02/22/1973 | 8887040        | JOHN           | WILLIAM       |
| PATIENT    | ONE         | ONE       | 09/17/1958 | 8887041        | JOHN           | WILLIAM       |

Showing 1 to 2 of 2 entries

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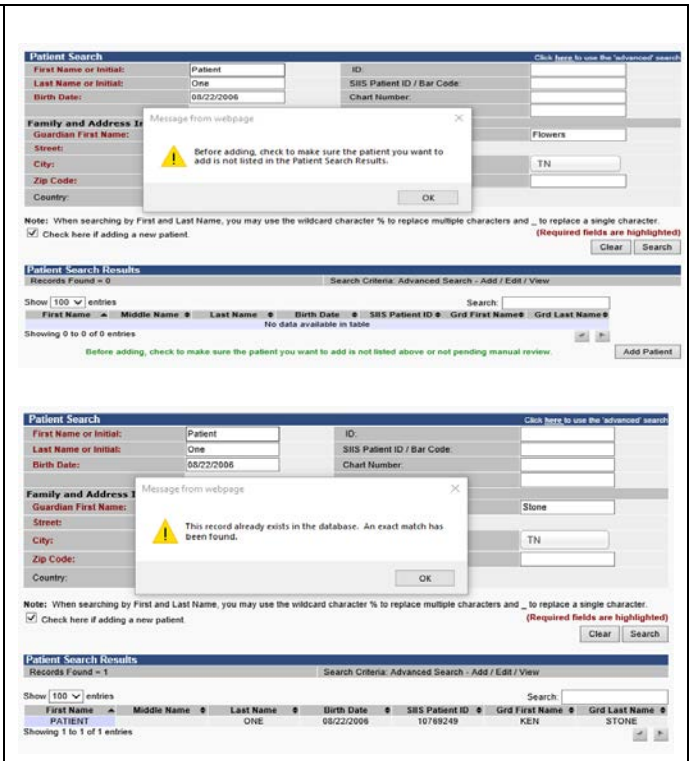
# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

- 4) A dialog box will appear with one of the following messages:
- “Before adding, check to make sure the patient you want to add is not listed in the Patient Search Results.”
  - OR
  - “This record already exists in the database. An exact match has been found.”

Click “OK” to close the dialog box.

Note: If a positive match is found, select the patient from the search results. If TennIIS finds an exact match of the record, you will not be able to add a new patient.



The screenshot shows the 'Patient Search' interface. A dialog box is displayed over the search results, containing a warning icon and the text: 'Before adding, check to make sure the patient you want to add is not listed in the Patient Search Results.' Below the dialog box, the 'Patient Search Results' table is visible, showing a search for 'ONE' on '06/22/2006' with 0 results. The 'Add Patient' button is visible at the bottom right.

- 5) If no match is found or the patient you are searching for is not listed in the search results, click “Add Patient”.

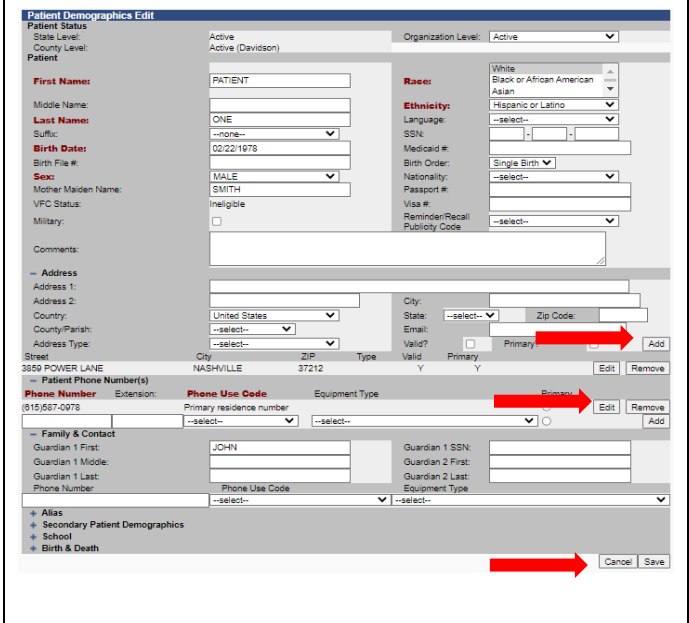


The screenshot shows the 'Patient Search Results' interface. A message at the bottom states: 'Before adding, check to make sure the patient you want to add is not listed above or not pending manual review.' The 'Add Patient' button is highlighted with a red arrow.

- 6) TennIIS will then automatically go to the Patient Demographics Edit.

Note: The “Phone Number” and “Address” sections contain an “Add” button to enter address and phone number information only. Once entered, users will additionally have “Edit” and “Remove” keys to use respectively for both sections.

Enter patient information into the appropriate fields then click “Save” to complete adding new patient.



The screenshot shows the 'Patient Demographics Edit' form. It contains various fields for patient information, including First Name, Last Name, Birth Date, Sex, Address, and Phone Number. The 'Save' button is highlighted with a red arrow.

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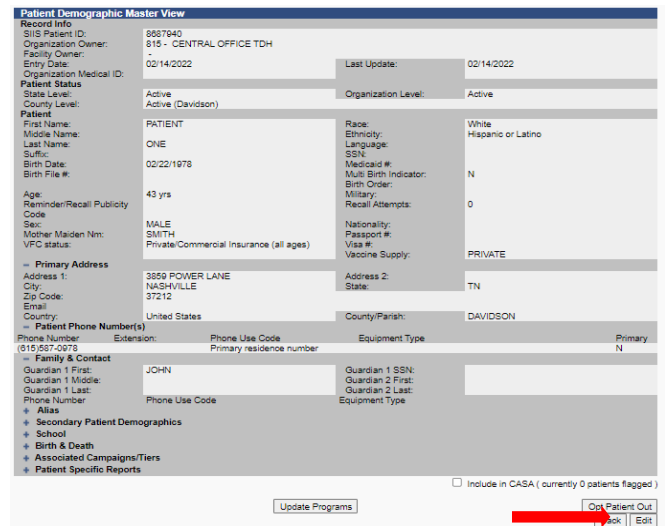
# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### Editing Demographic Information

1) [Search for the patient](#) and select the correct patient from the list.

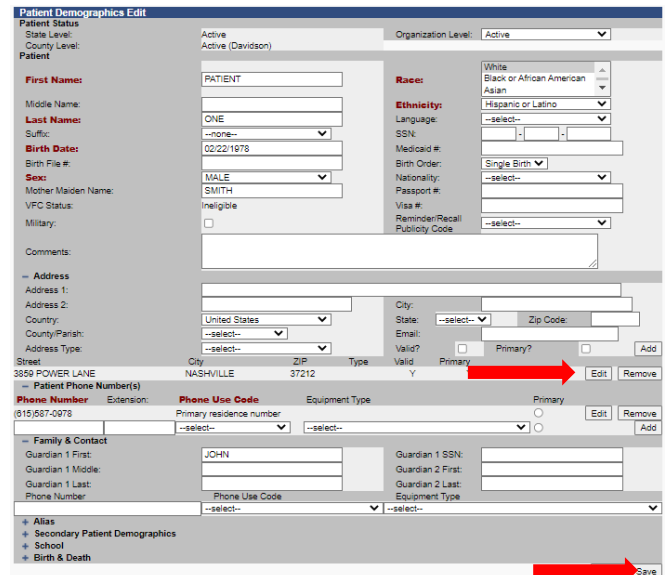
2) From the Patient Demographics Master View, click "Edit".



3) Edit the desired fields. Red fields are mandatory.

Note: The "Phone Number" and "Address" sections contain an "Add" button to enter address and phone number information only. Once entered, users will additionally have "Edit" and "Remove" keys to use respectively for both sections.

Enter patient information into the appropriate fields then click "Save" to complete editing patient.



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# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

- 4) Editing optional patient demographics:
- Patient Demographic Edit:**
- **Language** – select language.
  - **Birth Order** – if the patient is a twin, triplet, etc., enter the birth order in the first dropdown.
  - **Inactivate Patient** – use the inactive dropdown menu to select the appropriate status.
  - **VFC Status** – select the patient's VFC status from the dropdown box.
- Address section** – enter the following fields to update or enter the patient's address:
- **Address 1** – street or PO Box number
  - **Address 2** – apartment number
  - Enter the zip code and the correct city, state, and county will automatically populate for you.
- Alias section**
- Enter a nickname, maiden or second last name into these fields to allow users to search by the alias name.

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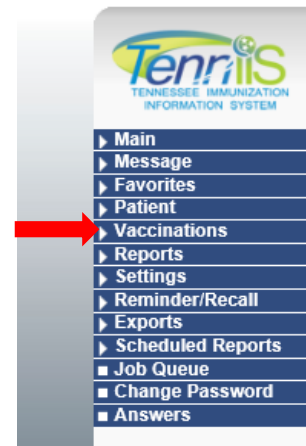
# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

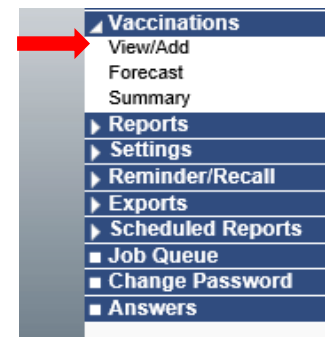
### Viewing a Patient's Vaccinations

1) [Search for the patient](#) and select the correct patient from the list.

2) Using the Navigation Menu, click on the "Vaccinations" menu heading.



3) Click "View/Add".



4) The Vaccination View/Add screen will appear where users can see the patient's full vaccination history (if applicable).

This screen has three sections:

- Patient
- Vaccination Forecast:
  - o Vaccine Family name displays if series not complete
  - o Recommended Date is routine ACIP schedule
  - o Minimum Valid Date is earliest vaccine could be given to be valid dose
  - o Status is as of today and will be either Past Due, Due Now, or Not Yet Due

| Patient        |             |                            |         |
|----------------|-------------|----------------------------|---------|
| Name:          | PATIENT ONE | SIIS Patient ID:           | 8887940 |
| Date of Birth: | 02/22/1978  | Age:                       | 43 yrs  |
| Guardian:      | JOHN        | Organization Level Status: | Active  |

| Vaccination Forecast  |                 |                  |                    |              |          |
|---|-----------------|------------------|--------------------|--------------|----------|
| The forecast automatically switches to the catch-up schedule when a patient is behind schedule. |                 |                  |                    |              |          |
| Vaccine Group   | Forecasted Dose | Recommended Date | Minimum Valid Date | Overdue Date | Status   |
| MMR   | 1               | 02/22/1979       | 02/22/1979         | 07/19/1979   | Past Due |
| Tdap  | 1               | 02/22/1985       | 02/22/1985         | 02/22/1985   | Past Due |
| Coronavirus (SARS-CoV-2)(COVID-19)  | 1               | 12/12/2020       | 12/12/2020         | 01/22/2021   | Past Due |
| FLU   | 1               | 07/01/2021       | 07/01/2021         | 07/28/2021   | Past Due |

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# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

- Vaccination View
  - o \* after date = historical vaccination
  - o No \* after date = administered vaccination
  - o X in front of date = invalid vaccination

| Vaccination View/Add  |              |                |              |                 |   |   |
|---|--------------|----------------|--------------|-----------------|---|---|
| (H = Historical, A = Adverse Reaction, 1 = Warning, 2 = Warning, 3 = Warning, * = Unverified Historicals, ^ = Compromised Vaccination)<br>Documented By: [dropdown]<br>Double-click in any date field below to enter the default date: 02/14/2022 |              |                |              |                 |   |   |
| Vaccine   | 1            | 2              | 3            | 4               | 5 | 6 |
| DTaP-Hib-IPV (Pentacel®)  | 02/17/2007   | 04/21/2007 *   | 06/27/2007 * | X 08/01/2008 *  |   |   |
| DTaP-IPV (Kinrix®/Quadacel®)  | 07/03/2012 * |                |              |                 |   |   |
| Hep A, ped/adol, 2 dose (Vaqta®/Havrix®)  | 12/16/2007 * | X 01/01/2008 * | 07/28/2009 * | 08/01/2009 * 13 |   |   |
| Hep B Ped/Adol - Preserv Free (Recombivax HB®/Engerix-B®)   | 02/17/2007   | 09/01/2020 *   | 12/01/2020 * |                 |   |   |
| MMR (MMR II®)   | 12/17/2009 * | 07/03/2014 *   |              |                 |   |   |
| Pneumococcal conjugate PCV 13 (Prevnar 13®)   | 04/21/2007 * | 07/14/2007 *   | 03/22/2008 * |                 |   |   |
| Tdap (Adacel®/Boostrix®)  | 02/13/2019 * |                |              |                 |   |   |
| varicella (Varivax®)  | 01/01/2020 * | 12/01/2020 *   |              |                 |   |   |
| COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose (Moderna COVID-19 vaccine)   |              |                |              |                 |   |   |
| COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL dose (Pfizer COVID-19 vaccine)   |              |                |              |                 |   |   |

- 5) Click on vaccine date to display the Vaccination Details Screen.

Note: Organization and/or Facility fields show facility that entered either administered or historical vaccinations into TennIIS.

| Patient  |                                 |                            |         |
|--|---------------------------------|----------------------------|---------|
| Name:  | PATIENT ONE                     | SIIS Patient ID:           | 8687940 |
| Date of Birth:   | 02/22/1978                      | Age:                       | 43 yrs  |
| Guardian:  | JOHN                            | Organization Level Status: | Active  |
| Vaccination Detail   |                                 |                            |         |
| Vaccine:   | Hep A, adult (Vaqta® / Havrix®) |                            |         |
| Date Administered:   | 02/14/2022                      |                            |         |
| Historical:  | Yes                             |                            |         |
| Manufacturer:  |                                 |                            |         |
| Lot Number:  |                                 |                            |         |
| Lot Facility:  |                                 |                            |         |
| Funding Source:  |                                 |                            |         |
| Provider Noted on Record:  |                                 |                            |         |
| Lot Noted on Record:   |                                 |                            |         |
| Manufacturer Noted on Record:  |                                 |                            |         |
| Vaccinator:  |                                 |                            |         |
| Organization:  | 815 - CENTRAL OFFICE TDH        |                            |         |
| Facility (Facility SIIS ID):   |                                 |                            |         |
| Campaign:  |                                 |                            |         |
| Tier:  |                                 |                            |         |
| Anatomical Site:   |                                 |                            |         |
| Anatomical Route:  | Full                            |                            |         |
| Dose Size:   |                                 |                            |         |
| Volume (CC):   | (Unknown)                       |                            |         |
| VFC Status:  |                                 |                            |         |
| Revaccination Reason:  |                                 |                            |         |
| Adverse Reaction:  |                                 |                            |         |
| District/Region:   |                                 |                            |         |
| Dates of VIS Publications:   |                                 |                            |         |
| Date VIS Form Given:   |                                 |                            |         |
| Ordering Provider:   |                                 |                            |         |
| Comments:  |                                 |                            |         |
| <div>           Cancel           Edit Record           Delete Record           Add/Edit Adverse Reactions         </div> |                                 |                            |         |

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# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### Adding Administered Vaccinations

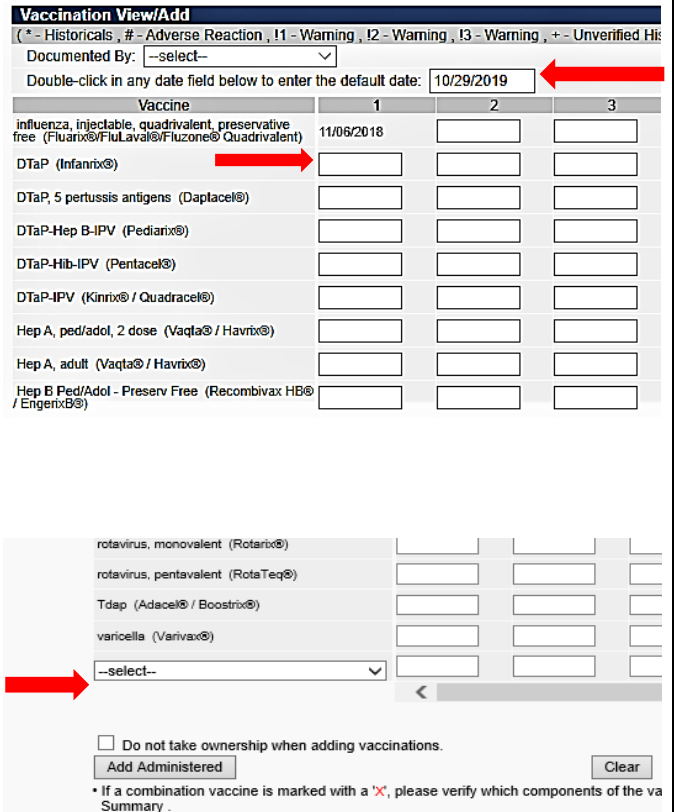
Note: Administered vaccinations are shots that were both administered at your facility and entered into TennIIS by someone at your facility. These vaccinations may only be modified or deleted by staff within your facility.

1) From the [Vaccination View/Add Screen](#) :

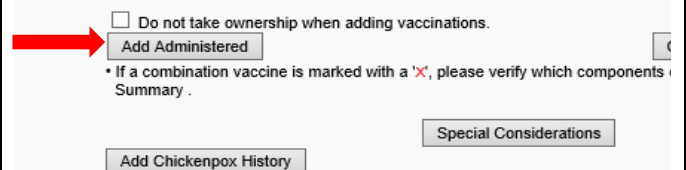
Type the date in the field next to the appropriate vaccine name to enter the date the vaccine was given.

Helpful tip: to enter vaccination dates quickly, double click in the "date field" to automatically enter today's date as the default. To change the default date, enter the date you'd like as the default in the default date box on top of the vaccination date grid.

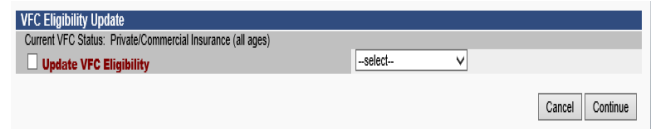
Note the drop-down menu located at the bottom of the vaccination list which will contain additional vaccine selections. Once a vaccine is selected from the drop-down, a new line will appear for that vaccine in which the user can add dates.



2) Click "Add Administered" once all dates are entered.



3) A VFC Eligibility Update screen will open. Update the VFC eligibility of the patient at the time of this vaccine. Click "Continue".



# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

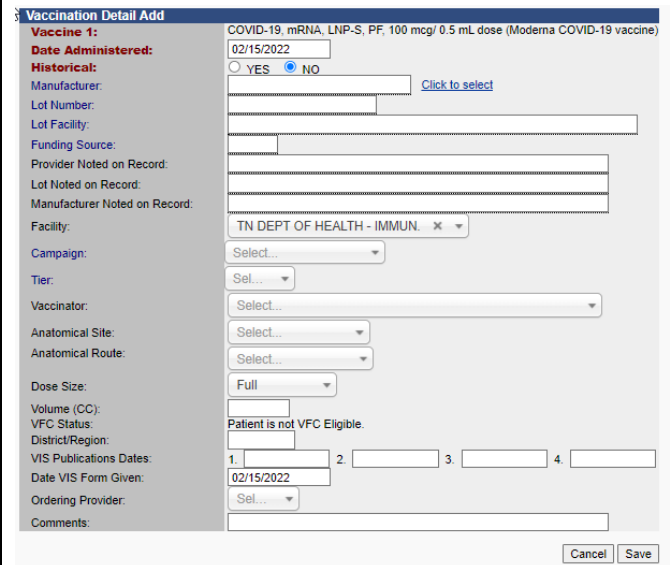
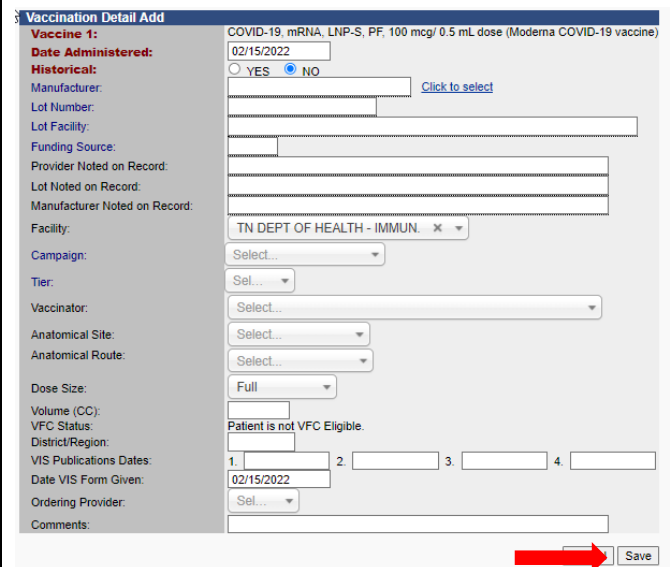
### 4) The Vaccination Detail Add screen will open.

This screen allows you to view and edit information about the vaccination.

For privately purchased vaccines, you may manually enter "Provider Noted on Record", "Lot Noted on Record", Manufacturer Noted on Record.

For VFC vaccines, click "Click to Select" link to choose vaccine directly from TennIIS Inventory. "Manufacturer", "Lot Number", "Lot Facility", "Funding Source", will auto-populate once vaccine is selected.

Click "Save" when finished – TennIIS will go back to the [Vaccination View/Add Screen](#).

# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### Adding Historical Vaccinations

Note: Historical vaccinations are shots that were administered by providers outside of your facility. Historical vaccinations include those given out of state and country.

#### 1) From the [Vaccination View/Add Screen](#) :

Type the date in the field next to the appropriate vaccine name to enter the date the vaccine was given (see red box).

Helpful tip: to enter vaccination dates quickly, double click in the date field to automatically enter today's date as the default. To change the default date, enter the date you'd like as the default in the Default Date box on top of the Vaccination Date grid (see red arrow).

Note: the drop-down menu located at the bottom of the vaccination list which will contain additional vaccine selections. Once a vaccine is selected from the drop-down, a new line will appear for that vaccine in which the user can add dates.

**Vaccination View/Add**  
 (\* - Historicals , # - Adverse Reaction , !1 - Warning , !2 - Warning , !3 - Warning , + - Unverified History)

Documented By: --select--

Double-click in any date field below to enter the default date: 10/29/2019

| Vaccine   | 1          | 2 | 3 |
|---|------------|---|---|
| influenza, injectable, quadrivalent, preservative free (Fluarix®/FluLaval®/Fluzone® Quadrivalent) | 11/06/2018 |   |   |
| DTaP (Infanrix®)  |            |   |   |
| DTaP, 5 pertussis antigens (Daptacel®)  |            |   |   |
| DTaP-Hep B-IPV (Pediarix®)  |            |   |   |
| DTaP-Hib-IPV (Pentacel®)  |            |   |   |
| DTaP-IPV (Kinrix® / Quadracel®)   |            |   |   |
| Hep A, ped/adol, 2 dose (Vaqta® / Havrix®)  |            |   |   |
| Hep A, adult (Vaqta® / Havrix®)   |            |   |   |
| Hep B Ped/Adol - Preserv Free (Recombivax HB® / Engerix-B®)                                       |            |   |   |
| rotavirus, monovalent (Rotarix®)  |            |   |   |
| rotavirus, pentavalent (RotaTeq®)   |            |   |   |
| Tdap (Adacel® / Boostrix®)  |            |   |   |
| varicella (Varivax®)  |            |   |   |
| --select--  |            |   |   |

☐ Do not take ownership when adding vaccinations.

\* If a combination vaccine is marked with a 'x', please verify which components of the vaccine are administered.

#### 2) Click "Add Historicals" after all of the historical dates have been entered.

TennIIS will add the historical data and take you back to the [Vaccination View/Add Screen](#).

|  |  |  |  |  |
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# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### Editing Vaccination Information

- From the [Vaccination View/Add Screen](#) :

Click on the date of the vaccination you want to edit. You will be taken to the Vaccination Detail page.

Note: Administered vaccinations may only be modified or deleted by staff within the administering facility.

**Vaccination View/Add**  
 (\* - Historicals , # - Adverse Reaction , !1 - Warning , !2 - Warning  
 Documented By: --select--  
 Double-click in any date field below to enter the default date: [C]  

| Vaccine          | Date         |
|------------------|--------------|
| DTaP (Infanrix®) | 01/14/2020 * |

- Click "Edit Record".

**Patient**  
 Name: PATIENT ONE  
 Date of Birth: 02/22/1978  
 Guardian: JOHN  
 SIIS Patient ID: 8687940  
 Age: 43 yrs  
 Organization Level Status: Active  
**Vaccination Detail**  
 Vaccine: Hep A, adult (Vagta® / Havrix®)  
 Date Administered: 02/14/2022  
 Historical: Yes  
 Manufacturer:  
 Lot Number:  
 Lot Facility:  
 Funding Source:  
 Provider Noted on Record:  
 Lot Noted on Record:  
 Manufacturer Noted on Record:  
 Vaccinator:  
 Organization: 815 - CENTRAL OFFICE TDH  
 Facility (Facility SIIS ID):  
 Campaign:  
 Tier:  
 Anatomical Site:  
 Anatomical Route:  
 Dose Size:  
 Volume (CC):  
 VFC Status:  
 Revaccination Reason:  
 Adverse Reaction:  
 District/Region:  
 Dates of VIS Publications:  
 Date VIS Form Given:  
 Ordering Provider:  
 Comments:  
 Edit Record Delete Record  
 Add/Edit Adverse Reactions

- Make the appropriate changes in the fields and click "Submit Changes."

**Patient**  
 Name: PATIENT ONE  
 Date of Birth: 02/22/1978  
 Guardian: JOHN  
 SIIS Patient ID: 8687940  
 Age: 43 yrs  
 Organization Level Status: Active  
**Vaccination Detail Edit**  
 Vaccine: Hep A, adult (Vagta® / Havrix®)  
 Date Administered: 02/14/2022  
 Historical: YES NO  
 Manufacturer: Click to select  
 Lot Number:  
 Lot Facility:  
 Funding Source:  
 Provider Noted on Record:  
 Lot Noted on Record:  
 Manufacturer Noted on Record:  
 Facility: Select...  
 Vaccinator: Sel...  
 Anatomical Site: Select...  
 Anatomical Route: Select...  
 Dose Size: Full  
 Volume (CC): Select...  
 Revaccination Reason: Unknown  
 VFC Status: VFC Status will be ignored if lot number is not VFC eligible.  
 District/Region:  
 VIS Publications Dates: 1. 2. 3. 4.  
 Date VIS Form Given:  
 Ordering Provider: Sel...  
 Comments:  
 Submit Changes

Please contact [TennIIS.Training@tn.gov](mailto:TennIIS.Training@tn.gov) or 1-800-342-1813 for questions about this quick reference guide.

# Tennessee Immunization Information System (TennIIS)

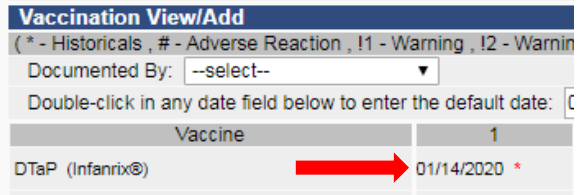
## Medical Office User Quick Reference Guide

### Deleting Vaccinations

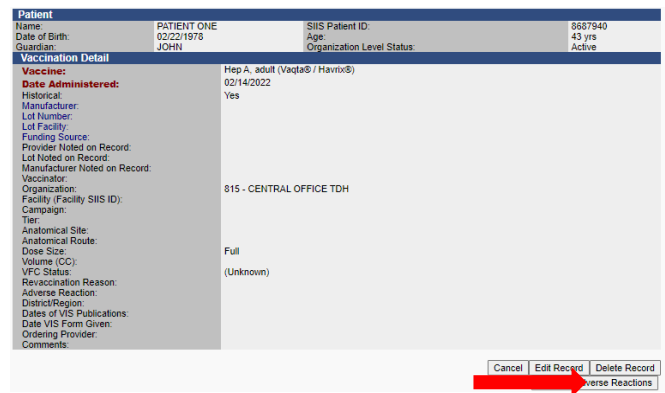
1) From the [Vaccination View/Add Screen](#) :

Click on the date of the vaccination you want to delete.

Note: Dates must be individually deleted.



2) Click “Delete Record” on the Vaccination Detail page.



3) Click “Delete Record” on the confirmation page.

Note: administered vaccinations can only be deleted by users in the administering facility.



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# Tennessee Immunization Information System (TennIIS)

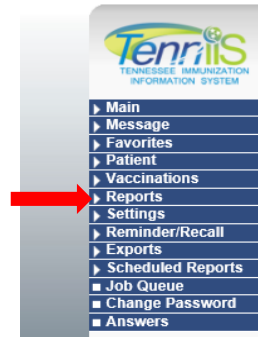
## Medical Office User Quick Reference Guide

### Generating the official TN Certificate of Immunization

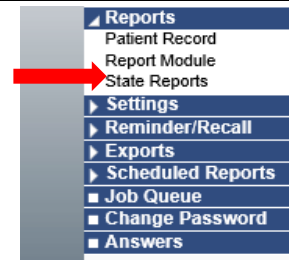
Note: The Tennessee Immunization Certificate is required for children in child care or pre-school, and when they enroll for the first time in a school located in Tennessee. In addition, all currently enrolled students entering 7th grade must provide a certificate showing they have had the vaccines required for 7th grade entry.

1) [Search for the patient](#) and select the correct patient from the list.

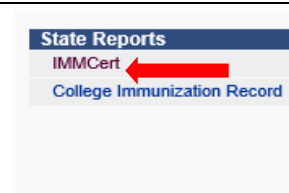
2) Using the Navigation Menu, click on the "Reports" menu heading.



3) Click "State Reports".



4) Click "IMMCert" (this link is only available for patients less than 20 years old).



5) Click the appropriate "radio button" for certificate needed (options change depending upon patient/student age):

Click "View Certificate".

Note: Pre-Populated and Blank Certificate may be selected from this screen. **Both Pre-Populated Immunization Certificate without Validation Assessment and Blank Certificate require the signature of a qualified provider to be valid.**

**Tennessee Immunization Certificate**

The Tennessee Immunization Certificate is required for children in child care or pre-school, and when they enroll for the first time in a school located in Tennessee. In addition, all currently enrolled students entering 7th grade must provide a certificate showing they have had the vaccines required for 7th grade entry.

**Select Certificate to View**

State regulations do NOT require an Immunization Certificate for infants younger than 2 months of age who are enrolling in child care. For this reason, the Immunization Certificate Validation Tool (ICVT) is not available for children younger than 2 months of age.

☒ Select this box to produce a validated certificate (or Failed Validation Report) for a child in the following category :

- A current TN student, needing certificate only for 7th grade entry requirements

☐ Select this box to produce a validated certificate (or Failed Validation Report) for a child in one of the following categories :

- A current TN student in any grade other than 7th grade (grade 1 through 6 or grade 8 through 12)
- OR
- A new student to Tennessee schools entering grade 1 through 12 (For children who have never had a TN School Immunization Certificate)

☐ Select this box for a pre-populated TN Immunization Certificate without validation assessment. Requires provider assessment and signature to be valid. (Recommended for children who need temporary certificates as they catch up on required immunizations and for children with incomplete schedules due to medical or religious exemptions).

☐ Blank TN Immunization Certificate Requires provider to complete certificate and sign.

[Back](#) [View Certificate](#)

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# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

6) **If immunization record in TennIIS MEETS requirements for certificate type**, Validation Result screen displays links for validated Official Certificate and Validation Report.

Click link to produce a validated Official Certificate or a Validation Report for desired certificate type.

**Tennessee Immunization Certificate**

**Validation Results**

Validation results are shown for each Section 3 Provider Assessment category (Box B through E) that **MIGHT** be age-appropriate for this child. Please select only the category that is needed. Other categories may be disregarded.

The correct assessment category for a school-aged child depends on the grade the child is entering. New students entering a Tennessee school for the first time in either Kindergarten and first grade have additional requirements compared to children entering all other grades. Review options and select the category appropriate for the grade the child is entering.

**Select certificate or document to view**

**Box C: Complete K-4th Grade (Enroll) K-1st-4th grade**  
Select this assessment ONLY for a child entering 1st-4th grades.

**PASSED - Validated for this Category**

**View/Print Validated Official Certificate (PDF)**

**View Validation Report**  
This report shows exactly how the child's record passed or failed to meet the requirements of this assessment category. The report may guide completion of requirements and may identify invalid doses in the record.

7) **Validated Official Certificate** will have:

- Certificate type box checked in Section 3.
- Provider Assessment
- No signature is required; "Validated by the TN State Immunization Information System"
  - Invalid doses do not display

| <b>CERTIFICATE OF IMMUNIZATION</b>   |               |               |               |   |   |   |                          |                |       |
|--|---------------|---------------|---------------|---|---|---|--------------------------|----------------|-------|
| <b>ONE, STUDENT</b><br>Child's Name (Last name, first name, middle) _____<br><br>Parent/Guardian Name (Last name, first name, middle) _____<br>(815) 233-8999<br><br>Phone (area include area code 800-863-6363)<br>123 MAIN ST<br><br>Address<br>CLARKSVILLE TN 37040<br><br>City State Zip Code  |               |               |               | <b>08/02/2008</b><br>Birthdate (month/day)<br><br>Confirmed by (Signature/Name) _____<br><br><b>1a. Check if needed</b><br><input type="checkbox"/> Dental Screening<br><input type="checkbox"/> Vision Screening |   | <b>Section 1a. Multiple Vaccination Exemption</b><br><input type="checkbox"/> Child was a frequent exemption to immunization selected on appointment card.<br><br><b>1b. Health Examination Documentation (if required)</b><br><input type="checkbox"/> This child has been examined: MM/DD/YY _____<br><br>Physician or other holder of valid state health & Tennessee medical license: "On-call" Institution at the Tennessee Department of Health website ( <a href="http://www.tn.gov/health/immunization-program/patient-care-immunization.html">http://www.tn.gov/health/immunization-program/patient-care-immunization.html</a> ) and on the Tennessee Immunization Information System (see below page 2). |                          |                |       |
| VACCINE  | DATE MM/DD/YY | DATE MM/DD/YY | DATE MM/DD/YY | DATE MM/DD/YY   | DATE MM/DD/YY   | DATE MM/DD/YY   | Immunized by (signature) | Age (yr/mo/dy) | Notes |
| <b>Section 2a. Required Vaccines for School or Child Care Attendance (dates required)</b>  |               |               |               |   |   |   |                          |                |       |
| RID<br>One-time Only (1st year)  | 08/02/2008    | 12/02/2008    | 08/02/2007    |   |   |   |                          |                |       |
| Pneumovaccal (PCV)<br>One-time Only (1st year)   | 08/02/2008    | 12/02/2008    | 08/02/2007    | 08/02/2007  |   |   |                          |                |       |
| DTP, DTap, DT, Td  | 08/02/2008    | 12/02/2008    | 08/02/2007    | 08/02/2007  | 08/02/2010  |   |                          |                |       |
| Polio/myelitis   | 08/02/2008    | 12/02/2008    | 08/02/2007    | 08/02/2010  |   |   |                          |                |       |
| Hepatitis B<br>One-time 1st-15 years<br>2-dose schedule only   | 08/02/2008    | 12/02/2008    | 12/02/2008    | 08/02/2007  |   |   |                          |                |       |
| Hepatitis A<br>One-time (Effective 10/01)<br>Requires Effective 10/01  | 08/02/2007    | 08/02/2010    |               |   |   |   |                          |                |       |
| Measles  | 08/02/2007    | 08/02/2010    |               |   |   |   |                          |                |       |
| Mumps  | 08/02/2007    | 08/02/2010    |               |   |   |   |                          |                |       |
| Rubella  | 08/02/2007    | 08/02/2010    |               |   |   |   |                          |                |       |
| Varicella  | 08/02/2007    | 08/02/2010    |               |   |   |   |                          |                |       |
| Tdap Booster<br>Tb (one-time Only)   | 01/23/2010    |               |               |   |   |   |                          |                |       |
| <b>Section 2b. Recommended Vaccines (Documentation Optional)</b>   |               |               |               |   |   |   |                          |                |       |
| Rotavirus  | 08/02/2008    | 12/02/2008    | 08/02/2008    |   |   |   |                          |                |       |
| Influenza  |               |               |               |   |   |   |                          |                |       |
| Meningococcal ACWY   |               |               |               |   |   |   |                          |                |       |
| HPV  |               |               |               |   |   |   |                          |                |       |
| <b>Section 3. Provider Assessment (useful one*, not valid if blank)</b>  |               |               |               |   | <b>Section 4 (Required) Name, Address, Phone of Qualified Provider</b>  |   |                          |                |       |
| <input type="checkbox"/> A) Temporary Certificate - Expires MM/DD/YYYY<br>Expiration date may exceed after date and reaching immunization due.<br><input type="checkbox"/> B) Up to date for Child Care Entry and/or 18 Months of Age<br>One (1) month(s) incomplete, not up to date for age 18 months or 18 months of age.<br><input type="checkbox"/> C) Complete for Child Care / Pre-School<br>Fully all requirements for child care/pre-school or pre-K under 5 years of age.<br><input checked="" type="checkbox"/> D) Complete K-6th Grade<br>Fully all requirements, kindergarten through 6th grade.<br><input type="checkbox"/> E) Complete 7th Grade or Higher<br>Fully all requirements, 7th grade or higher.<br>*Range 1 year and fully. Requirements for Pre-School and Kindergarten, check BOTH Boxes C and D. |               |               |               |   | MD, DO, PA, Advanced Practice Nurse or Health Department<br>CENTRAL OFFICE TDH<br>ANDREW JOHNSON TOWER, 3RD FLOOR, 710 JAMES<br>ROBERTSON PKWY<br>NASHVILLE, TN 37243<br><br>Validated by the TN State Immunization Information System on 08/04/2010<br>Confirmed by (Signature/Initials) or Telecall Date of Issue |   |                          |                |       |

PHS-2008 (Rev. 1/05)

EOL-04-04

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# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### 8) PASS Validation Report:

- Displays pass status for certificate type
- Displays vaccine requirements with pass status
- If invalid dose in record, displays invalid vaccine dose and reason dose is invalid

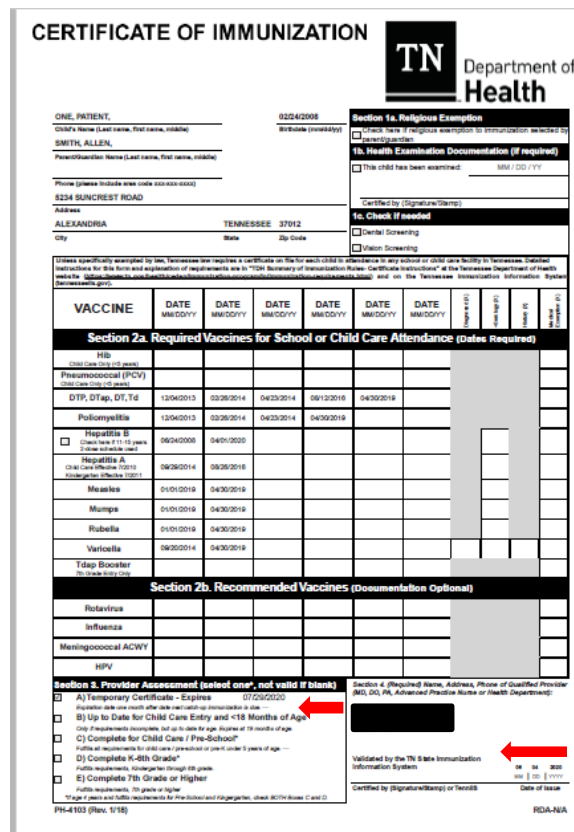
| Tennessee Department of Health Immunization Registry<br>Official Immunization Certificate Assessed Validation Assessment<br>(PASS) |                |                            |               |                         |          |          |
|--|----------------|----------------------------|---------------|-------------------------|----------|----------|
| Box D: Complete 4th Grade  |                |                            |               |                         |          |          |
| Certificate Information  |                | DOB                        | Report Status | Validation Information  |          |          |
| Location Name  | CLINIC ID#     |                            |               | Exemption Reason        | Min. Age | Min. Sex |
| Location Type  | Required Doses | Doses Received in Registry | Valid Doses   | Reason for Invalid Dose |          |          |
| 12/15/2019   | 2              | 12/15/2019                 | 1             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
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| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/15/2019   |                | 12/15/2019                 | 2             |                         |          |          |
| 12/  |                |                            |               |                         |          |          |

# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### 12) Temporary Official Certificate:

- Temporary certificate box checked in Section 3. Provider Assessment with **expiration date**.
- No signature is required; "Validated by the TN State Immunization Information System".
- Invalid doses do not display.



**CERTIFICATE OF IMMUNIZATION**

**TN Department of Health**

ONE, PATIENT: SMITH, ALLEN  
 STREET: 5234 SUNCREST ROAD  
 CITY: ALEXANDRIA, TENNESSEE 37012

ONE, PROVIDER: 00242008  
 STREET: 5234 SUNCREST ROAD  
 CITY: ALEXANDRIA, TENNESSEE 37012

**Section 1a. Religious Exemption**  
☐ I am a member of a religious organization that opposes vaccination.

**1b. Health Examination Documentation (if required)**  
☐ This child has been examined: MM/DD/YY

**1c. Check if needed**  
☐ Dental Screening  
☐ Vision Screening

**Section 2a. Required Vaccines for School or Child Care Attendance (Dates Required)**

| VACCINE            | DATE       | DATE       | DATE       | DATE       | DATE       | DATE     | DATE     | DATE     | DATE     |
|--------------------|------------|------------|------------|------------|------------|----------|----------|----------|----------|
|                    | MM/DD/YY   | MM/DD/YY   | MM/DD/YY   | MM/DD/YY   | MM/DD/YY   | MM/DD/YY | MM/DD/YY | MM/DD/YY | MM/DD/YY |
| MM                 |            |            |            |            |            |          |          |          |          |
| Pneumococcal (PCV) |            |            |            |            |            |          |          |          |          |
| DTP, DTaP, DT, Td  | 12/04/2013 | 02/26/2014 | 04/23/2014 | 09/13/2014 | 04/30/2015 |          |          |          |          |
| Poliomyelitis      | 12/04/2013 | 02/26/2014 | 04/23/2014 | 09/13/2014 | 04/30/2015 |          |          |          |          |
| Hepatitis B        | 06/04/2008 | 04/01/2020 |            |            |            |          |          |          |          |
| Hepatitis A        | 08/26/2014 | 08/26/2015 |            |            |            |          |          |          |          |
| Measles            | 01/01/2019 | 04/30/2019 |            |            |            |          |          |          |          |
| Mumps              | 01/01/2019 | 04/30/2019 |            |            |            |          |          |          |          |
| Rubella            | 01/01/2019 | 04/30/2019 |            |            |            |          |          |          |          |
| Varicella          | 04/22/2014 | 04/30/2019 |            |            |            |          |          |          |          |
| Tdap Booster       |            |            |            |            |            |          |          |          |          |

**Section 2b. Recommended Vaccines (Documentation Optional)**

| VACCINE            | DATE     | DATE     | DATE     | DATE     | DATE     | DATE     | DATE     | DATE     | DATE     |
|--------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
|                    | MM/DD/YY | MM/DD/YY | MM/DD/YY | MM/DD/YY | MM/DD/YY | MM/DD/YY | MM/DD/YY | MM/DD/YY | MM/DD/YY |
| Rotavirus          |          |          |          |          |          |          |          |          |          |
| Influenza          |          |          |          |          |          |          |          |          |          |
| Meningococcal ACWY |          |          |          |          |          |          |          |          |          |
| HPV                |          |          |          |          |          |          |          |          |          |

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

☒ A) Temporary Certificate - Expires 07/29/2020

☐ B) Up to Date for Child Care Entry and <18 Months of Age

☐ C) Complete for Child Care / Pre-School\*

☐ D) Complete K-6th Grade\*

☐ E) Complete 7th Grade or Higher

\*If age 4 years and fulfills requirements for Pre-School and Kindergarten, check BOTH Boxes C and D.

PH-4103 (Rev. 1/18)

Please contact [TennIIS.Training@tn.gov](mailto:TennIIS.Training@tn.gov) or 1-800-342-1813 for questions about this quick reference guide.

# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

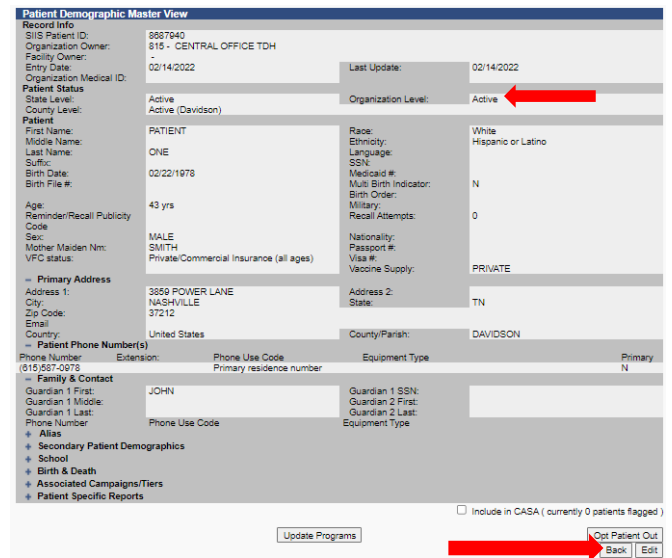
### Changing Patient Status Between Active/Inactive

Note: Patients become active with a facility if that facility has created the patient or recorded an administered vaccine. Patient status can be used to limit certain reports that can be generated in TennIIS. For more information, please see the Quick Reference Guides for Running Reports located in the Documents Center of TennIIS. Patients can be manually activated or inactivated using the steps below.

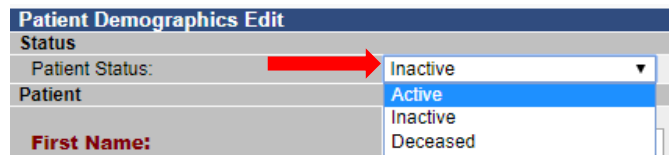
1) [Search for the patient](#) and select the correct patient from the list.

2) Organization Level is listed in the Patient Demographic Master View.

Click "Edit".



3) Go to the line that reads "Patient Status" and select the desired status (active if the patient should show up on your facility's reports, inactive if they are no longer associated with your facility, or deceased).



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# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### 4) Click "Save".

Note: Patients marked as inactive can be reactivated as needed. If a patient's record is incorrectly marked as deceased, please contact the TennIIS Help Desk at [TennIIS.Help@tn.gov](mailto:TennIIS.Help@tn.gov) or 844-206-9927.

**Patient Demographics Edit**

Patient Status: Active  
 State Level: Active (Davidson)  
 County Level: Patient  
 Organization Level: Active

**First Name:** PATIENT  
**Middle Name:**  
**Last Name:** ONE  
**Suffix:** --none--  
**Birth Date:** 02/22/1978  
**Birth File #:**  
**Sex:** MALE  
**Mother Maiden Name:** SMITH  
**VFC Status:** Ineligible  
**Military:** ☐

**Race:** White  
**Ethnicity:** Hispanic or Latino  
**Language:** --select--  
**SSN:** --select--  
**Medicaid #:** --select--  
**Birth Order:** Single Brn  
**Nationality:** --select--  
**Passport #:** --select--  
**Visa #:** --select--  
**Reminder/Recall:** --select--  
**Paternity Code:** --select--

**Comments:**

**Address:**  
 Address 1:  
 Address 2:  
 Country: United States  
 County/Parish: --select--  
 Address Type: --select--  
 City: NASHVILLE  
 State: --select--  
 Zip: 37212  
 Valid? ☐ Primary? ☐

**Phone Number:** 3059 POWER LANE  
 Extension: --select--  
 Phone Use Code: --select--  
 Equipment Type: --select--  
 Primary residence number: --select--  
 Primary ☐ Edit Remove

**Family & Contact:**  
 Guardian 1 First: JOHN  
 Guardian 1 Middle:  
 Guardian 1 Last:  
 Phone Number: --select--  
 Guardian 1 SSN: --select--  
 Guardian 2 First:  
 Guardian 2 Last:  
 Equipment Type: --select--

**Alias:**  
 Secondary Patient Demographics  
 School  
 Birth & Death

**Cancel Save**

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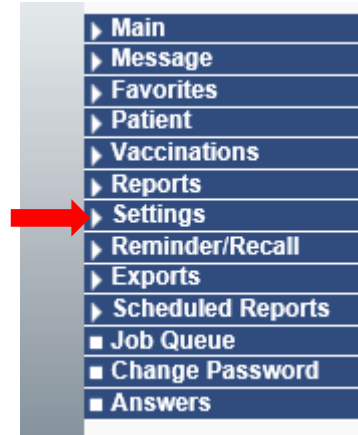
# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

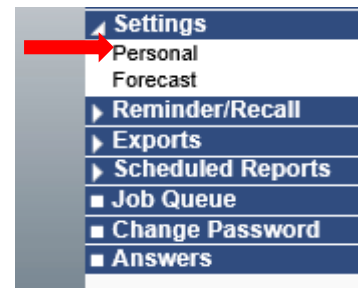
### Adding Vaccinator Name as Default

Note: Adding vaccinator name as default will expedite data entry by automatically populating the vaccinator name when adding an administered vaccine to a patient's record.

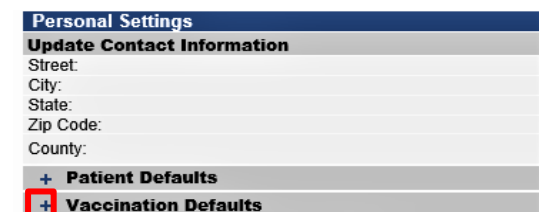
- 1) Using the Navigation Menu, click on the "Settings" menu heading.



- 2) Click "Personal."



- 3) Next to "Vaccination Defaults", click the "+" to open the tab.



- 4) Click "Update".



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## Tennessee Immunization Information System (TennIIS) Medical Office User Quick Reference Guide

- 5) Choose the vaccinator's name and facility from the dropdown list and click "Save".

Note: You can always override any default when adding an administered vaccine. Personal settings follow each user account. Each user must set up his/her unique personal settings.

Organization points of contact are responsible for setting up physician/vaccinators in TennIIS.



# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

### Adding Route and Site as Default

Note: When adding an administered vaccine to a patient's record, you can set up Anatomical Injection Site Default for each vaccine you normally give in the same anatomical site. You can even specify the site by the patient's age.

1) Open "Personal Settings" (see steps in [Adding Vaccinator Name as Default](#) section).

2) Next to "Anatomical Injection Site Defaults", click the "+" to open the tab.

The screenshot shows the 'Personal Settings' menu. The 'Anatomical Injection Site Defaults' option is highlighted with a red box and a '+' icon next to it. Other options visible include 'Update Contact Information', 'Patient Defaults', and 'Vaccination Defaults'.

3) Choose the Vaccine Description, Anatomical Route, and Anatomical Injection Site from the dropdown menus.

Note: If you would like to set the default by age range, type the age range. Otherwise select the "All Ages" radio button. If you create the default by a specific age range you must repeat the above step for each possible age range.

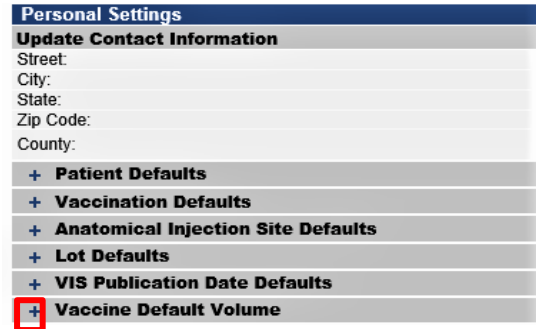
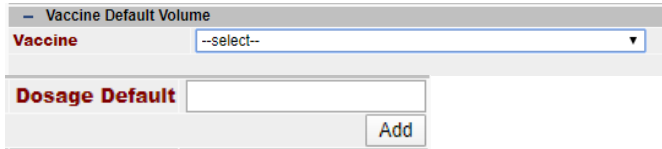

Once you have made your selection, click the "Add" button to save your changes. Repeat these steps for each vaccine type.

Note: You can always override any default when adding an administered vaccine. Personal settings follow each user account. Each user must set up his/her unique personal settings.

The screenshot shows the 'Anatomical Injection Site Defaults' form. It includes dropdown menus for 'Vaccine Description', 'Anatomical Route', and 'Anatomical Injection Site'. Below these are radio buttons for 'All ages', 'Between [ ] and [ ] months', and '[ ] months and up'. The 'Add' button is highlighted with a red arrow.

# Tennessee Immunization Information System (TennIIS)

## Medical Office User Quick Reference Guide

| Adding Vaccination Volume as Default   |  |
|--|--|
| 1) Open "Personal Settings" (see steps in <a href="#">Adding Vaccinator Name as Default</a> section).  |  |
| 2) Next to "Vaccine Default Volume", click the "+" to open the tab.  |    |
| 3) Select the appropriate "Vaccine" from the dropdown list.<br><br>Type in the "Dosage Default" in the space provided. Only type a number – TennIIS will automatically add the mL/cc unit.   |    |
| 4) Once you have made your selection, click the "Add" button to save your changes. Repeat these steps for each vaccine type.<br><br>Note: You can always override any default when adding an administered vaccine. Personal settings follow each user account. Each user must set up his/her unique personal settings. |  |

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