

# Immunization Records System User Guide



The Immunization Records (IR) system is an online application that provides nurses with the ability to efficiently view and document vaccinations. Prior to each event, participants will fill out an online vaccination consent form, complete an online profile, and receive an ID code. Participants should arrive at the event with their ID code ready for you.

## Devices

TotalWellness will provide one iPad per vaccination station. The iPads provided will be equipped with both cellular and wi-fi connectivity. All iPads will be sent to the primary contractor. When the primary contractor receives the supplies, the iPad(s) will be fully charged. It is the primary contractor's responsibility to make sure all devices are fully charged for the event. The primary contractor needs to take all iPad chargers with to the event, in case the devices need to be charged. Contractor(s) may use the iPad(s) plugged in or not, depending on outlet availability and battery charge levels.

## Updates

If the iPad prompts for an update prior or during an event, click later. Do NOT update. TotalWellness will take care of all updates.

## Power On & Unlock

Turn on your iPad. The power button is located on the top of the iPad. Press the home button (the circular button near the bottom of the screen) to unlock the iPad. There is no passcode.

Home Button:



## Internet Access

Each iPad should automatically connect to the internet, using cellular data, when turned on. If cellular data is not available, you can also connect to the client's wi-fi by clicking on the Settings icon, selecting the client's wi-fi network, and then entering the client's wi-fi password.

Settings Icon:



## Web Browser

Once connected to the internet, open Safari (web browser).

Safari Icon:



## IR Website

On the Safari homepage you should see a favorite called IR System. Click on this favorite or enter <https://ir.totalwellnesshealth.com/records/auth/signin> to access the IR System.

IR System Favorite:



## IR Login

You will be prompted to login, use the steps below:

### Step 1

Company Code – Enter your company code

Password – Enter the company password

### Step 2

Location – select from the dropdown

Access Code – varies depending on your location

Role – Select “Vaccinator” from the dropdown

### Step 3

#### Vaccinator

Vaccinator’s First Name – Enter your first name

Vaccinator’s Last Name – Enter your last name

Vaccinator’s Title – Enter your title (RN, LPN, etc.)

Supervisor – Leave blank

Vaccine Type – Select Influenza from dropdown

Vaccine Name – Select from dropdown

Vaccine Lot Number – Enter lot number

Vaccine Expiration Date – Enter expiration date (mm/dd/yyyy)

The information used on your login is stored within the session and will automatically be applied to the vaccinations you record.

## Vaccine Information

Vaccine information is always available on the screen. Click Change User to switch vaccinator, to update a vaccine name and/or to update a vaccine lot number.

Vaccination Clinic Details
<b>Location:</b> Training Location
<b>Date:</b> 08/16/2021
<b>Vaccinator:</b> Nurse Jane (RN)
<b>Vaccine:</b> Afluria (Seqirus) from Pre-Filled Syringe
<b>Dose:</b> 0.50
<b>Lot Number:</b> ABC123
<b>Expiration:</b> 06/30/2022
<b>Total Vaccinated:</b> 0
<a href="#">Change User</a> <a href="#">Sign Out</a>

# Record a Vaccination

Participants should arrive with their ID number.

## Participant Search


Scan the participant's barcode or enter the participant's ID number and click search.

### Create Vaccine Record

Search ID:

QR Code Scanner

IDLE



Request Camera Permissions

[Scan an Image File](#)

Search

Clear

## Consent Review

Review the consent and add any applicable notes.

NOTE: Consent answers are color coded.

Red = Stop – the participant is not eligible to receive the shot due to their answer.

Yellow = Caution – review the question with the participant to ensure they are a good candidate to receive the vaccination.

Green = Proceed

5. If female, are you pregnant?

Yes

No

6. Have you been sick or had a fever above 101°F in the last 3 days?

Yes

No

7. Have you ever had Guillain-Barré Syndrome (a severe paralytic illness)?

Yes

No

8. Have you had a physical exam in the past 12 months?

Yes

No

It is recommended that you complete a physical exam at least once per year.

Parent/Guardian Name:

Phone:

Consent Notes

## Vaccine Details

Select the injection site, select the dose number and add any notes. Click Process to save the record.

Vaccine Details ▼

Injection Site

Left Deltoid

Right Deltoid

Left Thigh

Right Thigh

Shot Number

Dose 1

Vaccinator Notes

Process

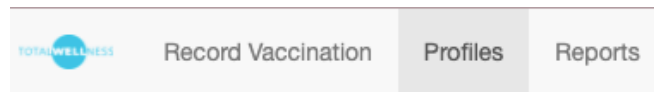
## Confirmation Message

Saved vaccination record successfully!



## Participant Search

If a participant cannot find their ID code, you can look them up by clicking on Profiles in the top menu. Click back on Record Vaccination to record vaccinations.



### Search Profiles

Use the search fields to find the participant's ID number. You do not have to use all of the search fields.

Search Profiles

First Name

Last Name

Date of Birth

ID Number

Phone

Email

Search

Clear

Add Profile

### View Profiles

The participant's ID code will display in the results table.

Name	DOB	ID Code	Appt Date	Appt Time	
Joe Smith	01/01/1990	000049	03/03/2021	09:00 AM	<a href="#">View</a>

If you would like to see additional details about the participant click on View. This will give you access to view and update consent answers, appointments, records, demographic information, and insurance information (if applicable).

## Adding a New Profile

Participants may arrive at the event without an ID code. We recommend that the participant visit their company's IR site to complete the online registration process using their own device. A flyer with a QR code to the company IR site will be included in your event shipment.

If a participant arrives without an ID code and they are unable to register on their own, you can create a profile for the participant. While on the Profiles tab, click on Add Profile.

### Step 1 – Personal Information

Enter the participant's personal information.

1. Personal Info

2. Insurance

3. Consent

4. Account Info

Company Code

FluTraining

First Name \*

Last Name \*

Date of Birth \*

Phone Number \*

Parent/Guardian of a minor under the age of 19 must be present with the minor child the entire vaccination appointment regardless of allergy status.

☐ Accept Texts \*

Sex \*

-- Select --

Race \*

-- Select --

Ethnicity \*

-- Select --

### Step 2 – Insurance

Enter the participant's insurance information, if applicable.

1. Personal Info

2. Insurance

3. Consent

4. Account Info

Do you have health insurance? \*

Yes

Insurance Provider

-- Select --

Provider Name \*

Member ID \*

Group ID \*

Primary Insured First Name \*

Primary Insured Last Name \*

Primary Insured Date of Birth \*

Relationship To Primary Insured \*

-- Select --

Primary Insured Employer

Card Front

No file chosen

Card Back

No file chosen

### Step 3 – Consent

Select the participant's answer to each question. Draw and Type options are available for the signature.

sponsoring company for participation and/or incentive purposes. I will share the information provided about my vaccination with my primary care provider.

#	Question
1.	Is this your first flu vaccination? <div><input type="button" value="Yes"/> <input type="button" value="No"/></div>
2.	Are you allergic to thimerosal, eggs, or egg products? <div><input type="button" value="Yes"/> <input type="button" value="No"/></div>
3.	Have you ever had an allergic or serious reaction to a past flu or other vaccination? <div><input type="button" value="Yes"/> <input type="button" value="No"/></div>
4.	Do you have any other severe allergies? <div><input type="button" value="Yes"/> <input type="button" value="No"/></div>
5.	If female, are you pregnant? <div><input type="button" value="Yes"/> <input type="button" value="No"/></div>

☒ Draw

☐ Type

Signature

Clear

### Step 4 - Account Info

Enter the participant's email if they have one. If they do not have an email, click Finish. You do not have to enter a password to proceed.

1. Personal Info

2. Insurance

3. Consent

4. Account Info

Email Address \*

Email Confirmation \*

Passwords must be at least 8 characters, have at least one digit ('0'-'9') and at least one uppercase ('A'-'Z').

Password \*

Password Confirmation \*

Previous

Finish

### Participant ID Code

The participant's ID Code will display in a green banner at the top of the screen.


Profile created with ID of: 81



# Participant ID Codes

After making a vaccination appointment, participants will be directed to complete an online profile and consent in the IR system. The participant will receive an ID code once they've successfully created their profile. The ID code is provided on the Welcome screen, in a confirmation email, and in a text message (if the participant accepts text messages).

## Welcome!



HomeRecordsAppointmentsFAQs

PROFILE | LOGOUT

### Welcome!

The TotalWellness Immunization Records System is where you can manage your immunization records, consent forms and insurance information.


Thank you for doing your part to get the COVID-19 pandemic under control.

REVIEW CONSENT FORM


### ID Code

TotalWellness uses ID codes to help create a safe and easy way to get vaccinated. Each participant has a unique code, and you will need to have this code to receive a vaccine. You also should have received an email with the code.

Print



#### Your ID Code



00000002

9320 H Court  
Omaha NE 68127  
402.548.4271 | IR@TOTALWELLNESSHEALTH.COM

Clinic Management  
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## Email

Message

DeleteArchive


ReplyReply All

Forward

MoveJunkRules

Read/UnreadCategorizeFollow Up

### IR Registration Confirmation

 noreply@totalwellnesshealth.com <norep... Friday, March 5, 2021 at 12:01 PM

To: Followup

Hello Bruce Banner!


Thanks for completing your Immunization Record profile.

Your ID Code is: 62

Bring this ID code to your vaccination appointment.

## Text

12:34



+1 (531) 301-8566

Mon, Mar 1, 9:45 AM

Hello TW Test Test!  
Thanks for completing your Immunization Record profile with TotalWellness.  
Your ID Code is: 4  
Bring this ID code to your vaccination appointment.

Do not reply to this automated text