



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Clinical Reminders

(PXRМ)

Implementation Guide

Version 2.0 Patch 1016
November 2025

Office of Information Technology
Division of Information Technology

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Preface

This documentation applies to those reminders distributed in v2.0, p1016 of Clinical Reminders.

1.0 Introduction

This guide was designed to supplement the patch installation notes and provide guidance in setting up the Clinical Reminders contained in the **PXRМ v2.0 p1016**. We strongly recommend reviewing this entire document before installing and setting up the **Clinical Reminders p1016**.

This guide is intended to be used by the following individuals who are responsible for installing, supporting, maintaining, and testing this package:

- Information Resources Management (IRM)
- Clinical Application Coordinator (CAC)

1.1 Clinical Reminders Resources

This guide is intended to be used by individuals who have previous experience with Clinical Reminders. Additional and more comprehensive information related to Clinical Reminders can be found in the following locations.

1.1.1 Reminder User Manual

A comprehensive guide to the Clinical Reminders application can be downloaded here: <https://www.ihs.gov/rpms/package/docs/PXRМ/pxrm020u.pdf>

Additional addendums and guides can be found here under VA Clinical Reminders: <https://www.ihs.gov/rpms/applications/clinical/>

1.1.2 Reminder Course Materials—Recorded Training Repository:

Search under Application—choose VA Clinical Reminders:
<https://www.ihs.gov/rpms/training/recording-and-material-library/>.

1.1.3 Clinical Reminders Office Hours:

Office hours are announced periodically on the EHR and Reminders Listservs.

1.1.4 Clinical Reminders Listserv:

Send a question to the EHR Reminders Listserv: [EHR Reminders Listserv Link](#).

2.0 What's New

This section provides an overview of what is being delivered in the **Clinical Reminders p1016**.

2.1 New Features

This patch contains:

New immunization reminder dialogs to streamline documentation.

- IHS-Adult Comprehensive Immunization Dialog
- IHS-Pediatric Comprehensive Immunization Dialog

New prompts to aid in immunization documentation.

- IMM ORDERED BY
- IMM VIS PRESENTED

New computed findings to aid in HTI-1 Certification process.

- IPL Problem Resolution Date
- Demographics Detail
- O2 Concentration
- Lab Result Status
- Medication Dose Unit
- SDOH Problems

Added the ability in a reminder dialog to support the documentation of split dose vaccines.

Updated reminder dialogs to honor user allocated security keys and parameter settings in RPMS. These key and parameters are utilized throughout EHR to delegate user privileges for data entry.

3.0 Installation Checklist

Review the patch notes and this guide. The following steps should be performed by the appropriate IRМ or CAC staff in the order that it is presented.

1. Install the **KIDS build** by appropriate IRМ personnel (see Install the KIDS Build).
2. Install the reminders in Reminder Exchange that will be used at the facility (see Install The Reminder).
3. Install, link, and enable the **dialogs**.
4. Configure the **Electronic Health Record** to display the reminders.
 - Sites may choose to activate the reminders just for specific individuals during a testing phase.
5. Review the installed reminders and dialogs (see Appendix A)

4.0 Review National Reminder Definitions

None for this patch.

5.0 National Reminder Dialogs

5.1 IHS-Peds Immunization Entry Template 2025

This dialog allows documentation of pediatric immunizations.

5.1.1 Peds Immunization Dialog Overview

It contains 7 sections (Figure 5-1); immunization due, visit vital signs, pediatric immunization screening questions, immunization administration, patient education, patient advisement and CPT vaccine administration.

The dialog was designed for use as is or for copying sections or subsection of each group and incorporating these sections or pieces into local immunization documentation reminders dialogs. All immunization vaccines and administration codes have been updated with the most current values. Site can also edit the national reminder dialog and remove any vaccines the site does not provide. Keep in mind that when you edit the national reminder, you are changing the original format. However, you can restore the dialog to its original design by re-installing the reminder dialog from the exchange and selecting **overwrite** when prompted. We encourage sites to copy the reminder and then edit to site's specifications if customization is desired.

Reminder Dialog Template: IHS-PEDS IMMUNIZATION ENTRY TEMPLATE 2025

☐ ADULT DEMO is a 45 FEMALE presenting today for an immunization update.

☐ =====

IMMUNIZATION(S) DUE

=====

Immunizations Due: Tdap (past due)
 HEP B,NOS (due)
 FLU,NOS (due)
 PNEUMO-PS (due)

☐ =====

VISIT VITALS

=====

Click here to include vital signs entered during triage into your notes or to enter vital signs using this dialog.

☐ =====

PEDIATRIC IMMUNIZATIONS SCREENING

=====

☐ =====

IMMUNIZATION(S) ADMINISTRATION

=====

Code	Label
999	Unknown
V01	VFC - Not Eligible
V02	VFC - Medicaid (<19 yrs old only)
V03	VFC - Uninsured (<19 yrs old only)
V04	VFC - Am Indian/AK Native (<19 yrs old only) *Most common code in IHS facilities*
V05	VFC - Federally Qualified Health center patient - underinsured (<19 yrs old only)
V06	State specific eligibility (Do not use per CDC HL7 Guide 2.5.1)
V07	Local specific eligibility

The following immunization(s) were administered to the patient. ☐ Per standing order. ☐ Per provider order.

☐ =====

PATIENT EDUCATION

=====

☐ =====

PATIENT ADVISEMENT

=====

DEMO,ADULT ALPHA has been advised of possible side effects (rash/hives, nausea, difficulty breathing, redness, pain, fever) and given the following instructions:

1. After leaving the clinic area, if any side effects are experienced notify your provider.
2. If any urgent or emergent problems are experienced after leaving the clinic area, report to the nearest emergency room or call 911.

VIS for vaccines administration given to patient/caregiver.

☐ =====

CPT CODES FOR VACCINE ADMINISTRATION

=====

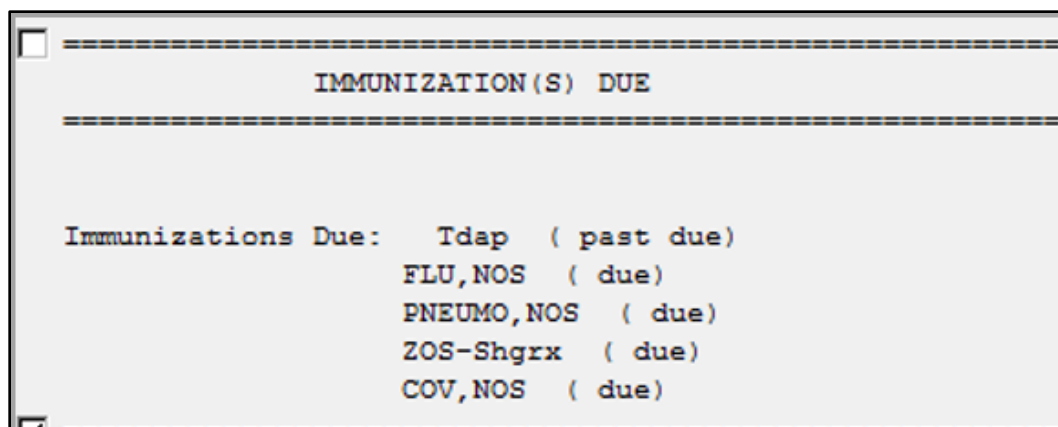
* Indicates a Required Field

Finish Cancel

Figure 5-1: Peds Immunization dialog Overview

5.2 Immunization Due

This section (Figure 5-2) pulls forecasting information from RPMS.



```

=====
IMMUNIZATION(S) DUE
=====

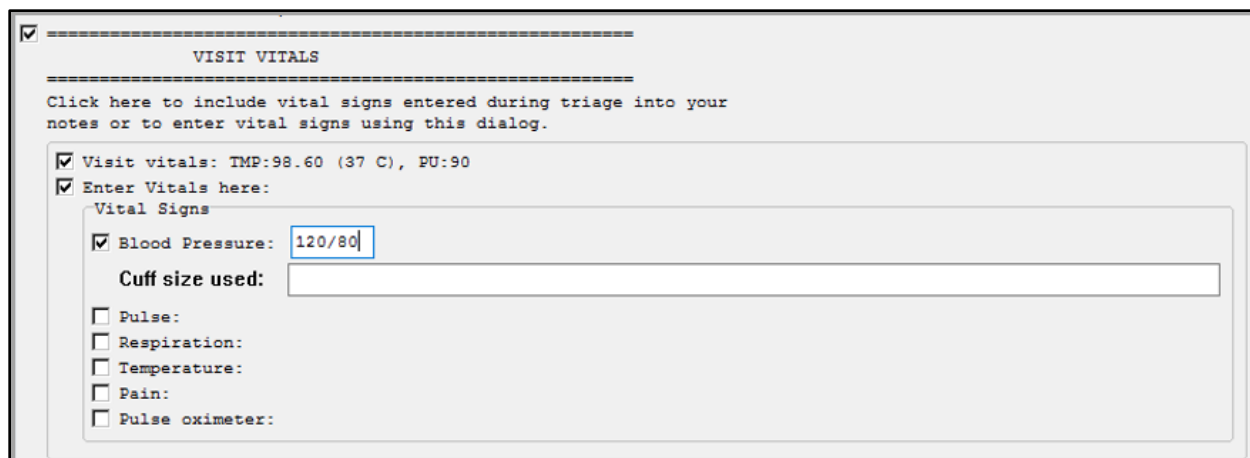
Immunizations Due:  Tdap  ( past due)
                   FLU,NOS  ( due)
                   PNEUMO,NOS  ( due)
                   ZOS-Shgrx  ( due)
                   COV,NOS  ( due)

```

Figure 5-2: Immunization Due

5.2.1 Visit Vitals

This section pulls into the template any visit vitals documented prior to initiating the dialog. If a user has not entered any vitals for this visit, the user can use this section to enter visit vitals or add additional vitals to the visit.



```

=====
VISIT VITALS
=====
Click here to include vital signs entered during triage into your
notes or to enter vital signs using this dialog.

☒ Visit vitals: TMP:98.60 (37 C), PU:90
☒ Enter Vitals here:
    Vital Signs
    ☒ Blood Pressure: 120/80
    Cuff size used: 
    ☐ Pulse:
    ☐ Respiration:
    ☐ Temperature:
    ☐ Pain:
    ☐ Pulse oximeter:

```

Figure 5-3: Visit Vital section

5.2.2 Pediatric Immunization Screening

This section contains the pediatric screening checklist and weblink to the screening questionnaire (Figure 5-4) from Immunize.org, which was also delivered with **PXRМ 1015** patch. If you are using the PXRМ 1015 version of this questionnaire you can continue doing so since both screening forms are identical. At any time between releases of **PXRМ** patches, Immunize.org may update their screening questionnaire and the dialog would need to be edited to reflect the update if desired.

Reminder Dialog Template: IHS-PEDS IMMUNIZATION ENTRY TEMPLATE 2025

☒ Screening checklist for contraindications to vaccines for children and teens

1. Is the child sick today?
☐ Yes ☐ No ☐ Don't Know
2. Does the child have any allergies to medicine, food, a vaccine component or latex?
☐ Yes ☐ No ☐ Don't Know
3. Has the child had a serious reaction to vaccine in the past?
☐ Yes ☐ No ☐ Don't Know
4. Does the child have any long-term health problem with heart, lung (including asthma), kidney, liver, nervous system, or metabolic disease (e.g., diabetes), a blood disorder, no spleen, a cochlear implant, or a spinal fluid leak? Are they taking regular aspirin or salicylate medication?
☐ Yes ☐ No ☐ Don't Know
5. For children age 2 through 4 years: has a healthcare provider told you that the child had wheezing or asthma in the past 12 months?
☐ Yes ☐ No ☐ Don't know ☐ N/A
6. For babies: Have you ever been told the child has intussusception?
☐ Yes ☐ No ☐ Don't know ☐ N/A
7. Has the child, a sibling, or a parent has seizure; has the child had brain or other nervous system problem?
☐ Yes ☐ No ☐ Don't Know
8. Has the child ever been diagnosed with a heart condition (myocarditis or pericarditis) or have they had Multisystem Inflammatory Syndrome (MIS-C) after an infection with the virus that causes COVID-19?
☐ Yes ☐ No ☐ Don't Know
9. Does the child have an immune-system problem such as cancer, leukemia, HIV/AIDS?
☐ Yes ☐ No ☐ Don't Know
10. In the past 6 months, has the child taken medications that affect the immune system such as prednisone, other steroids, or anticancer drugs; drugs to treat rheumatoid arthritis, Crohn's disease, psoriasis, or had radiation treatments?
☐ Yes ☐ No ☐ Don't Know
11. Does the child's parents or sibling have an immune system problem?
☐ Yes ☐ No ☐ Don't Know
12. In the past year, has the child received immune (gamma) globulin, blood/blood products or an antiviral drug?
☐ Yes ☐ No ☐ Don't Know
13. Is the child/teen pregnant?
☐ Yes ☐ No ☐ Don't Know
14. Has the child received vaccinations in the past 4 weeks?
☐ Yes ☐ No ☐ Don't Know
15. Has the child ever felt dizzy or faint before, during, or after a shot?
☐ Yes ☐ No ☐ Don't Know
16. Is the child anxious about getting a shot today?
☐ Yes ☐ No ☐ Don't Know

Screening Checklist Date: 12/15/2023 <https://www.immunize.org/wp-content/uploads/catg.d/p4060.pdf>
Click link for the CDC immunization guide and recommendations for children.
<http://www.cdc.gov/vaccines/imz-schedules/child-easyread.html>

Figure 5-4: Pediatric screening questions

5.2.3 Immunization(s) Administration

This section contains a list of all routinely recommended immunizations (Figure 5-5) that can be given for patients from birth to 18 y/o according to the CDC as of May 2025. In this dialog we included a legend defining VAC eligibility codes. We purposely designed this dialog to contain no defaults for VAC eligibility field. Users will need to refer to the legend for selecting the correct code for that patient. This legend was intended as display only text and will not be part of the final note.

Code	Label
999	Unknown
V01	VFC - Not Eligible
V02	VFC - Medicaid (<19 yrs old only)
V03	VFC - Uninsured (<19 yrs old only)
V04	VFC - Am Indian/AK Native (<19 yrs old only) *Most common code in IHS facilities*
V05	VFC - Federally Qualified Health center patient - underinsured (<19 yrs old only)
V06	State specific eligibility (Do not use per CDC HL7 Guide 2.6.1)
V07	Local specific eligibility

The following immunization(s) were administered to the patient. ☐ Per standing order. ☐ Per provider order.

- ☐ Covid-19 Vaccine
- ☐ DTaP vaccine
- ☐ Hepatitis A (Hep A) ped/adolescent vaccine
- ☐ Hepatitis B (Hep B) ped/adolescent vaccine
- ☐ Haemophilus influenza type B (HIB) vaccine
- ☐ Human Papillomavirus (HPV9) vaccine
- ☐ Influenza (flu) vaccine
- ☐ Meningococcal vaccine
- ☐ Measles, mumps, and rubella (MMR) vaccine
- ☐ Pneumococcal vaccine
- ☐ Polio vaccine
- ☐ Respiratory Syncytial Virus (RSV) vaccine
- ☐ Rotavirus vaccine
- ☐ Tdap vaccine
- ☐ Varicella vaccine
- ☐ Combination vaccine products

Figure 5-5: Immunization Administration

When selecting an immunization, user will be required to enter all necessary fields (Figure 5-6); Lot number, Imm site, injection volume (if not defaulted from the immunization package), ordered by, VAC eligibility, Vacc info sheets date (defaulted from immunization package), and VIS presented date (defaulted from immunization package). Only the **Admin Note** prompt is optional.

☒ DTaP vaccine

☐ Patient received Tdap INFANRIX vaccine (CVX 20) at this visit. Administer for younger than 7 years old

Lot Number: * (None selected) ▼

Imm Site: * (None selected) ▼

Injection Volume: * 0.50 ▼

Ordered By: * (None selected) ▼

VAC Eligibility: * (None selected) ▼

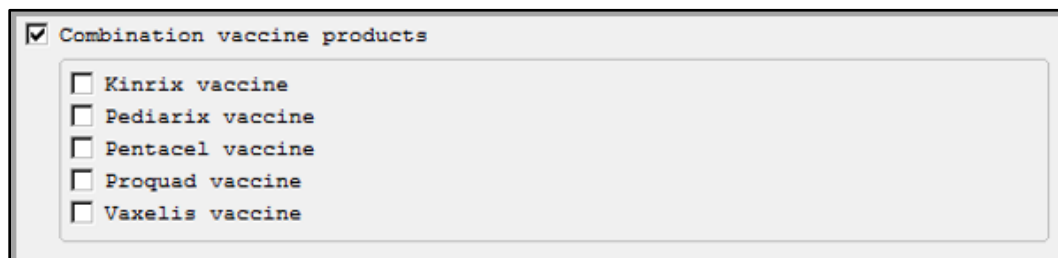
Vacc Info Sheet Date: * 24-Jul-2023 ...

VIS Presented Date: * 12-May-2025 ...

Admin Notes:

Figure 5-6: Example Immunization Administered during visit

The pediatric dialog also contains combination vaccine products (Figure 5-7). If the site does not use combo products, this section can be removed from the dialog itself (See Appendix C for more details). We recommend that you copy the national reminder and edit into a local reminder dialog if you want to keep the original reminder dialog intact. However, if you do edit the national reminder and would like to restore the dialog to its original form, you can re-import dialog from the exchange. Select the overwrite when prompted to restore to original released version.



☒ **Combination vaccine products**

- ☐ Kinrix vaccine
- ☐ Pediarix vaccine
- ☐ Pentacel vaccine
- ☐ Proquad vaccine
- ☐ Vaxelis vaccine

Figure 5-7: Combination Vaccines

5.2.4 Patient Education

This section contains 5 immunization education topics (Figure 5-8); immunization literature, follow up care, immunization deficiency, information, schedule and prevention.



☒ **PATIENT EDUCATION**

☒ Information provided on Vaccination.

Level of Understanding: * Good Education duration: 1

Readiness to Learn: (None selected)

Comment

☒ Information provided on benefits, side effects and post immunization care

Level of Understanding: * Good Education duration: 1

Readiness to Learn: (None selected)

Comment

☒ Information provided on importance of following required schedule for vaccinations

Level of Understanding: * Good Education duration: 1

Readiness to Learn: (None selected)

Comment

☒ Information provided on importance of being current on immunizations

Level of Understanding: * Good Education duration: 0

Readiness to Learn: (None selected)

Comment

☒ Information provided on how immunizations control communicable diseases

Level of Understanding: * Good Education duration: 0

Readiness to Learn: (None selected)

Comment

☒ Information provided on follow-up Care

Level of Understanding: * Good Education duration: 0

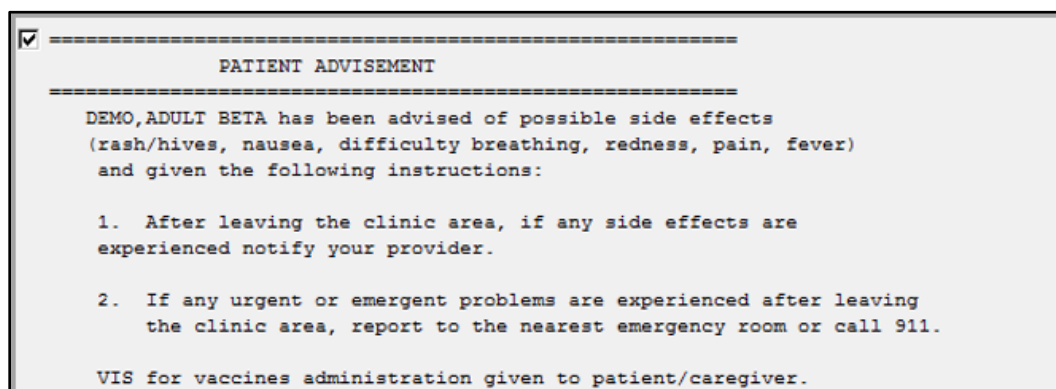
Readiness to Learn: (None selected)

Comment

Figure 5-8: Patient Education

5.2.5 Patient Advisement

This section contains instructions to patients (Figure 5-9) about possible side effects and instructions if patient experiences any problems with the injection site.



☒ =====

PATIENT ADVISEMENT

=====

DEMO, ADULT BETA has been advised of possible side effects
(rash/hives, nausea, difficulty breathing, redness, pain, fever)
and given the following instructions:

1. After leaving the clinic area, if any side effects are experienced notify your provider.
2. If any urgent or emergent problems are experienced after leaving the clinic area, report to the nearest emergency room or call 911.

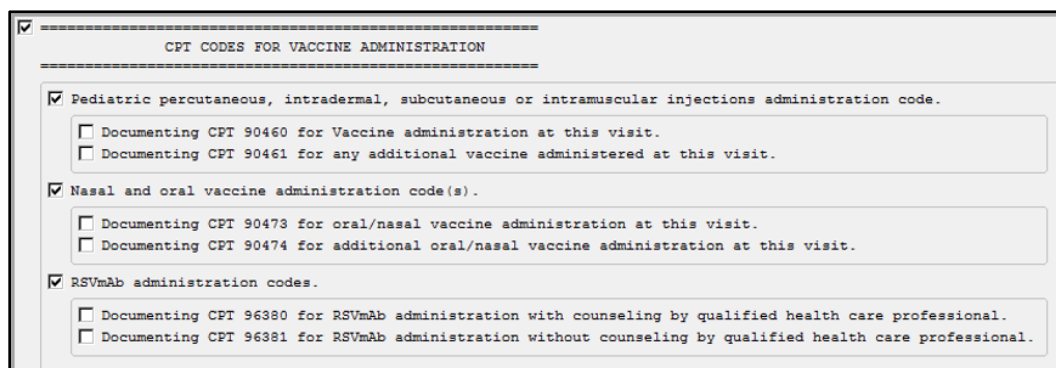
VIS for vaccines administration given to patient/caregiver.

Figure 5-9: Patient Advisement

5.2.6 CPT Codes for Vaccine Administration

This section contains all possible CPT codes (Figure 5-10) for pediatric immunization administration. CPT code **90461** or code **90474** and code **96381** are designed to allow users to add quantities when appropriate. Instructions were included to help with code selection and when quantities should be entered.

CPT codes:



☒ =====

CPT CODES FOR VACCINE ADMINISTRATION

=====

☒ Pediatric percutaneous, intradermal, subcutaneous or intramuscular injections administration code.

☐ Documenting CPT 90460 for Vaccine administration at this visit.

☐ Documenting CPT 90461 for any additional vaccine administered at this visit.

☒ Nasal and oral vaccine administration code(s).

☐ Documenting CPT 90473 for oral/nasal vaccine administration at this visit.

☐ Documenting CPT 90474 for additional oral/nasal vaccine administration at this visit.

☒ RSVmAb administration codes.

☐ Documenting CPT 96380 for RSVmAb administration with counseling by qualified health care professional.

☐ Documenting CPT 96381 for RSVmAb administration without counseling by qualified health care professional.

Figure 5-10: CPT codes

5.3 IHS-Adult Immunization Entry Template 2025

This dialog allows documentation of adult immunizations.

5.3.1 Adult Immunization Dialog Overview

It contains 7 sections; Immunization due, visit vital signs, immunization screening questions, Immunization administration, patient education, patient advisement and CPT vaccine administration.

The adult immunization dialog follows the same format as the pediatric immunization reminder dialog. This dialog (Figure 5-11) was designed for use as is or for copying sections or subsection of each group and incorporating these pieces into local immunization reminders. All immunization vaccines and administration codes have been updated with the most current values. Site can also edit the national reminder and remove any vaccines the site does not have on stock. Keep in mind that when you edit the national reminder, you are changing the original format. However, you can restore the dialog to its original design by re-installing the reminder from the exchange and selecting **overwrite** when prompted. We encourage sites to copy the reminder and then edit to site's specifications.

Reminder Dialog Template: IHS-ADULT IMMUNIZATION ENTRY TEMPLATE 2025

☐ ADULT DEMO is a 45 FEMALE presenting today for an immunization update.

☐ IMMUNIZATION(S) DUE

Immunizations Due: Tdap (past due)
 HEP B,NOS (due)
 FLU,NOS (due)
 PNEUMO-PS (due)

☐ VISIT VITALS

Click here to include vital signs entered during triage into your notes or to enter vital signs using this dialog.

☐ IMMUNIZATION SCREENING

☐ IMMUNIZATION(S) ADMINISTRATION

Code	Label
999	Unknown
V01	VFC - Not Eligible
V02	VFC - Medicaid (<19 yrs old only)
V03	VFC - Uninsured (<19 yrs old only)
V04	VFC - Am Indian/AK Native (<19 yrs old only) *Most common code in IHS facilities*
V05	VFC - Federally Qualified Health center patient - underinsured (<19 yrs old only)
V06	State specific eligibility (Do not use per CDC HL7 Guide 2.5.1)
V07	Local specific eligibility

The following immunization(s) were administered to the patient. ☐ Per standing order. ☐ Per provider order.

☐ PATIENT EDUCATION

☐ PATIENT ADVISEMENT

DEMO,ADULT ALPHA has been advised of possible side effects (rash/hives, nausea, difficulty breathing, redness, pain, fever) and given the following instructions:

1. After leaving the clinic area, if any side effects are experienced notify your provider.
2. If any urgent or emergent problems are experienced after leaving the clinic area, report to the nearest emergency room or call 911.

VIS for vaccines administration given to patient/caregiver.

☐ CPT CODES FOR VACCINE ADMINISTRATION

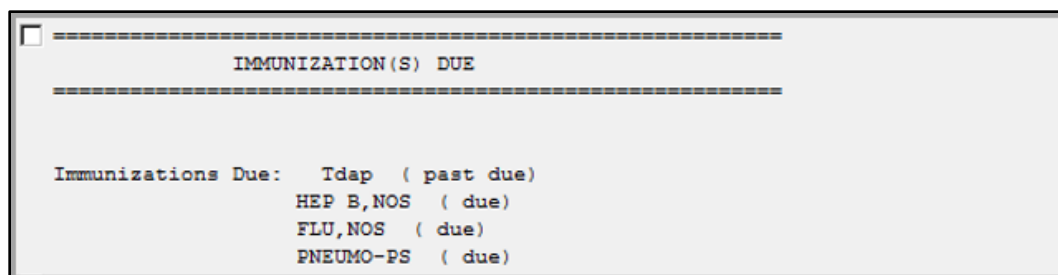
* Indicates a Required Field

Finish Cancel

Figure 5-11: Dialog overview

5.4 Immunization Due

This section pulls information (Figure 5-12) from the forecaster in RPMS.



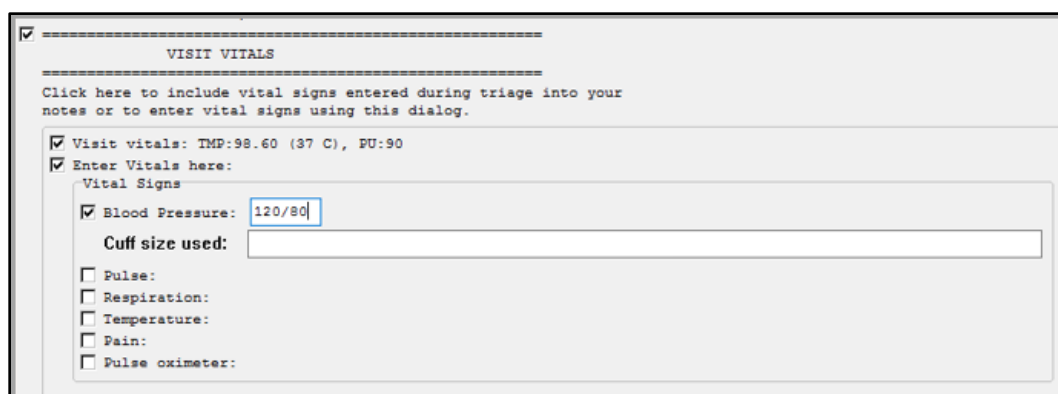
☐ IMMUNIZATION(S) DUE

Immunizations Due: Tdap (past due)
HEP B,NOS (due)
FLU,NOS (due)
PNEUMO-PS (due)

Figure 5-12: Immunization(s) Due

5.4.1 Visit Vitals

This section (Figure 5-13) pulls into the template any visit vitals documented prior to initiating the dialog. If a user has not entered any vitals for the visit, user can use this section to enter visit vitals or to add additional vitals to the visit.



☒ VISIT VITALS

Click here to include vital signs entered during triage into your notes or to enter vital signs using this dialog.

☒ Visit vitals: TMP:98.60 (37 C), PU:90

☒ Enter Vitals here:

Vital Signs

☒ Blood Pressure: 120/80

Cuff size used:

☐ Pulse:

☐ Respiration:

☐ Temperature:

☐ Pain:

☐ Pulse oximeter:

Figure 5-13: Visit Vitals

5.4.2 Immunization Screening

This section contains the adult screening questionnaire (Figure 5-14) and weblink to the screening questions from immunize.org, which was also delivered with **PXRМ 1015** patch. If you are using the **PXRМ 1015** version of this questionnaire you can continue doing so since both screening forms are identical. At any time between releases of PXRМ patches, Immunize.org may update their screening questionnaire and the dialog would need to be edited to reflect the update if desired.

☒

IMMUNIZATION SCREENING

☒ Screening Checklist for Vaccines

- Are you feeling sick today?
☐ Yes ☐ No ☐ Don't Know
- Do you have allergies to medications, food a vaccine component, or latex?
☐ Yes ☐ No ☐ Don't Know
- Have you ever had a serious reaction after receiving a vaccine?
☐ Yes ☐ No ☐ Don't Know
- Do you have any of the following: a long-term health problem with heart, lung, kidney, or metabolic disease (e.g., diabetes), asthma, a blood disorder, no spleen, a cochlear implant, or spinal fluid leak?
☐ Yes ☐ No ☐ Don't Know
- Are you on long-term aspirin therapy?
☐ Yes ☐ No ☐ Don't Know
- Do you have cancer, leukemia, HIV/AIDS, or any other immune system problem?
☐ Yes ☐ No ☐ Don't Know
- Do you have a parent, brother, or sister with an immune system problem?
☐ Yes ☐ No ☐ Don't Know
- In the past 6 months, have you taken medications that affect your immune system, such as prednisone, other steroids, or anticancer drugs; drugs for the treatment of rheumatoid arthritis, Crohn's disease, or psoriasis; or have you had radiation treatments?
☐ Yes ☐ No ☐ Don't Know
- Have you had a seizure or a brain or other nervous system problem?
☐ Yes ☐ No ☐ Don't Know
- Have you ever been diagnosed with heart condition (myocarditis or pericarditis) or have you had Multisystem Inflammatory Syndrome (MIS-A or MIS-C) after an infection with the virus that causes COVID-19?
☐ Yes ☐ No ☐ Don't Know
- In the past year, have you received immune (gamma) globulin, blood or blood products, or an antiviral drug?
☐ Yes ☐ No ☐ Don't Know
- Are you pregnant?
☐ Yes ☐ No ☐ Don't Know
- Have you received any vaccination in the past 4 weeks?
☐ Yes ☐ No ☐ Don't Know
- Have you ever felt dizzy or faint before, during or after a shot?
☐ Yes ☐ No ☐ Don't Know
- Are you anxious about getting a shot today?
☐ Yes ☐ No ☐ Don't Know

Screening Checklist Date: 11/6/2023 <https://www.immunize.org/wp-content/uploads/catg.d/p4066.pdf>
Click link for the CDC immunization guide and recommendations for adults.
<http://www.cdc.gov/vaccines/hcp/ims-schedules/adult-age.html>

Figure 5-14: Adult screening questions

5.4.3 Immunization(s) Administration

This section contains a list of CDC recommended immunizations (Figure 5-15) that can be given to an adult patient as of May 2025. In this dialog we included a legend defining VAC eligibility codes. We purposely designed this dialog to contain no defaults for VAC eligibility field. Users will need to refer to the legend for selecting the correct code for that patient. This legend is intended for display only and will not be part of the final note.

☒ IMMUNIZATION(S) ADMINISTRATION

Code	Label
999	Unknown
V01	VFC - Not Eligible
V02	VFC - Medicaid (<19 yrs old only)
V03	VFC - Uninsured (<19 yrs old only)
V04	VFC - Am Indian/AK Native (<19 yrs old only) *Most common code in IHS facilities*
V05	VFC - Federally Qualified Health center patient - underinsured (<19 yrs old only)
V06	State specific eligibility (Do not use per CDC HL7 Guide 2.5.1)
V07	Local specific eligibility

The following immunization(s) were administered to the patient. ☐ Per standing order. ☐ Per provider order.

☐ Covid-19 vaccine
☐ Hepatitis A Vaccine
☐ Hepatitis B vaccine
☐ Human Papillomavirus (HPV) vaccine
☐ Influenza (flu) vaccine
☐ Meningococcal vaccine
☐ MMR vaccine
☐ Mpox vaccine
☐ Polio vaccine
☐ Pneumococcal vaccine
☐ Respiratory Syncytial Virus Infection (RSV) vaccine
☐ Tetanus and diphtheria toxoid vaccine
☐ Tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccines
☐ Varicella vaccine
☐ Zoster vaccine

Figure 5-15: Immunization(s) Administration

When selecting an immunization, user will be required to enter all necessary fields (Figure 5-16); Lot number, Imm site, injection volume (if not defaulted from the immunization package), ordered by, VAC eligibility, Vacc info sheets date (defaulted from immunization package), and VIS presented date (defaulted from immunization package). Only the **Admin Note** prompt is optional.

☒ Hepatitis A Vaccine

☐ Patient received Hepatitis A vaccine (CVX 52) at this visit.

Lot Number: * (None selected)
 Imm Site: * (None selected)
 Injection Volume: * 1.00
 Ordered By: * (None selected)
 VAC Eligibility: * (None selected)
 Vacc Info Sheet Date: * 31-Jan-2025 ...
 VIS Presented Date: * 14-May-2025 ...
 Admin Notes:

Figure 5-16: Example immunization administered during visit

5.4.4 Patient Education

This section (Figure 5-17) contains 5 immunization education topics; immunization literature, follow up care, immunization deficiency, information, schedule and prevention.

☒ =====
 PATIENT EDUCATION
 =====

☒ Information provided on Vaccination.
 Level of Understanding: * Good Education duration: 1
 Readiness to Learn: (None selected)
 Comment

☒ Information provided on benefits, side effects and post immunization care
 Level of Understanding: * Good Education duration: 1
 Readiness to Learn: (None selected)
 Comment

☒ Information provided on importance of following required schedule for vaccinations
 Level of Understanding: * Good Education duration: 1
 Readiness to Learn: (None selected)
 Comment

☒ Information provided on importance of being current on immunizations
 Level of Understanding: * Good Education duration: 0
 Readiness to Learn: (None selected)
 Comment

☒ Information provided on how immunizations control communicable diseases
 Level of Understanding: * Good Education duration: 0
 Readiness to Learn: (None selected)
 Comment

☒ Information provided on follow-up Care
 Level of Understanding: * Good Education duration: 0
 Readiness to Learn: (None selected)
 Comment

Figure 5-17: Patient Education

5.4.5 Patient Advisement

This section (Figure 5-18) contains instructions to patients about possible side effects and instructions if patient experiences any problems with an injection site.

☒ =====
 PATIENT ADVISEMENT
 =====

DEMO, ADULT BETA has been advised of possible side effects
 (rash/hives, nausea, difficulty breathing, redness, pain, fever)
 and given the following instructions:

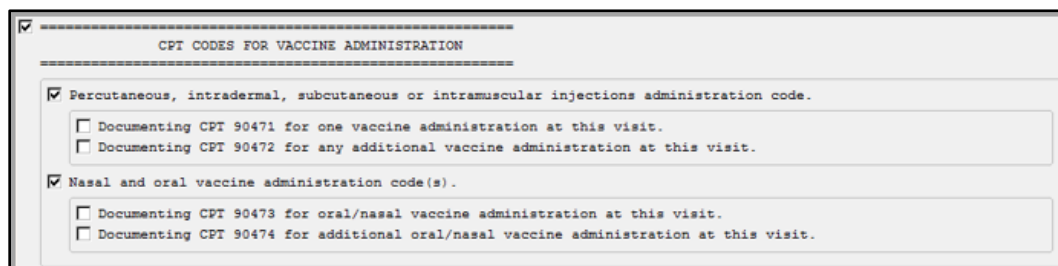
1. After leaving the clinic area, if any side effects are experienced notify your provider.
2. If any urgent or emergent problems are experienced after leaving the clinic area, report to the nearest emergency room or call 911.

VIS for vaccines administration given to patient/caregiver.

Figure 5-18: Patient Advisement

5.4.6 CPT Codes for Vaccine Administration

This section contains possible CPT codes (Figure 5-19) for immunization. CPT code **90472** and code **90474** are designed to allow users to add quantities when appropriate. Read-only instructions are included to help with code selection and when quantities should be entered.



The screenshot shows a dialog box titled "CPT CODES FOR VACCINE ADMINISTRATION". It contains two main sections, each with a checked checkbox and a list of unchecked checkboxes. The first section is "Percutaneous, intradermal, subcutaneous or intramuscular injections administration code." and the second is "Nasal and oral vaccine administration code(s)".

☒ CPT CODES FOR VACCINE ADMINISTRATION

☒ Percutaneous, intradermal, subcutaneous or intramuscular injections administration code.

- ☐ Documenting CPT 90471 for one vaccine administration at this visit.
- ☐ Documenting CPT 90472 for any additional vaccine administration at this visit.

☒ Nasal and oral vaccine administration code(s).

- ☐ Documenting CPT 90473 for oral/nasal vaccine administration at this visit.
- ☐ Documenting CPT 90474 for additional oral/nasal vaccine administration at this visit.

Figure 5-19: CPT Codes

6.0 Install the KIDS Build

The installation of **PXRМ p1016** should be done by the appropriate IRМ personnel using the instructions in the patch notes.

Installation of **p1016** will put the reminders into the **REMINDER EXCHANGE** file. It does **NOT** install them. The new reminders will not work until they are installed and activated.

7.0 Install the Reminder

Follow these instructions to install the national reminders. The Clinical Application Coordinator (CAC) or other designated person should then install them using **REMINDER EXCHANGE**.

7.1 Programmer Access

Programmer access is required to install the reminders that contain a new, computed finding. If you do not have programmer access (**@ level FileMan access**) you will see the following messages (Figure 7-1) when you are installing reminders that contain a new computed finding:

Only programmers can install routines
Only programmers can install Reminder Computed Findings

Figure 7-1: Reminder Installation messages screen

If there are no new computed findings packed in the reminder then ignore the message and continue through the installation process. If the computed finding was previously installed there will be an **X** under the column **Exists** on the right of the Reminder Computed Finding in the Reminder Exchange. (Figure 7-2).

Exchange File Components May 14, 2025 15:29:55 Page: 3 of 12

Component	Category	Exists
Components:		
TIU TEMPLATE FIELD		
1 IHS-1ST/2ND/3RD/ADDITIONAL		X
2 IHS-IMMUNIZATION ORDER PROMPT		X
3 IHS VFC ELIG LEYEND		X
4 IHS ADULT IMMUNIZATION SCHEDULE		X
5 IHS COVID ADULT SCREENING CHECKLIST 042524		X
6 IHS YES/NO/DON'T KNOW		X
7 IHS VITAL ENTRY INST		X
MEASUREMENT TYPE		
BP		X
O2		X
PA		X
TMP		X

+ + Next Screen - Prev Screen ?? More Actions >>>

IA Install all Components IS Install Selected Component

Select Action: Next Screen//

Figure 7-2: Reminder components in exchange screen

If there are new computed findings and the CAC does not have **@** access, follow these steps to complete the installation:

1. Ask the site manager or other personnel who has **Programmer Access** to login under their credentials.
2. Navigate to the **Reminder Exchange** and use **Install Selected (IS)**.

3. Install the new **Computed Findings** following the instructions in the next section.

Important: NEVER OVERWRITE A ROUTINE!

After the **Computed Findings** are installed, the CAC may then install the new reminders.

7.2 Installing the Reminder

1. Select **Reminder Exchange** from the **Reminder Configuration** menu. You will be presented with a list (Figure 7-3) of packed reminders that reside in the RPMS file system.

Clinical Reminder Exchange May 14, 2025 15:31:13 Page: 1 of 3			
Exchange File Entries.			
Item	Entry	Source	Date Packed
1	IHS-ADULT IMMUNIZATION ENTRY TEMPLATE 2025	RAPOPORT@2017 DEMO CL	04/10/2025@13:50
2	IHS-PEDS IMMUNIZATION ENTRY TEMPLATE 2025	RAPOPORT@2017 DEMO CL	04/10/2025@13:50
3	TEST-IHS NEWLY ADDED MEASUREME NT ENTRY	MOSELY@2017 DEMO CL	04/23/2025@13:07
4	TEST-IHS-CPT ENTRY	MOSELY@2017 DEMO CL	04/22/2025@11:30
5	TEST-IHS-DEMOGRAPHIC DETAILS	MOSELY@2017 DEMO CL	04/23/2025@13:15
6	TEST-IHS-E&M ENTRY	MOSELY@2017 DEMO CL	04/23/2025@13:08
7	TEST-IHS-EXAM ENTRY	MOSELY@2017 DEMO CL	04/23/2025@13:45
+ Next Screen - Prev Screen ?? More Actions >>>			
CFE	Create Exchange File Entry	LHF	Load Host File
CHF	Create Host File	LMM	Load MailMan Message
CMM	Create MailMan Message	LR	List Reminder Definitions
DFE	Delete Exchange File Entry	LWH	Load Web Host File
IFE	Install Exchange File Entry	RI	Reminder Definition Inquiry
IH	Installation History		
Select Action: Next Screen// █			

Figure 7-3: List of reminders in Reminder Exchange

Tip: Use the **Up** and **Down** arrows to scroll through the list. If you are searching for a specific reminder, use the command **SL** (Figure 7-4) to search for the reminder name.

Select Action: Next Screen// SL
Search for: //IHS-PEDS IMMUNIZATION

Figure 7-4: Further Instructions

2. Select **IFE–Install Exchange File Entry** to install the reminder.
3. Enter the **number** of the reminder (Figure 7-5) to install.

Clinical Reminder Exchange May 14, 2025 15:31:13 Page: 1 of 3
Exchange File Entries.

Item	Entry	Source	Date Packed
1	IHS-ADULT IMMUNIZATION ENTRY TEMPLATE 2025	RAPOPORT@2017 DEMO CL	04/10/2025@13:50
2	IHS-PEDS IMMUNIZATION ENTRY TEMPLATE 2025	RAPOPORT@2017 DEMO CL	04/10/2025@13:50
3	TEST-IHS NEWLY ADDED MEASUREME NT ENTRY	MOSELY@2017 DEMO CL	04/23/2025@13:07
4	TEST-IHS-CPT ENTRY	MOSELY@2017 DEMO CL	04/22/2025@11:30
5	TEST-IHS-DEMOGRAPHIC DETAILS	MOSELY@2017 DEMO CL	04/23/2025@13:15
6	TEST-IHS-E&M ENTRY	MOSELY@2017 DEMO CL	04/23/2025@13:08
7	TEST-IHS-EXAM ENTRY	MOSELY@2017 DEMO CL	04/23/2025@13:45

+ Next Screen - Prev Screen ?? More Actions >>>

CFE	Create Exchange File Entry	LHF	Load Host File
CHF	Create Host File	LMM	Load Mailman Message
CMM	Create Mailman Message	LR	List Reminder Definitions
DFE	Delete Exchange File Entry	LWH	Load Web Host File
IFE	Install Exchange File Entry	RI	Reminder Definition Inquiry
IH	Installation History		

Select Action: Next Screen// IFE Install Exchange File Entry
Enter a list or range of numbers (1-16): 2

Figure 7-5: Installing Reminders dialog

- Use the **Up** and **Down** arrows to view the individual components of the reminder.

Before starting an installation, you should examine the list of components in the packed reminder (Figure 7-6) and determine which ones already exist on your system. You should decide what to do with each component and have a plan of action.

TIU TEMPLATE FIELD		
1	IHS PEDS IMMUNIZATION GUIDE AND RECOM 2025	X
2	IHS COVID CHILD SCREENING CHECKLIST 042024	X
3	IHS YES/NO/N/A NOT REQ	X
4	IHS YES/NO/DON'T KNOW	X
5	IHS PED COMBO VACCINE	X
6	IHS-DTAP CVX 20 INSTRUCTIONS	X
7	IHS-1ST/2ND/3RD/ADDITIONAL	X
8	IHS-IMMUNIZATION ORDER PROMPT	X
9	IHS VFC ELIG LEYEND	X
10	IHS VITAL ENTRY INST	X
MEASUREMENT TYPE		
	BP	X
	O2	X
	PA	X
	TMP	X
	RS	X
	PU	X
EDUCATION TOPICS		
	IM-FOLLOW-UP	X
	IM-PREVENTION	X
	IM-DEFICIENCY	X
	IM-INFORMATION	X
	IM-LITERATURE	X
	IM-SCHEDULE	X
IMMUNIZATION		
	DTaP,IPV,Hib,HepB	X
	MMRV	X
	DTaP-Hib-IPV	X
	DTaP-Hep B-IPV	X

Figure 7-6: List of components in reminder

- Proceeding with the **installation** (Figure 7-7).

Exchange File Components		May 14, 2025 15:37:15	Page: 3 of 14
+ Component	Category	Exists	
Components:			
TIU TEMPLATE FIELD			
1	IHS PEDS IMMUNIZATION GUIDE AND RECOM 2025	X	
2	IHS COVID CHILD SCREENING CHECKLIST 042024	X	
3	IHS YES/NO/N/A NOT REQ	X	
4	IHS YES/NO/DON'T KNOW	X	
5	IHS PED COMBO VACCINE	X	
6	IHS-DTAP CVX 20 INSTRUCTIONS	X	
7	IHS-1ST/2ND/3RD/ADDITIONAL	X	
8	IHS-IMMUNIZATION ORDER PROMPT	X	
9	IHS VFC ELIG LEYEND	X	
10	IHS VITAL ENTRY INST	X	
MEASUREMENT TYPE			
BP		X	
+ + Next Screen - Prev Screen ?? More Actions >>>			
IA Install all Components		IS Install Selected Component	
Select Action: Next Screen// IA			

Figure 7-7: Exchange File Components screen

6. Install **computed Finding Only** (Figure 7-8). There are two choices, **IA** or **IS**. Choose **IS** to install selected components.

Users will notice that for each item in the reminder, a check is now made and displayed to indicate if the item in exchange matches the item in the file. Users are not asked about the elements if there is a match.

In the past asking users to make a selection even when the selection matched the element it was importing, made the installation much slower. With this updated method, installation is much quicker.

```

REMINDER COMPUTED FINDINGS entry IHS-DEPRESSION 2009 is NEW,
what do you want to do?

    Select one of the following:

        C      Create a new entry by copying to a new name
        I      Install or Overwrite the current entry
        Q      Quit the install
        S      Skip, do not install this entry

Enter response: I//

```

Figure 7-8: Computed Finding Installation example

7. Install Reminder and Dialog—There are two choices, **IA** or **IS**. Choose **IA** to install all components.

During installation, a routine will compare the checksum of the item on your system to the one in exchange. If they are identical, it will not update the item on your database.

If it is not identical, the application will ask you what you want to do about all the elements in this reminder (Figure 7-9). If it is new, the default is to install it.

Take all the defaults as you load the reminder unless you have loaded a previous version of reminders. If you have loaded a previous version of the reminders, always re-install the reminder definition itself but not any of the other elements.

Warning: Never overwrite a routine!

Routine BPXRMPPC already EXISTS, <NEVER overwrite a routine through the exchange!
but packed routine is different, what do you want to do?

Select one of the following:

C	Create a new entry by copying to a new name
I	Install or Overwrite the current entry
Q	Quit the install
S	Skip, do not install this entry

Enter response: S// < SKIP DO NOT REINSTALL THIS ENTRY. Never overwrite the routine!

REMINDER COMPUTED FINDINGS entry IHS-DEPRESSION 2009 is NEW,
what do you want to do?

Select one of the following:

C	Create a new entry by copying to a new name
I	Install or Overwrite the current entry
Q	Quit the install
S	Skip, do not install this entry

Enter response: I// Take the default. If this is a new component, it will default to "install".

TIU TEMPLATE FIELD entry IHS ADDL SIGN already EXISTS,
what do you want to do?

Select one of the following:

C	Create a new entry by copying to a new name
I	Install or Overwrite the current entry
Q	Quit the install
S	Skip, do not install this entry

Enter response: S// Take the default. If this is a new component, it will default to "install."

REMINDER DEFINITION entry IHS-DEPRESSION SCREEN 2011 already EXISTS,
what do you want to do?

Select one of the following:

C	Create a new entry by copying to a new name
I	Install or Overwrite the current entry
Q	Quit the install
S	Skip, do not install this entry

```
Enter response: S// If you have loaded a previous version of the reminders before,  
install/overwrite the reminder definition. If this is the first time you have loaded  
this reminder, accept the default of I to install.
```

Figure 7-9: Reminder Installation example

8.0 Standalone Reminder Dialog Setup

This patch delivered two comprehensive immunization reminders, pediatric and adult immunization reminder dialogs. To make these reminders available under the share folder, you will need to add them to the **TIU Template Reminder Dialog** parameter then associate them to a **TIU** template.

8.1 Adding Reminder Dialog to TIU Template Reminder Dialog Parameter

Standalone reminder dialogs will need to be added to **TIU TEMPLATE REMINDER DIALOGS** parameter (Figure 8-1). After this step, the reminder will be available in the EHR progress note tab.

values for TIU TEMPLATE REMINDER DIALOGS

Parameter	Instance	Value
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	1	OCA-ADULT INTAKE SCREENING V
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	2	PHX IMMUNIZATION STANDING OR
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	3	PHX NURSING SCREEN V4
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	4	IHS-FULL AUDIT C QUESTIONS
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	5	OCA-SCEEENING GROUP 10_31_24
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	7	IHS-COLON CANCER 2015
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	8	IHS-COLON CANCER SCREEN 2025
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	9	IHS-SCREENING BUNDLE 2025
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	10	IHS-TESTING NURSE DIALOG 202
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	11	IHS-ALCOHOL SCREEN 2013
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	12	IHS-ALCOHOL SCREEN 2013
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	13	TEST-IHS-EXAM ENTRY
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	14	TEST-IHS-CPT ENTRY
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	15	TEST-IHS-MEASUREMENT ENTRY
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	16	IHS-ALCOHOL SCREEN 2025
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	17	TEST-IHS-SKIN TEST ENTRY
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	18	IHS-TEST SECURITY KEYS & PAR
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	19	TEST-IHS-E&M ENTRY
SYS: 2017-DEMO-HQ.ABQ.IHS.GOV	20	TEST-IHS-ORDERING KEYS FOR O

Figure 8-1: TIU Template Reminder Dialog parameter

8.1.1 Adding Reminder Dialog to TIU Share Folder

Add standalone reminder under the Edit Parameter Values menu option. Select **TIU TEMPLATE REMINDER DIALOG** parameter. Select the appropriate settings level (User, Service, Division or System) from list shown (Figure 8-2), then select sequence. Add the dialog to parameter.

```

TIU TEMPLATE REMINDER DIALOGS may be set for the following:
  1  User      USR      [choose from NEW PERSON]
  3  Service   SRV      [choose from SERVICE/SECTION]
  4  Division  DIV      [choose from INSTITUTION]
  5  System    SYS      [2017-DEMO-HQ.ABQ.IHS.GOV]

Enter selection: 5 System 2017-DEMO-HQ.ABQ.IHS.GOV

Setting TIU TEMPLATE REMINDER DIALOGS for System: 2017-DEMO-HQ.ABQ.IHS.GOV
Select Display Sequence: 25
Are you adding 25 as a new Display Sequence? Yes// YES

Display Sequence: 25// 25
Clinical Reminder Dialog: IHS-ADULT IMMUNIZATION ENTRY TEMPLATE 2025      remin
der dialog LOCAL
...OK? Yes//

```

Figure 8-2: Adding adult immunization reminder dialog to parameter

1. To add a reminder dialog to EHR, log into **EHR**.
2. Navigate to **progress notes**.
3. Click **options**, then **Edit Share Template**.

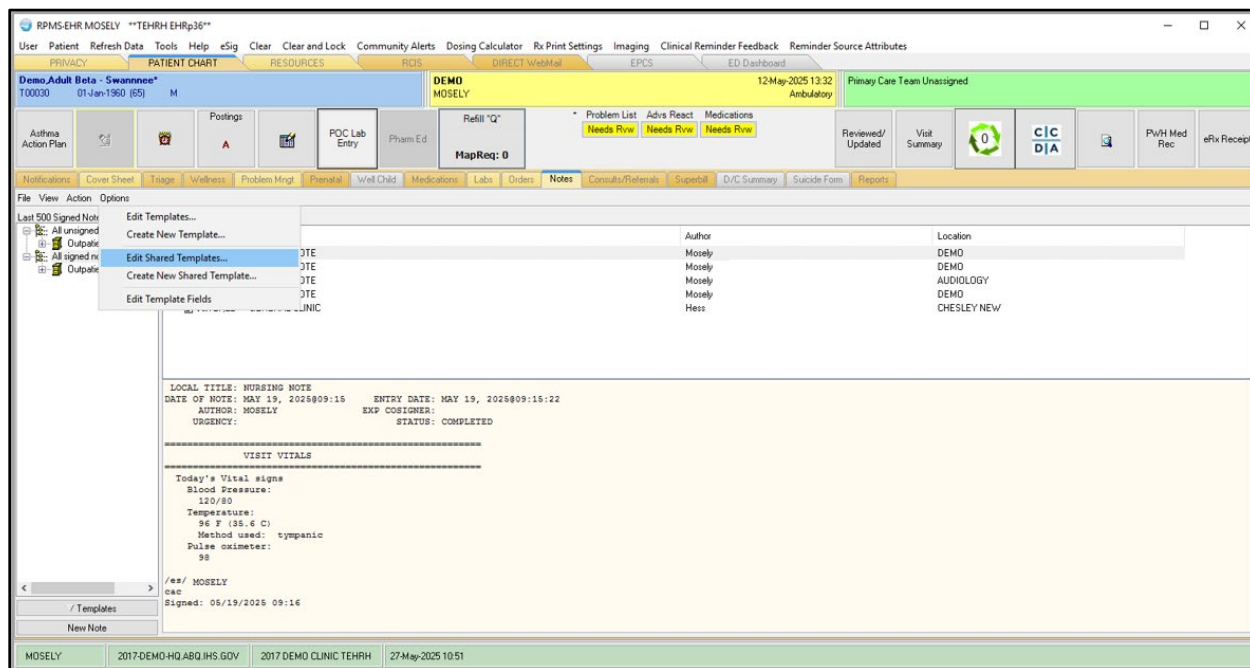


Figure 8-3: Adding adult immunization reminder dialog to share folder

4. Highlight the **share template**.
5. Click the **New Template** button (Figure 8-4).
6. Add a **title** for the template in the **Name** field.
7. For template type, select **Reminder Dialog**.
8. Click the **arrow box** in the **Reminder Dialog** field.
9. Select the **IHS-Adult Immunization Entry Template 2025** and click **Apply**.

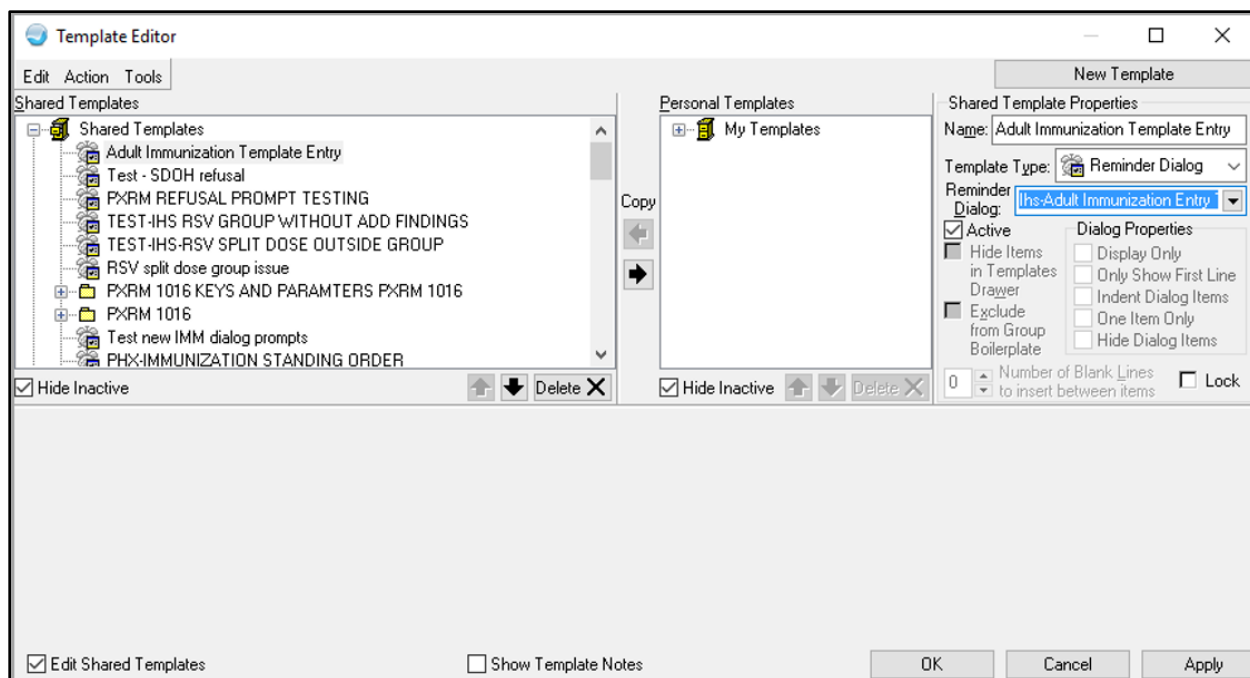


Figure 8-4: Creating TIU template and attaching reminder dialog to template and Share Folder

Appendix A Common Install Questions/Issues

This section describes common install issues, questions, and solutions.

A.1 Programmer Access Message During Installation

Programmer access is required to install the reminders that contain a new computed finding.

If you do not have programmer access (@ **fileman access**) you will see the following messages (Figure A-1) when you are installing reminders that contain a new computed finding:

```
Only programmers can install routines.  
Only programmers can install Reminder Computed Findings.
```

Figure A-1: Messages screen

If there are no new computed findings packed in the reminder, ignore the message and continue through the installation process. If the computed finding was previously installed there will be an **X** under the column **Exists** on the right of the **Reminder Computed Finding** in the **Reminder Exchange**. Detailed instructions are available in the Programmer Access section of this guide.

Reinstall the **reminder dialog** and the error will be gone.

A.2 After Installed in Reminder Exchange Findings Say None

It can be confusing when you first look at your dialog definitions. Here is an example (Figure A-2) where the dialog definition looks like the finding items did not load correctly. In the exchange file, it looks like the finding did not load. This is because some components of dialogs do not have findings and this is expected. (Refer to Figure A-3).

Item	Seq.	Dialog Findings	Type	Exists
1		IHS-TOBACCO SCREEN 2007	dialog	X
2	1	HD TOBACCO Finding: *NONE*	element	X
3	5	GRP TOBACCO SCREEN Finding: *NONE*	group	X
4	5.5	HF LIFETIME NON-SMOKER OTHER Finding: NON-TOBACCO USER (HEALTH FACTOR)	element	X
5	5.10	GRP CURRENT/PREVIOUS SMOKING Finding: *NONE*	group	X
6	5.10.5	GRP CURRENT SMOKER Finding: *NONE*	group	X
7	5.10.5.1	HF CURRENT SMOKER Finding: CURRENT SMOKER (HEALTH FACTOR)	element	X

+ Next Screen - Prev Screen ?? More Actions
 DD Dialog Details DT Dialog Text IS Install Selected
 DF Dialog Findings DU Dialog Usage QU Quit
 DS Dialog Summary IA Install All
 Select Action: Next Screen//

Figure A-2: List of Findings screen

In the example above (Figure A-2), you will notice that the Groups (under Type) do not have findings. This is expected. If you actually navigate to the Group Edit screen and look at the detail of the Group (Figure A-3), you will see that each element in the group has an appropriate finding.

Sequence	Dialog Details	Disabled
1	Dialog element: HF CURRENT SMOKER Resolution: OTHER Finding type: HEALTH FACTOR Finding item: CURRENT SMOKER [HF(2)] Additional prompts: PXRM COMMENT	
2	Dialog element: HF CURRENT SMOKELESS Resolution: OTHER Finding type: HEALTH FACTOR Finding item: CURRENT SMOKELESS [HF(3)] Additional prompts: PXRM COMMENT	
3	Dialog element: HF CURRENT SMOKER & SMOKELESS OTHER Resolution: OTHER Finding type: HEALTH FACTOR	

+ Next Screen - Prev Screen ?? More Actions >>>
 CO Copy Dialog Group DP Progress Note Text ED Edit/Delete Group
 DD Detailed Display DT Dialog Text QU Quit
 Select Sequence: Next Screen//

Figure A-3: Group Edit screen

A.3 Access Violation Error When Processing Dialogs

An **Access Violation Error** occurs if you are processing a dialog (Figure A-4) and you select the **Clinical Maintenance** button from within the dialog.

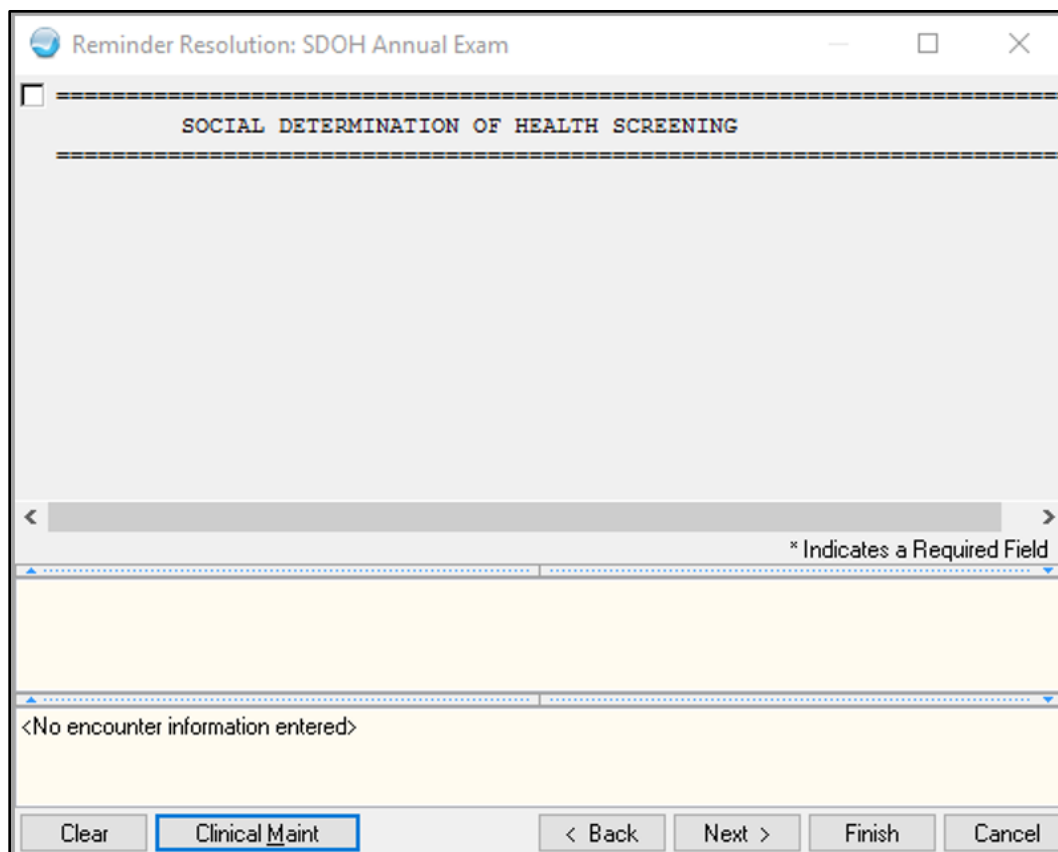


Figure A-4: Reminder dialog

When you exit/save the dialog, you will receive this error message (Figure A-5):

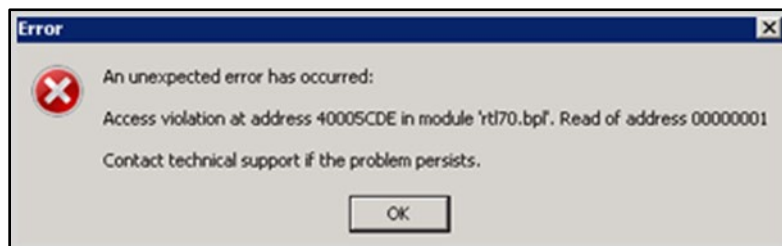


Figure A-5: Access Violation Error

This is a known issue that will be fixed in a future RPMS-EHR patch. If you receive this error, log out of RPMS-EHR and log back on again. We recommend that you do not use the **Clinical Maintenance** button when processing dialogs. Instead, right-click a reminder or reminder dialog and select **Clinical Maintenance**.

A.4 Duplicate CPT code 90653 Issue

CPT code 90653 was duplicated within the CPT file which can cause issues with the Comprehensive Immunization Reminder Dialogs. The reminder taxonomy may not install correctly from the Reminder Exchange, or the issue may present as a problem when using the reminder dialog when code is not captured in the V CPT file. There is a fix for this issue, and sites have been asked to create a helpdesk ticket to resolve this issue.

A site can check to see if the issue has already been addressed, or if a helpdesk ticket will be needed by inquiring into the CPT file using FileMan.

If your database returns two entries for 90653, as seen here in Figure A-1, then please start a helpdesk ticket to fix the issue.

```
VA FileMan Version 22.0

Enter or Edit File Entries
Print File Entries
Search File Entries
Modify File Attributes
Inquire to File Entries
Utility Functions ...
Data Dictionary Utilities ...
Transfer Entries
Other Options ...

Select VA FileMan <TEST ACCOUNT> Option: inquire to File Entries

OUTPUT FROM WHAT FILE: CPT//
Select CPT: 90653
1  90653      IIV ADJUVANT VACCINE IM
    INFLUENZA VACCINE, INACTIVATED (IIV), SUBUNIT, ADJUVANTED, FOR
    INTRAMUSCULAR USE
2  90653      2ND OR 3RD OPINION
    CONFIRMATORY CONSULTATION; COMPREHENSIVE
CHOOSE 1-2:
```

Figure A-6: FileMan inquiry into CPT file showing two entries for 90653

Appendix B RPMS Reminder Dialog Design

B.1 Pediatric Immunization Template Entry 2025

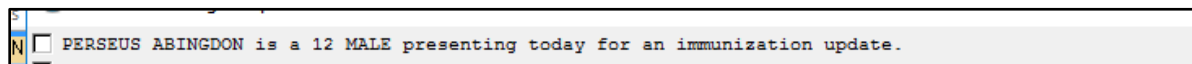


Figure B-1: Element: HD IMMUNIZATION VISIT 2025

Figure B-2: Element HD Immunization DUE

Figure B-3: Group: GRP VITAL MEASUREMENT ENTRY TEMPLATE 2025

Reminder Dialog Template: IHS-PEDS IMMUNIZATION ENTRY TEMPLATE 2025

☒ Screening checklist for contraindications to vaccines for children and teens

1. Is the child sick today?
☐ Yes ☐ No ☐ Don't Know
2. Does the child have any allergies to medicine, food, a vaccine component or latex?
☐ Yes ☐ No ☐ Don't Know
3. Has the child had a serious reaction to vaccine in the past?
☐ Yes ☐ No ☐ Don't Know
4. Does the child have any long-term health problem with heart, lung (including asthma), kidney, liver, nervous system, or metabolic disease (e.g., diabetes), a blood disorder, no spleen, a cochlear implant, or a spinal fluid leak? Are they taking regular aspirin or salicylate medication?
☐ Yes ☐ No ☐ Don't Know
5. For children age 2 through 4 years: has a healthcare provider told you that the child had wheezing or asthma in the past 12 months?
☐ Yes ☐ No ☐ Don't know ☐ N/A
6. For babies: Have you ever been told the child has intussusception?
☐ Yes ☐ No ☐ Don't know ☐ N/A
7. Has the child, a sibling, or a parent has seizure; has the child had brain or other nervous system problem?
☐ Yes ☐ No ☐ Don't Know
8. Has the child ever been diagnosed with a heart condition (myocarditis or pericarditis) or have they had Multisystem Inflammatory Syndrome (MIS-C) after an infection with the virus that causes COVID-19?
☐ Yes ☐ No ☐ Don't Know
9. Does the child have an immune-system problem such as cancer, leukemia, HIV/AIDS?
☐ Yes ☐ No ☐ Don't Know
10. In the past 6 months, has the child taken medications that affect the immune system such as prednisone, other steroids, or anticancer drugs; drugs to treat rheumatoid arthritis, Crohn's disease, psoriasis, or had radiation treatments?
☐ Yes ☐ No ☐ Don't Know
11. Does the child's parents or sibling have an immune system problem?
☐ Yes ☐ No ☐ Don't Know
12. In the past year, has the child received immune (gamma) globulin, blood/blood products or an antiviral drug?
☐ Yes ☐ No ☐ Don't Know
13. Is the child/teen pregnant?
☐ Yes ☐ No ☐ Don't Know
14. Has the child received vaccinations in the past 4 weeks?
☐ Yes ☐ No ☐ Don't Know
15. Has the child ever felt dizzy or faint before, during, or after a shot?
☐ Yes ☐ No ☐ Don't Know
16. Is the child anxious about getting a shot today?
☐ Yes ☐ No ☐ Don't Know

Screening Checklist Date: 12/15/2023 https://www.immunize.org/wp-content/uploads/cetg_d/p4060.pdf
Click link for the CDC immunization guide and recommendations for children.
<http://www.cdc.gov/vaccines/imz-schedules/child-easyread.html>

Figure B-4: Group: GRP IHS PEDS SCREENING CHECK-LIST 2025

☒ IMMUNIZATION(S) ADMINISTRATION

Code	Label
999	Unknown
V01	VFC - Not Eligible
V02	VFC - Medicaid (<19 yrs old only)
V03	VFC - Uninsured (<19 yrs old only)
V04	VFC - Am Indian/Al Native (<19 yrs old only) *Most common code in IHS facilities*
V05	VFC - Federally Qualified Health center patient - underinsured (<19 yrs old only)
V06	State specific eligibility (Do not use per CDC HL7 Guide 2.8.1)
V07	Local specific eligibility

The following immunization(s) were administered to the patient. ☐ Per standing order. ☐ Per provider order.

☐ Covid-19 Vaccine
☐ DTaP vaccine
☐ Hepatitis A (Hep A) ped/adolescent vaccine
☐ Hepatitis B (Hep B) ped/adolescent vaccine
☐ Haemophilus influenza type B (HIB) vaccine
☐ Human Papillomavirus (HPV9) vaccine
☐ Influenza (flu) vaccine
☐ Meningococcal vaccine
☐ Measles, mumps, and rubella (MMR) vaccine
☐ Pneumococcal vaccine
☐ Polio vaccine
☐ Respiratory Syncytial Virus (RSV) vaccine
☐ Rotavirus vaccine
☐ Tdap vaccine
☐ Varicella vaccine
☐ Combination vaccine products

Figure B-5: Group: GRP PEDS IMMUNIZATION LIST 2025

PATIENT EDUCATION

☒ Information provided on Vaccination.

Level of Understanding: * Good Education duration: 1

Readiness to Learn: (None selected)

Comment

☒ Information provided on benefits, side effects and post immunization care

Level of Understanding: * Good Education duration: 1

Readiness to Learn: (None selected)

Comment

☒ Information provided on importance of following required schedule for vaccinations

Level of Understanding: * Good Education duration: 1

Readiness to Learn: (None selected)

Comment

☒ Information provided on importance of being current on immunizations

Level of Understanding: * Good Education duration: 0

Readiness to Learn: (None selected)

Comment

☒ Information provided on how immunizations control communicable diseases

Level of Understanding: * Good Education duration: 0

Readiness to Learn: (None selected)

Comment

☒ Information provided on follow-up Care

Level of Understanding: * Good Education duration: 0

Readiness to Learn: (None selected)

Comment

Figure B-6: GRP IMMUNIZATION EDUCATION 2024

PATIENT ADVISEMENT

DEMO,ADULT BEIA has been advised of possible side effects (rash/hives, nausea, difficulty breathing, redness, pain, fever) and given the following instructions:

1. After leaving the clinic area, if any side effects are experienced notify your provider.
2. If any urgent or emergent problems are experienced after leaving the clinic area, report to the nearest emergency room or call 911.

VIS for vaccines administration given to patient/caregiver.

Figure B-7: Element: HD IMMUN INSTRUCTIONS 2025

CPT CODES FOR VACCINE ADMINISTRATION

☒ Pediatric percutaneous, intradermal, subcutaneous or intramuscular injections administration code.

☐ Documenting CPT 90460 for Vaccine administration at this visit.

☐ Documenting CPT 90461 for any additional vaccine administered at this visit.

☒ Nasal and oral vaccine administration code(s).

☐ Documenting CPT 90473 for oral/nasal vaccine administration at this visit.

☐ Documenting CPT 90474 for additional oral/nasal vaccine administration at this visit.

☒ RSVnAb administration codes.

☐ Documenting CPT 96380 for RSVnAb administration with counseling by qualified health care professional.

☐ Documenting CPT 96381 for RSVnAb administration without counseling by qualified health care professional.

Figure B-8: Group: GRP IMMUNIZATION ADMIN CODES WITH RSV 2025

B.2 Adult Immunization Template Entry 2025

☒ ADULT DEMO is a 45 FEMALE presenting today for an immunization update.

Figure B-9: Element: HD IMMUNIZATION VISIT 2025

☐ =====
 IMMUNIZATION(S) DUE
 =====

Immunizations Due: Tdap (past due)
 FLU,NOS (due)
 PNEUMO,NOS (due)
 ZOS-Shgrx (due)
 COV,NOS (due)

Figure B-10: Element: HD IMMUNIZATION DUE

☒ =====
 VISIT VITALS
 =====
 Click here to include vital signs entered during triage into your notes or to enter vital signs using this dialog.

☒ Visit vitals: TMP:98.60 (37 C), PU:90
☒ Enter Vitals here:

Vital Signs

☒ Blood Pressure: 120/80
 Cuff size used:

☐ Pulse:
☐ Respiration:
☐ Temperature:
☐ Pain:
☐ Pulse oximeter:

Figure B-11: Group: GRP VITAL MEASUREMENT ENTRY TEMPLATE 2025

=====

IMMUNIZATION SCREENING

=====

☒ Screening Checklist for Vaccines

- Are you feeling sick today?
☐ Yes ☐ No ☐ Don't Know
- Do you have allergies to medications, food a vaccine component, or latex?
☐ Yes ☐ No ☐ Don't Know
- Have you ever had a serious reaction after receiving a vaccine?
☐ Yes ☐ No ☐ Don't Know
- Do you have any of the following: a long-term health problem with heart, lung, kidney, or metabolic disease (e.g., diabetes), asthma, a blood disorder, no spleen, a cochlear implant, or spinal fluid leak?
☐ Yes ☐ No ☐ Don't Know
- Are you on long-term aspirin therapy?
☐ Yes ☐ No ☐ Don't Know
- Do you have cancer, leukemia, HIV/AIDS, or any other immune system problem?
☐ Yes ☐ No ☐ Don't Know
- Do you have a parent, brother, or sister with an immune system problem?
☐ Yes ☐ No ☐ Don't Know
- In the past 6 months, have you taken medications that affect your immune system, such as prednisone, other steroids, or anticancer drugs; drugs for the treatment of rheumatoid arthritis, Crohn's disease, or psoriasis; or have you had radiation treatments?
☐ Yes ☐ No ☐ Don't Know
- Have you had a seizure or a brain or other nervous system problem?
☐ Yes ☐ No ☐ Don't Know
- Have you ever been diagnosed with heart condition (myocarditis or pericarditis) or have you had Multisystem Inflammatory Syndrome (MIS-A or MIS-C) after an infection with the virus that causes COVID-19?
☐ Yes ☐ No ☐ Don't Know
- In the past year, have you received immune (gamma) globulin, blood or blood products, or an antiviral drug?
☐ Yes ☐ No ☐ Don't Know
- Are you pregnant?
☐ Yes ☐ No ☐ Don't Know
- Have you received any vaccination in the past 4 weeks?
☐ Yes ☐ No ☐ Don't Know
- Have you ever felt dizzy or faint before, during or after a shot?
☐ Yes ☐ No ☐ Don't Know
- Are you anxious about getting a shot today?
☐ Yes ☐ No ☐ Don't Know

Screening Checklist Date: 11/6/2023 https://www.immunize.org/wp-content/uploads/etg_d/gt2021.pdf

Click link for the CDC immunization guide and recommendations for adults.
<http://www.cdc.gov/vaccines/hgp/19a-schedules/adult-age.html>

Figure B-12: Group: GRP IHS ADULT SCREENING CHECK-LIST 2025

☒ =====

IMMUNIZATION(S) ADMINISTRATION

=====

Code	Label
999	Unknown
V01	VFC - Not Eligible
V02	VFC - Medicaid (<19 yrs old only)
V03	VFC - Uninsured (<19 yrs old only)
V04	VFC - Am Indian/AK Native (<19 yrs old only) *Most common code in IHS facilities*
V05	VFC - Federally Qualified Health center patient - underinsured (<19 yrs old only)
V06	State specific eligibility (Do not use per CDC HL7 Guide 2.6.1)
V07	Local specific eligibility

The following immunization(s) were administered to the patient. ☐ Per standing order. ☐ Per provider order.

☐ Covid-19 vaccine

☐ Hepatitis A Vaccine

☐ Hepatitis B vaccine

☐ Human Papillomavirus (HPV) vaccine

☐ Influenza (flu) vaccine

☐ Meningococcal vaccine

☐ MMR vaccine

☐ Mpox vaccine

☐ Polio vaccine

☐ Pneumococcal vaccine

☐ Respiratory Syncytial Virus Infection (RSV) vaccine

☐ Tetanus and diphtheria toxoid vaccine

☐ Tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccines

☐ Varicella vaccine

☐ Zoster vaccine

Figure B-13: Group: GRP ADULT IMMUNIZATION LIST 2025

PATIENT EDUCATION		
<input checked="" type="checkbox"/>	Information provided on Vaccination.	
Level of Understanding: *	Good	Education duration: 1
Readiness to Learn:	(None selected)	
Comment		
<input checked="" type="checkbox"/>	Information provided on benefits, side effects and post immunisation care	
Level of Understanding: *	Good	Education duration: 1
Readiness to Learn:	(None selected)	
Comment		
<input checked="" type="checkbox"/>	Information provided on importance of following required schedule for vaccinations	
Level of Understanding: *	Good	Education duration: 1
Readiness to Learn:	(None selected)	
Comment		
<input checked="" type="checkbox"/>	Information provided on importance of being current on immunizations	
Level of Understanding: *	Good	Education duration: 0
Readiness to Learn:	(None selected)	
Comment		
<input checked="" type="checkbox"/>	Information provided on how immunizations control communicable diseases	
Level of Understanding: *	Good	Education duration: 0
Readiness to Learn:	(None selected)	
Comment		
<input checked="" type="checkbox"/>	Information provided on follow-up Care	
Level of Understanding: *	Good	Education duration: 0
Readiness to Learn:	(None selected)	
Comment		

Figure B-14: Group: GRP IMMUNIZATION EDUCATION 2024

PATIENT ADVISEMENT	
<p>MEMO, ADULT SEITA has been advised of possible side effects (rash/hives, nausea, difficulty breathing, redness, pain, fever) and given the following instructions:</p> <ol style="list-style-type: none"> 1. After leaving the clinic area, if any side effects are experienced notify your provider. 2. If any urgent or emergent problems are experienced after leaving the clinic area, report to the nearest emergency room or call 911. <p>VIS for vaccines administration given to patient/caregiver.</p>	

Figure B-15: Element: HD IMMUN INSTRUCTIONS 2025

Appendix C RPMS Detail Immunization List

C.1 GRP Peds Immunization List 2025

The table below contains details of each immunization element and the additional finding attached to that element.

Table C-1: Immunizations with CVX Codes and additional finding CPTs

Immunization	CVX Code	Add. Finding CPT(s)
SARS-COV-2 (COVID-19) vaccine, mRNA, spike protein, LNP, preservative free, 25 mcg/0.25 mL dose	311	91321 90480
SARS-COV-2 (COVID-19) vaccine, mRNA, spike protein, LNP, preservative free, 50 mcg/0.5 mL dose	312	91322 90480
SARS-COV-2 (COVID-19) vaccine, mRNA, spike protein, LNP, PF, tris-sucrose, 3 mcg/0.3 mL dose	308	91318 90480
SARS-COV-2 (COVID-19) vaccine, mRNA, spike protein, LNP, PF, tris-sucrose, 10 mcg/0.3 mL	310	91319 90480
SARS-COV-2 (COVID-19) vaccine, sub, recomb spike prot-nanopart+Matrix-M1 Adjuv, PF, 5 mcg/0.5 mL dose	313	91304 90480
DTAP (Infanrix)	20	90700
DTAP (Daptacel)	106	90700
HEP A, PED/ADOL, 2 dose	83	90633
HEP B, Adolescent OR Pediatric	8	90743
HIB (PRP-OMP)	49	90647
HPV9	165	90651
Influenza, live, trivalent, intranasal	111	90660
Influenza, high-dose, split virus, trivalent, injectable, preservative free	135	90662
Influenza, split virus, trivalent, injectable, preservative free	140	90656
Influenza, split virus, trivalent, injectable, preservative	141	90657
Influenza, Madin Darby Canine Kidney, subunit, trivalent, injectable, preservative free	153	90661
Influenza, recombinant, trivalent, injectable, preservative free	155	90673
Influenza, adjuvanted, trivalent, injectable, preservative free	168	90653
Influenza, Madin Darby Canine Kidney, subunit, trivalent, injectable, preservative	320	90661
INFLUENZA, Live, Intranasal, Quadrivalent	149	90672
Influenza, split virus, quadrivalent, injectable, preservative free	150	90686

Immunization	CVX Code	Add. Finding CPT(s)
Influenza, split virus, quadrivalent, injectable, preservative	158	90687
Influenza, injectable, MDCK, preservative free, quadrivalent	171	90674
influenza, recombinant, quadrivalent, injectable, preservative free	185	90682
Influenza, high-dose, split virus, quadrivalent, injectable, preservative free	197	90662
Influenza, adjuvanted, inactivated, quadrivalent, injectable, preservative free	205	90694
Meningococcal MCV4O	136	90734
Meningococcal Polysaccharide	203	90619
Meningococcal Polysaccharide (groups A, C, Y, W) tet toxoid conjug, Men B recomb vaccine, 0.5mL, PF	316	90623
Meningococcal B, recombinant	162	90621
Meningococcal B, OMV (Bexsero)	163	90620
MMR	3	90707
Pneumococcal, PCV-15	215	90671
Pneumococcal, PCV-20	216	90677
PNEUMOCOCCAL	33	90732
IPV	10	90713
Respiratory syncytial virus monoclonal antibody, IgG1k, nirsevimab-alip, 0.5mL	306	90380
Respiratory syncytial virus monoclonal antibody, IgG1k, nirsevimab-alip, 1.0mL	307	90381
Rotavirus, monovalent	119	90681
Rotavirus, pentavalent	116	90680
Tdap	115	90715
Varicella	21	90716
DTaP-IPV (Kinrix/Quadracel)	130	90696
DTaP-Hep B-IPV (Pediarix)	110	90723
DTaP-Hib-IPV (Pentacel)	120	90698
MMRV (Proquad)	94	90710
DTaP,IPV,Hib,HepB (Vaxelis)	146	90697

C.2 GRP Adult Immunization List 2025

Table below contains details of each immunization element and the additional finding attached to that element.

Table C-2: Immunization elements and additional findings

Immunization	CVX Code	Add. Finding CPT(s)
SARS-COV-2 (COVID-19) vaccine, mRNA, spike protein, LNP, PF, tris-sucrose, 30 mcg/0.3 mL dose	309	91320
SARS-COV-2 (COVID-19) vaccine, mRNA, spike protein, LNP, preservative free, 50 mcg/0.5 mL dose	312	91322
SARS-COV-2 (COVID-19) vaccine, sub, recomb spike prot-nanopart+Matrix-M1 Adjuv, PF, 5 mcg/0.5 mL dose	313	91304
HEP A, ADULT	52	90632
HEP B, ADULT	43	90743
HepB recombinant, Al(OH) ₃	220	90759
HPV quadrivalent (Gardasil)	62	90649
Influenza, live, trivalent, intranasal	111	90660
Influenza, high-dose, split virus, trivalent, injectable, preservative free	135	90662
Influenza, split virus, trivalent, injectable, preservative free	140	90656
Influenza, split virus, trivalent, injectable, preservative	141	90657
Influenza, Madin Darby Canine Kidney, subunit, trivalent, injectable, preservative free	153	90661
Influenza, recombinant, trivalent, injectable, preservative free	155	90673
Influenza, adjuvanted, trivalent, injectable, preservative free	168	90653
Influenza, Madin Darby Canine Kidney, subunit, trivalent, injectable, preservative	320	90661
INFLUENZA, Live, Intranasal, Quadrivalent	149	90672
Influenza, split virus, quadrivalent, injectable, preservative free	150	90686
Influenza, split virus, quadrivalent, injectable, preservative	158	90687
Influenza, injectable, MDCK, preservative free, quadrivalent	171	90674
influenza, recombinant, quadrivalent, injectable, preservative free	185	90682
Influenza, high-dose, split virus, quadrivalent, injectable, preservative free	197	90662
Influenza, adjuvanted, inactivated, quadrivalent, injectable, preservative free	205	90694
Meningococcal Polysaccharide (groups A,C,Y,W-135) tetanus toxoid conjugate vaccine 0.5mL dose, PF	203	90619

Immunization	CVX Code	Add. Finding CPT(s)
Meningococcal B, OMV (Bexsero)	163	90620
Meningococcal Polysaccharide (groups A, C, Y, W) tet toxoid conjug, Men B recomb vaccine, 0.5mL, PF	316	90623
MMR	3	90707
Vaccinia, smallpox monkeypox vaccine, live attenuated, PF, subcutaneous or intradermal injection	206	90611
IPV	10	90713
Pneumococcal, PCV-15	215	90671
Pneumococcal, PCV-20	216	90677
Pneumococcal conjugate vaccine, 21 valent, polysaccharide CRM197 conjugate, preservative free	327	90684
Pneumococcal	33	90732
Respiratory syncytial virus vaccine, recombinant, prot subunit RSVpreF, adjuvant reconst, 0.5 mL, PF	303	90679
Respiratory syncytial virus vaccine, bivalent, protein subunit RSVpreF, diluent reconst, 0.5 mL, PF	305	90678
Tetanus and Diphtheria toxoids, adsorbed, PF, for adult use (2 Lf of TT and 2 Lf of DT)	9	90714
Tdap	115	90715
Varicella	21	90716
Zoster	187	90750

Appendix D RPMS Dialog Groups

D.1 Reminder Dialog Groups

Table D-1: Group names and details

Group Name	Group Detail
GRP VITAL MEASUREMENT ENTRY TEMPLATE 2025	Element: HD VISIT MEASUREMENT Group: GRP MT BP/PU/RS/TMP/PA/O2
GRP MT BP/PU/RS/TMP/PA/O2	Element: MT BLOOD PRESSURE V2 Element: MT PULSE Element: MT RESPIRATIONS Element: MT TEMPERATURE V2 Element: MT PAIN Element: MT PULSE OX
GRP IHS ADULT SCREENING CHECK-LIST 2025	Element: IM ADULT SCREENING CHECK-LIST Element: IM SCREENING DATE 04/25/2024 Element: HD ADULT IMMUNIZATION GUIDE AND RECOM 2025
GRP ADULT IMMUNIZATION LIST 2025	Group: GRP IHS ADULT COVID-19 IMM 2025 Group: GRP HEPATITIS A 2025 Group: GRP HEPATITS B 2025 Group: GRP HPV 2025 Group: GRP INFLUENZA VACCINE 2025 Group: GRP MENINGITIS 2025 Group: GRP MMR 2025 Group: GRP MPOX 2025 Group: GRP POLIO 2025 Group: GRP PNEUMOCOCCAL 2025 Group: GRP RSV 2025 Group: GRP TD 2025 Group: GRP TDAP 2025 Group: GRP VARICELLA 2025 Group: GRP ZOSTER 2025

Group Name	Group Detail
GRP IMMUNIZATION EDUCATION 2025	Element: ED IMMUNIZATION PATIENT LITERATURE 2020 Element: ED IMMUNIZATION INFORMATION 2020 Element: ED IMMUNIZATION SCHEDULE 2020 Element: ED IMMUNIZATION DEFICIENCY 2025 Element: ED IMMUNIZATION PREVENTION 2025 Element: ED IMMUNIZATION FOLLOW-UP 2025
GRP IMMUNIZATION ADMINISTRATION CODES	GRP CPT ADMIN OF IMMUNIZATION INJ Group: GRP CPT ADMIN OF IMMUNIZATION NASAL/ORAL
GRP IMMUNIZATION ADMIN CODES WITH RSV 2025	Group: GRP CPT ADMIN OF IMM INJ - PEDIATRIC W/COUNSELING Group: GRP CPT ADMIN OF IMMUNIZATION NASAL/ORAL Group: GRP CPT ADMIN FOR RSV IMMUNIZATION
GRP PEDS IMMUNIZATION LIST 2025	Group: GRP PEDS COVID-19 2025 Group: GRP PEDS DTAP 2025 Group: GRP PEDS HEPATITIS A 2025 Group: GRP PEDS HEPATITIS B 2025 Group: GRP PEDS HIB 2025 Group: GRP PEDS HPV9 2025 Group: GRP INFLUENZA VACCINE 2025 Group: GRP PEDS MENINGOCOCCAL 2025 Group: GRP PEDS MMR 2025 Group: GRP PEDS PCV-15 2025 Group: GRP PEDS RSV 2025 Group: GRP PEDS ROTAVIRUS 2025 Group: GRP PEDS TDAP 2025 Group: GRP PEDS VARICELLA 2025 Group: GRP PEDS COMBINATION VACCINE 2025
GRP IHS PEDS SCREENING CHECK-LIST 2025	Element: IM SCREENING CHECKLIST COVID-19 202404 Element: IM SCREENING DATE 04/04/2024 Element: HD PEDS IMMUNIZATION GUIDE AND RECOM 2025

Group Name	Group Detail
GRP IHS ADULT COVID-19 IMM 2025	IM ADULT PFIZER 30CG/0.3ML ADULT (CVX 309) Element: IM COVID-19 MODERNA 50MCG/ML ADULT (CVX 312) 2025 Element: IM COVID-19 NOVAVAX 5MCG/0.5ML ADULT (CVX 313) 2025 Element: IM COVID19 REFUSED
GRP HEPATITIS A 2025	Element: IM HEPATITIS A GIVEN 2025 Element: IM HEPATITIS A REFUSAL 2025
GRP HEPATITS B 2025	Element: IM HEPATITIS B ADOLES 2ND SERIES GIVEN 2025 Element: IM HEP B ADULT 3 DOSE SERIES GIVEN 2025 Element: IM HEP B RECOMBINANT GIVEN 2025 Element: IM HEPATITIS B REFUSAL 2025
GRP HPV 2025	Element: IM HPV GARDASIL GVIEN 2025 Element: IM HPV REFUSAL 2025
GRP INFLUENZA VACCINE 2025	Group: GRP TRIVALENT INFLUENZA 2025 Group: GRP QUADRIVALENT INFLUENZA 2025
GRP TRIVALENT INFLUENZA 2025	Element: IM FLU (CVX 111) LIVE TRIV INTRANASAL GIVEN 2025 Element: IM FLU (CVX 135) HIGH-DOSE TRIV PF GIVEN 2025 Element: IM FLU (CVX 140) SPLIT VIRUS TRIV PF GIVEN 2025 Element: IM FLU (CVX 141) SPLIT 0.25ML DOSE TRIV GIVEN 2025 Element: IM FLU (CVX 141) SPLIT 0.5ML DOSE TRIV GIVEN 2025 Element: IM FLU (CVX 153) MDCK TRIV PF GIVEN 2025 Element: IM FLU (CVX 155) RECOM TRIV PF GIVEN 2025 Element: IM FLU (CVX 168) ADJUV TRIV PF GIVEN 2025 Element: IM FLU (CVX 320) MDCK TRIV GIVEN 2025 Element: IM FLU REFUSAL 2025

Group Name	Group Detail
GRP QUADRIVALENT INFLUENZA 2025	Element: IM FLU (CVX 149) LIVE QUAD INTRANASAL GIVEN 2025 Element: IM FLU (CVX 150) SPLIT VIRUS QUAD PF GIVEN 2025 Element: IM FLU (CVX 158) SPLIT VIRUS QUAD GIVEN 2025 Element: IM FLU (CVX 171) MDCK QUAD PF GIVEN 2025 Element: IM FLU (CVX 185) RECOMB QUAD PF GIVEN 2025 Element: IM FLU (CVX 197) HIGH-DOSE QUAD PF GIVEN 2025 Element: IM FLU (CVX 205) ADJUV QUAD PF GIVEN 2025 Element: IM FLU REFUSAL 2025
GRP MENINGITIS 2025	IM MENINGOCOCCAL ACWY (CVX 203) GIVEN 2025 Element: IM MENINGOCOCCAL B (CVX 163) GIVEN 2025 Element: IM MENINGOCOCCAL MENACWY-TT (CVX 316) GIVEN 2025 Element: IM MENINGOCOCCAL B REFUSAL 2025
GRP MMR 2025	Element: IM MMR (CVX 3) GIVEN 2025 Element: IM MMR REFUSAL 2025
GRP MPOX 2025	Element: IM MPOX (CVX 206) GIVEN 2025 Element: IM MPOX REFUSAL 2025
GRP POLIO 2025	Element: IM POLIO (CVX 10) GIVEN 2025 Element: IM POLIO REFUSAL 2025
GRP PNEUMOCOCCAL 2025	Element: IM PCV15 GIVEN 2025 Element: IM PCV20 (CVX 216) GIVEN 2025 Element: IM PCV21 (CVX 327) GIVEN 2025 Element: IM PPSV 23 GIVEN 2025 Element: IM PCV REFUSAL 2025
GRP RSV 2025	Element: IM RSV (CVX 303) GIVEN 2025 Element: IM RSVBV (CVX 305) GIVEN 2025 Element: IM RSVPF (CVX 326) GIVEN 2025 Element: IM RSV REFUSAL 2025
GRP TD 2025	Element: IM TD (CVX 9) GIVEN 2025 Element: IM TD REFUSAL 2025
GRP TDAP 2025	Element: IM TDAP (CVX 115) GIVEN 2025 Element: IM TDAP REFUSAL 2025

Group Name	Group Detail
GRP VARICELLA 2025	Element: IM VARICELLA (CVX 21) GIVEN 2025 Element: IM VARICELLA REFUSAL 2025
GRP ZOSTER 2025	Element: IM ZOSTER (CVX 187) GIVEN 2025 Element: IM ZOSTER REFUSAL 2025
GRP IMMUNIZATION EDUCATION 2025	Element: ED IMMUNIZATION PATIENT LITERATURE 2020 Element: ED IMMUNIZATION INFORMATION 2020 Element: ED IMMUNIZATION SCHEDULE 2020 Element: ED IMMUNIZATION DEFICIENCY 2025 Element: ED IMMUNIZATION PREVENTION 2025 Element: ED IMMUNIZATION FOLLOW-UP 2025
GRP CPT ADMIN OF IMM INJ - PEDIATRIC W/COUNSELING	Element: CPT 90460 IMM ADM INJ SINGLE-PEDS Element: CPT 90461 IMM ADM INJ MULTIPLE PEDS
GRP CPT ADMIN OF IMMUNIZATION NASAL/ORAL	Element: CPT 90473 IMM ADM ORAL/NASAL SINGLE Element: CPT 90474 IMM ADM ORAL/NASAL MULTIPLE ADDITIONAL
GRP CPT ADMIN FOR RSV IMMUNIZATION	Element: CPT 96380 IMM RSV ADMIN CODE Element: CPT 96381 IMM RSV ADMIN CODE
GRP CPT ADMIN OF IMMUNIZATION INJ	Element: CPT 90471 IMM ADM INJ SINGLE Element: CPT 90472 IMM ADM INJ MULTIPLE

Group Name	Group Detail
GRP PEDS IMMUNIZATION LIST 2025	Group: GRP PEDS COVID-19 2025 Group: GRP PEDS DTAP 2025 Group: GRP PEDS HEPATITIS A 2025 Group: GRP PEDS HEPATITIS B 2025 Group: GRP PEDS HIB 2025 Group: GRP PEDS HPV9 2025 Group: GRP INFLUENZA VACCINE 2025 Group: GRP PEDS MENINGOCOCCAL 2025 Group: GRP PEDS MMR 2025 Group: GRP PEDS PCV-15 2025 Group: GRP PEDS RSV 2025 Group: GRP PEDS ROTAVIRUS 2025 Group: GRP PEDS TDAP 2025 Group: GRP PEDS VARICELLA 2025 Group: GRP PEDS COMBINATION VACCINE 2025
GRP PEDS COVID-19 2025	Group: GRP COVID-19 IMM MODERNA 2025 Group: GRP COVID-19 PEDS IMM PFIZER 2025 Group: GRP COVID-19 IMM NOVAX 2025 Element: IM COVID19 REFUSED
GRP COVID-19 IMM MODERNA 2025	Element: IM PEDS MODERNA 25MCG/.25ML 6MON-11YRS (CVX 311) 2025 Element: IM MODERNA 50MCG/0.5ML 12 YRS AND OLDER (CVX 312) 2025
GRP COVID-19 PEDS IMM PFIZER 2025	Element: IM COVID-19 PFIZER 3MCG/0.3ML 6M-4YRS (CVX 308) 2025 Element: IM COVID-19 PFIZER 10MCG/0.3ML 5Y-11YRS (CVX 310) 2025
GRP COVID-19 IMM NOVAX 2025	Element: IM COVID-19 NOVAVAX 5MCG/0.5ML (CVX 313) 2025
GRP PEDS DTAP 2025	Element: IM DTAP (INFANRIX CVX 20) GIVEN 2025 Element: IM DTAP (DAPTACEL CVX 106) GIVEN 2025 Element: IM DTAP REFUSAL 2025
GRP PEDS HEPATITIS A 2025	Element: IM PEDS HEPATITIS A (CVX 83) GIVEN 2025 Element: IM PEDS HEPATITIS A REFUSAL 2025
GRP PEDS HEPATITIS B 2025	Element: IM PEDS HEPATITIS B (CVX 8) 2 DOSE SCHE GIVEN 2025 Element: IM PEDS/ADO HEPATITIS B (CVX 8) 3 DOSE SCHE GIVEN 2025 Element: IM PEDS HEP B REFUSAL 2025

Group Name	Group Detail
GRP PEDS HIB 2025	Element: IM PEDS (CVX 49) GIVEN 2025 Element: IM PEDS HIB REFUSAL 2025
GRP PEDS HPV9 2025	Element: IM PEDS HPV (CVX 165) GIVEN 2025 Element: IM PEDS HPV-9 REFUSAL 2025
GRP PEDS MENINGOCOCCAL 2025	Element: IM PEDS MENACWY-CRM GIVEN 2025 Element: IM PEDS MENINGOCOCCAL MENACWY-TT (CVX 203) GIVEN 2025 Element: IM PEDS (MENB) MENACWY-TT (CVX 316) GIVEN 2025 Element: IM PEDS MENB RECOMBINANT (CVX 162) GIVEN 2025 Element: IM PEDS MENINGOCOCCAL B, OMV (CVX 163) GIVEN 2025 Element: IM PEDS MENINGOCOCCAL REFUSAL 2025
GRP PEDS MMR 2025	Element: IM PEDS MMR (CVX 3) GIVEN 2025 Element: IM MMR REFUSAL 2025
GRP PEDS PCV-15 2025	Element: IM PCV15 GIVEN 2025 Element: IM PCV20 (CVX 216) GIVEN 2025 Element: IM PPSV 23 GIVEN 2025 Element: IM PCV REFUSAL 2025
GRP PEDS POLIO 2025	Element: IM POLIO (CVX 10) GIVEN 2025 Element: IM POLIO REFUSAL 2025
GRP PEDS RSV 2025	Element: IM PEDS RSV 50MG (CVX 306) GIVEN 2025 Element: IM PEDS RSV 100MG (CVX 307) GIVEN 2025 Group: GRP PEDS RSV SPLIT DOSE 2025 IM PEDS RSV REFUSAL 2025
GRP PEDS RSV SPLIT DOSE 2025	Element: IM PEDS RSV (CVX 307) SPLIT DOSE 1 GIVEN 2025 Element: IM PEDS RSV (CVX 307) SPLIT DOSE 2 GIVEN 2025
GRP PEDS ROTAVIRUS 2025	Element: IM PEDS ROTAVIRUS MONO (CVX 119) GIVEN 2025 Element: IM PEDS ROTAVIRUS PENTA (CVX 116) GIVEN 2025 Element: IM PEDS ROTAVIRUS REFUSAL 2025
GRP PEDS TDAP 2025	Element: IM PEDS TDAP (CVX 115) GIVEN 2025 Element: IM PEDS TDAP REFUSAL 2025

Group Name	Group Detail
GRP PEDS VARICELLA 2025	Element: IM PEDS VARICELLA (CVX 21) GIVEN 2025 Element: IM PEDS VARICELLA REFUSAL 2025
GRP PEDS COMBINATION VACCINE 2025	Group: GRP PEDS KINRIX 2025 Group: GRP PEDS PEDIARIX 2025 Group: GRP PEDS PENTACEL 2025 Group: GRP PEDS PROQUAD 2025
GRP PEDS KINRIX 2025	Element: IM PEDS KINRIX/QUADRADCEL GIVEN 2025 Element: IM PEDS KINRIX REFUSAL 2025
GRP PEDS PEDIARIX 2025	Element: IM PEDS PEDIARIX (CVX 110) GIVEN 2025 Element: IM PEDS PEDIARIX REFUSAL 2025
GRP PEDS PENTACEL 2025	Element: IM PEDS PENTACEL (CVX 120) GIVEN 2025 Element: IM PEDS PENTACEL REFUSAL 2025
GRP PEDS PROQUAD 2025	Element: IM PEDS PROQUAD (CVX 94) GIVEN 2025 Element: IM PEDS PROQUAD REFUSAL 2025
GRP PEDS VAXELIS 2025	Element: IM PEDS VAXELIS (CVX 146) GIVEN 2025 Element: IM PEDS VAXELIS REFUSAL 2025
GRP IHS PEDS SCREENING CHECK-LIST 2025	Element: IM SCREENING CHECKLIST COVID-19 202404 Element: IM SCREENING DATE 04/04/2024 Element: HD PEDS IMMUNIZATION GUIDE AND RECOM 2025

Contact Information

If you have any questions or comments regarding this distribution, please contact the IHS IT Service Desk.

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