

# PUBLIC HEALTH MANUAL

## Standard Operating Procedure

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<b>Applies To:</b>	All Staff working in Public Health, Public Health Managers, Public Health Directors, Medical Officers of Health for Nova Scotia		

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## PREAMBLE

Effective immunization programs are essential to the prevention and control of many infectious diseases (Public Health Agency of Canada, 2016). The Nova Scotia publicly funded immunization program offers immunization to targeted groups as part of routine and high risk situations. Public Health Staff will determine vaccine eligibility as per the Department of Health and Wellness Publicly Funded Vaccine/Immunoglobulin Eligibility Policy.

[https://novascotia.ca/dhw/CDPC/documents/150706\\_Vaccine\\_Immunoglobulin\\_eligibility\\_fin al.pdf](https://novascotia.ca/dhw/CDPC/documents/150706_Vaccine_Immunoglobulin_eligibility_fin al.pdf)

The purpose of this Standard Operating Procedure (SOP) is to outline the planning, implementation and follow-up clinic processes for immunizers and other Staff working in a Public Health mass immunization clinic. Panorama software will be used to document pre, during and post clinic activities as outlined in this SOP.

## STANDARD OPERATING PROCEDURE

### PART 1-PLANNING MASS IMMUNIZATION CLINICS

#### Role of the Clinic Lead

- Identify the target group(s) based on trigger (i.e. flu; epidemic/pandemic; Notifiable Disease or Condition outbreak; other) and as per applicable provincial schedule(s) and eligibility criteria [\[hyperlink to applicable Appendices\]](#) and [\[eligibility criteria\]](#)
- Select the date(s) and location for the clinic in collaboration with community stakeholders as required (i.e. post-secondary institutions, daycares, etc.).
- Assess the staff and supply needs as per zone requirements based on expected number of clients to be immunized, distance to be travelled, resources available and existing zone protocols.
- Recruit staff as per established zone process.

- Ensure verification of the inventory on hand in the zone. Sufficient quantity may be considered as the target number of expected clients plus 10% surplus in case of additional clients, wastage, or other unforeseen circumstances on clinic day.
  - If sufficient quantity is on hand, the planning stage is complete.

### Role of the Zone Bio-Coordinator

- If an insufficient quantity is on hand, the Zone Bio-Coordinator secures stock.
  - When possible this will occur a minimum of one week prior to the scheduled clinic or with as much notice as possible the provincial Bio-Depot.

### Role of the Nurse Immunizer

- Immunizers will confirm their availability with the Clinic Lead as soon as possible if recruitment for a clinic is requested.
- All immunizers must have current immunization competency and certification as outlined in the NSHA Immunization Policy [hyperlink to new policy when approved], the NSHA SOP [hyperlink to new SOP once available] and the Nova Scotia Immunization Manual <http://novascotia.ca/dhw/cdpc/documents/Immunization-Manual.pdf>

## PART 2-SET UP MASS IMMUNIZATION CLINICS

- Each clinic lead, nurse immunizer and admin/data entry clerk who are attending mass immunization clinics will be required to go equipped with a dedicated laptop device for use of Panorama onsite.
  - Devices may not be shared as each user will need access to their own account.
  - For those Staff who have not been assigned a regular laptop for day to day use (i.e. temporary/casual positions) the zones will have a process in place to ensure availability of a device for use at the clinic.
- Timing for set-up of clinics is at the discretion of each zone based on resources.
  - Event set-up should be completed in Panorama prior to the scheduled clinic.

## Role of the Admin/Data Entry Clerk

- Search Panorama for the mass immunization event title. [\[User Guide\]](#)
  - If the event exists, update event information as required.
  - If the event does not exist, create the immunization event.
    - The naming convention used for mass immunization clinics is “**zone-venue-agent-date**” (i.e. WZ-MiddletonRegional-MenB-YYYYMMDD)
- Lookup the Service Delivery Location (SDL.) [\[User Guide\]](#)
  - If the SDL exists, set the event to the SDL.
  - If the SDL does not exist, submit a ticket to the online help desk to request support in setting up a new SDL.  
<https://ictservices.nshealth.ca/assystnet/application/assystNET.jsp>
- Add the immunizing agents to the event. [\[User Guide\]](#)
- If clients are identified prior to a clinic, search the client [\[User Guide\]](#)
  - **If the client already exists in Panorama, review and update the profile.** [\[User Guide\]](#) If the client does not exist, create a new client profile. [\[User Guide\]](#)
    - In order to ensure the accuracy of data for reporting purposes and to minimize duplicate profile entries, it is extremely important that a careful and extensive client search is completed prior to creating a new profile.
      - Always search first using a Nova Scotia HCN as the only criteria
        - If no HCN, the first search may be done using an alternate client number from the drop down list.
      - If a HCN or other client number is unknown, not applicable, or the client is not found in a search using this criteria; clear the HCN field and search using the following criteria in any combination available:
        - Name (first and last); gender; date of birth
      - If still no results; search only the client first and last name using a wildcard symbol AND/OR a phonetic match
      - A minimum of three searches must be attempted prior to the creation of any new client profile.
  - If duplicate profiles are found for the same client, follow the process for reporting duplicates [\[hyperlink to Part 7-Other Documentation Considerations\]](#)

## Role of the Clinic Lead

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- Add the provider (Nurse Immunizer) details to the event once availability for the clinic has been confirmed. [\[User Guide\]](#)
  - All Nurse Immunizers must have an Active Directory in the electronic system including students, temporary and casual staff. [hyperlink to Part 6-Panorama Use for Non-Regular Staff](#)

### Role of the Nurse Immunizer

- Nurse Immunizers will confirm they can access the Panorama immunization module prior to clinic day. Any issues with software/hardware access are to be identified with sufficient time for rectification prior to the scheduled clinic date and brought to the attention of the Clinic Lead or designate.
- Nurse Immunizers with Panorama access will be able to use the application in any zone within Nova Scotia should it be required.

## PART 3-CONDUCTING MASS IMMUNIZATION CLINICS

### Role of the Clinic Lead (pre-clinic)

- If applicable, print the client worksheet for use at the clinic. [\[User Guide\]](#)
- Determine the required quantities for each vaccine
- Identify lot numbers with earliest expiration date in operational Holding Point Location (HPL)
- Move quantities from the clinic fridge to the coolers.
- Complete hardcopy “Vaccine Usage Form” to indicate inventory taken from the clinic fridge. [\[hyperlink to Appendix G\]](#)
- Set the auto-decrement to the clinic HPL. [\[User Guide\]](#)
- Pack in coolers and transport to the clinic location according to protocols outlined in the Nova Scotia Immunization Manual.  
<http://novascotia.ca/dhw/cdpc/documents/Immunization-Manual.pdf>
- Ensure all non-vaccine related supplies are packed and transported to the clinic location (includes any shared hardware required for Panorama use such as portable printers).

## Role of the Admin/Data Entry Clerk

- Register the client. Where an admin/data entry clerk is not available at a clinic for registration, this process may be completed by a nurse.
  - Registration includes completion of the upper portion of a reciprocal form by the client. [\[hyperlink to Appendix E-Sample Reciprocal Immunization Form\]](#)
    - For registration purposes, only the upper portion of client demographic information is required on the reciprocal form, except in the case of contingency planning where Panorama access is unavailable. [\[hyperlink to Part 9-Clinic Contingency\]](#)
- When a pre-populated worksheet is available for a clinic and a client is listed on the worksheet, **review and update the client profile.** [\[User Guide\]](#)
- If the client is not already listed on the clinic worksheet, or when a worksheet is not available, search for the client in Panorama. [\[User Guide\]](#)
  - If a client profile exists, add client to event list [\[User Guide\]](#)
    - **Review and update client demographic information** [\[Tips & Tricks updating client Information\]](#)

If a client profile does not exist, create a new profile using client demographic information. [\[User Guide\]](#)

- Refer to guidelines for searching prior to creating a new client profile [\[hyperlink to SOP pg.4 guidelines\]](#)
- Add the client to the event list [\[User Guide\]](#)
- **Review and update the profile** [\[hyperlink to user guide\]](#)

## Role of the Nurse Immunizer

- Search the client in Panorama **and review/update the profile.** [\[User Guide\]](#)
  - There is no expectation to update all sections of a client profile while at the clinic.
    - Only those sections relevant to the immunization being given that day must be entered (i.e. including but not limited to basic demographics, consent, allergies/contraindications/special considerations, previous known doses, etc.)
    - If time allows and a nurse has additional historical, demographic, clinical or other information it can be added at the clinic. If no time but additional information has been received this must be entered on the client file once back at the office.
    - All documentation must be completed in a timely way as per Nova Scotia nursing college standards.

- The nurse positively identifies the client by verifying two person-specific client identifiers as per NSHA policy CL-SR-025. [\[hyperlink to policy\]](#)
  - Confirm the client's full name, date of birth (together these are one identifier), and home address. Additional identifiers may be acceptable as per NSHA policy above.
- Obtain and record client consent for service. [\[User Guide\]](#) and [Part 5-Consent Processing\]](#)
- The Nurse Immunizer assesses the client to determine if immunization can proceed. If no contraindications exist, the immunization may proceed.
  - Immunize the client as per the NSHA immunization policy [Policies](#) [\[hyperlink to Public Health policy MM-IM-001\]](#) and the Nova Scotia Immunization Manual. <http://novascotia.ca/dhw/cdpc/documents/Immunization-Manual.pdf>
  - Record the immunization in Panorama. [\[User Guide\]](#)
    - **Print the immunization record at the clinic using the shared portable printer [\[User Guide\]](#) and provide a copy of full immunization record to the client regardless of which dose was given in a series.**
      - **The client should receive printed documentation after each dose is given.**
    - If an error in recording occurs, invalidate erroneous information and add correct information to the client record.
- If any vaccine doses were wasted during the clinic, advise the Clinic Lead for recording.
- Deferral at Clinics:
  - Immunization Deferral occurs in cases where a client is expected to receive the immunization in future but could not receive it on the day of the scheduled clinic (i.e. they are sick, more information is required from the HCP, etc.).
  - Refer to Part 7-Other documentation considerations [\[hyperlink to section\]](#)

### Role of the Clinic Lead

- End the clinic once all eligible clients in attendance have received their immunization.

## PART 4-POST CLINIC ACTIVITIES

### Role of the Clinic Lead

- Transport the remaining vaccine back to the Public Health Office (PHO) according to protocols outlined in the Nova Scotia Immunization Manual. <http://novascotia.ca/dhw/cdpc/documents/immunization-manual.pdf>

- Return the remaining vaccine to the PHO refrigerator.
  - Record all doses used, wasted, and returned on the “[Vaccine Usage Form](#)” [[hyperlink to Appendix G](#)] and forward the form to the Zone Bio-Coordinator.

### **Role of the Zone Bio-Coordinator**

- Review the vaccine wastage on the vaccine usage form
  - Enter vaccine wastage into Panorama.

### **Role of the Clinic Lead**

- Update the clinic event status to complete. [[User Guide](#)]

### **Role of the Nurse Immunizer**

- Each Nurse Immunizer will enter any paper immunization records they completed from the clinic into Panorama. [[User Guide](#)] This should occur under exceptional circumstances only and within the timeframe indicated for contingency data entry. [[hyperlink to Part 9-Contingency Planning](#)]
  - Depending on zone resources, where the Nurse Immunizer is not available to enter paper records into Panorama post-clinic, the clinic lead or admin/data entry clerk may enter records as a non-provider entry. These are never to be entered as historical records.

## **PART 5-CONSENT DIRECTIVES**

There are two types of consent directive processes outlined in this SOP (1) Consent for Service and (2) Consent for Disclosure. It is expected that Nurse Immunizers are familiar with both types of directive processes.

### **Process for Consent for Disclosure**

- Consent for Disclosure related to Panorama **must** be granted and put into effect by the DHW Privacy and Access Office.

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- Staff will advise clients who want to exercise this right to visit <https://novascotia.ca/dhw/phia/your-privacy.asp> for more information or consult the Privacy and Access Office at 1-855-640-4765 or [phia@gov.ns.ca](mailto:phia@gov.ns.ca)
- Once a request goes through the formal process the client file will not appear in a search. Nurses must obtain client consent to override this directive. [\[User Guide\]](#)
- Only Nurse Immunizers and Medical Officers of Health (MOHs) are given permission in Panorama to complete a consent override.

## **Process for Consent for Service**

### **During a Mass Immunization Clinic**

- Clients can choose to receive or refuse an immunization. Before an immunization is given, every client is asked if they understand, have any questions, and consent to being immunized.
  - Consent must be documented under the client profile in Panorama [\[User Guide\]](#)
- If a client is a child and the parent requests that the immunization be given but the child refuses, the immunization will not be given.
- In cases where a minor client requests immunization but parents do not consent, refer to “Consent of a Minor” section below.

### **Consent of a Minor**

- In cases where a minor client requests immunization but parents have denied consent, the Nurse Immunizer will assess the student’s capacity to consent as a minor. This will occur on a case-by-case basis with the understanding that there is no age of majority in Nova Scotia. It is the responsibility of the Nurse Immunizer to ensure the following criteria has been met before allowing the minor to consent to immunization:
  - They are able to understand what the vaccine is and why it is given.
  - They are able to understand what the risks and benefits are of receiving the vaccine.
  - They are able to understand what the risks and benefits are of not receiving the vaccine.

- The Nurse Immunizer will advise the client that an assessment must occur before they are able to receive the vaccine.
  - Schedule a time for the client to meet individually with the Nurse Immunizer to ensure enough adequate assessment of the client's capacity to consent and for additional conversation to occur with the parent should the client choose.
- Once the Nurse Immunizer has had a discussion with the client and confirms these criteria have been met then the client may proceed with consent for immunization and the vaccine may be administered.
  - The Nurse Immunizer must clearly document the conversation with the client including the minor's capacity to make the decision and their informed consent.
- If a client is determined by the Nurse Immunizer as lacking the capacity to provide informed consent, this should also be documented in the profile and immunization should NOT be given.
  - The client will be advised of the reason for withholding immunization.
  - The Nurse Immunizer may also encourage the client to have additional discussion with the parent regarding the desire for immunization.
- The Health Protection Manager will be informed of situations where a client overrides parental consent either:
  - Immediately where the client receives the vaccine on the same day
  - As soon as possible, but always prior to, the scheduled date of assessment where the client is expected to be assessed at a later date.

**Sharing of Personal Health Information (where consent of a minor was granted for immunization)**

- Sharing of personal health information, including record of immunization, generally requires client consent.
- If a student is assessed as capable of providing informed consent for immunization, the record of such immunization should be provided directly to the student. No further communication with the parent or guardian about the immunization should occur without the consent of the student.

For additional information, Nurse Immunizers will refer to their previous District Health Authority policies regarding consent to treatment until a NSHA policy is approved for use.

## Request for Release of Vaccine(s) to External HCPs

- Release of any publicly funded vaccine(s) to HCPs external to public health should be based on client eligibility criteria.
- Release of school based immunization program vaccine(s) to HCPs external to public health should be done in exceptional circumstances only and approved on a case by case basis in consultation with the Health Protection manager or designate.
  - Considerations for approval may include the following:
    - Extended efforts have been made by public health to accommodate immunization at the school or local public health office.
    - Denial of vaccine release will likely result in the child remaining unimmunized.
- If approved, public health must ensure that the HCP has been made aware of the exceptional circumstance and that record of the vaccine administration must be submitted to public health via reciprocal form [\[hyperlink to Appendix E\]](#) OR entered directly into Nightingale (not both).
- A **free issue vaccine request form** is used for release of school based vaccine to external HCPs. [\[hyperlink to Appendix F\]](#) and <https://novascotia.ca/dhw/cdpc/documents/forms/High-Risk-Special-Release-Vaccine-Order-Request.pdf>

## PART 6-PANORAMA USE FOR NON-REGULAR STAFF

- It is expected that all Staff involved in immunization clinics will utilize Panorama regardless of employment status.
- All Non-Regular Staff who provide immunization related services to clients will require an Active Directory account in order to access and record information in Panorama.
  - Active Directory accounts are set up through the User Access Process with NSHA Information Technology Services.
  - The manager or delegate must be made aware of new users as soon as possible to ensure timely system access prior to scheduled immunization clinic(s).
  - Requests for Active Directory accounts can be made through SharePoint at: <http://intra.nshealth.ca/it-self-service/SitePages/User%20Access%20e2%80%93%20Bulk%20Users.aspx>

- Hardware (i.e. laptops) will be made available for sign-out within the zones to any clinic staff who do not already have dedicated equipment assigned.
- All Non-Regular Staff will confirm they can access the Panorama immunization module prior to clinic day. Any issues with software/hardware access are to be identified with sufficient time for rectification prior to the scheduled clinic date.

## Nursing Students

- Nursing students who are completing a practicum placement with NSHA Public Health may administer vaccine to clients provided that:
  - The post-secondary institution is in support of nursing students immunizing
  - An Active Directory account has been established within NSHA
  - A user account has been set up within Panorama
    - Students will be manually entered as providers and a provider drop-down option will be available for “student”.
  - Immunization competency has been established as required for all other Nurse Immunizers [\[hyperlink to Part 1-Planning School Clinics \(Role of the Nurse Immunizer\)\]](#)
- A preceptor or other Nurse Immunizer must be assigned and available at all times during clinics to support and supervise nursing students who are administering vaccine.

## Part 7-OTHER DOCUMENTATION CONSIDERATIONS

### Clinic Event Deletions

- When a clinic event that has been set-up in Panorama is no longer relevant (due to cancellation, entry in error, etc.) the event will be deleted from the system by the zone that created it.
  - Deletions should **only** occur in cases where no action was taken in the event.
  - Deletions remove the event from Panorama; however any immunizations administered as part of an event are attached directly to individual client records and are not impacted.

- Whenever possible the individual who created the event in Panorama will also be responsible for deletion.

## Deletion of Errors

- If information is entered accidentally on a client file (i.e. an allergy, address, consent typo, etc.) it should be deleted, not invalidated.
  - Deletions are only invisible to the end user; this information is still retrievable and auditable. In contrast, invalidated information can still be seen by the end user but is greyed-out.
  - In some cases visibility of incorrect information may cause user confusion and more risk of harm to a client where the information was never relevant to them in the first place.
- Users are **NEVER** to delete clinical notes, another user's entry, or a past entry. In all of these cases the information would be updated so that all previous information is fully accessible and visible to the end user.
- Immunization administration errors entered by a nurse in a clinic setting would be invalidated (not deleted) and correct information entered.
- Any amendment made to a client file that falls outside client demographic data must include a clinical note to indicate which fields have been changed and the reason for the change.

## Duplicate Client Profiles

- If a duplicate client profile is found, an online incident will be submitted to the Service Desk at <https://ictservices.nshealth.ca/assystnet/application/assystNET.jsp>
  - The subject line should indicate "Panorama-possible duplicate client".
  - Include the client ID of all duplicate profiles; do not include client names, health card numbers or other identifying information in the ticket.
  - Tickets for Panorama will be forwarded to the appropriate support Staff for resolution.

## Immunization Deferral

- Immunization Deferral occurs in cases where a client is expected to receive the immunization in future but could not receive it on the day of the scheduled clinic (i.e. they are sick, more information is required from the HCP, etc.).
- The Nurse Immunizer assesses the client and uses clinical judgement as to the necessity for deferring an immunization.
  - Deferrals are documented on the deferral page in Panorama and should always include a comment in the comments section to indicate the reason for deferral. [\[User Guide\]](#)
    - The comments section is preferable over a clinical note as the clinical notes are not attached to a specific event and are more time consuming to locate. The end user must also know to search for a clinical note whereas comments are available to any user on the same page that indicates the deferral was made. If necessary a clinical note may also be included.
- Whenever possible, a deferral should indicate both the start and end date (i.e. the date the deferral was put in place and the date it is expected to end in immunization).
  - If an end date is unknown it may be left blank.

## Immunity Status Interpretation

- Where applicable (i.e. the client is a known contact person of high risk notifiable disease case) the immunity status of the client will be determined by the nurse based on immunization history, history of previous illness, and lab reports.
- Immunity status will be recorded in Panorama and updated as new information is available. [\[User Guide\]](#)
  - A nurse can take verbal report of immunity from a parent (i.e. history of a disease that would typically result in immunity) and indicate the report as verbal in the comments section. If the same student is later discovered to be non-immune this can be added to the client profile.

## Special Considerations [\[Special Conditions\]](#)

*\*confirm & include definition chart from training material*

- Special considerations are updated in the client profile where factors that may impact immunization exist.
  - If a consideration exists that is applicable to ALL immunization (i.e. a needle phobia) then a warning should be added rather than a precaution. [\[User Guide\]](#) Warnings will appear for any vaccine given whereas precautions appear for specific agents.
- Allergies recorded in Panorama will not affect the forecaster function. A contraindication (found under special considerations) should also be added to the client profile when a vaccine should not be administered again. Contraindications will adjust the forecaster.[\[User Guide\]](#)
  - If subsequent doses are being recommended, do not use contraindications; instead add a precaution (i.e. longer post-immunization observation period). [\[User Guide\]](#)
- Allergies being captured that are unrelated to immunization may all be listed together under “other” in the comments section. [\[User Guide\]](#)

## PART 8-ADVERSE EVENTS AT MASS IMMUNIZATION CLINICS

### Role of the Nurse Immunizer

- The Nurse Immunizer will make the Clinic Lead aware of any adverse events.
- If a client faints at the immunization clinic the event is reported in the Safety Improvement and Management System (SIMS). [\[hyperlink to SIMS user guide\]](#)
- In the case of reaction to a vaccine, an Adverse Event Following Immunization (AEFI) report is completed in addition to the SIMS report[\[User Guide\]](#) and [\[hyperlink to SOP for Reporting an AEFI\]](#)
- Clients who experience an AEFI are managed in accordance with the organizational policy for anaphylaxis [\[link to the new NSHA Anaphylaxis Policy once approved\]](#) and as outlined in the AEFI SOP and Nova Scotia Immunization Manual. <http://novascotia.ca/dhw/cdpc/documents/Immunization-Manual.pdf>
- All adverse events are documented in a clinical note on the client profile in Panorama. [\[User Guide\]](#)

## Role of the Clinic Lead

- The Health Protection manager will be made aware of any adverse events at the clinic as per established zone process.

## Part 9-CLINIC CONTINGENCY (PANORAMA INACCESSIBLE)

- Should Panorama access be interrupted at any stage of the clinic process, Staff will:
  - First attempt to connect to the system by tethering to their organization-issued mobile device.
  - If tethering is unsuccessful, revert to paper-based documentation.
  - Information will be entered into Panorama as soon as possible.

### Pre-Clinic:

- The **Vaccine Usage Form** will be used to document any vaccine taken from the fridge including the vaccine name, lot number, expiry date, and number of doses taken.  
[\[hyperlink to Appendix G\]](#)
- Pack the client worksheet (if applicable).

### During Clinic

- Reciprocal forms will be completed in full during the clinic and a hard copy provided to the client as a record of the immunization received.
- Where clinical notes or other additional documentation is required, it will be captured on a hard copy progress note and scanned/attached to the client profile once Panorama becomes available.

### Post-Clinic

- The **Vaccine Usage Form** will be used to document any vaccine returned to the fridge, the number of doses used at the clinic, and the number of doses wasted.  
[\[hyperlink to Appendix G-Vaccine Usage Form\]](#)
- The Clinic Lead will note on the Vaccine Usage Form that the system was unavailable at the clinic and doses used have not been decremented in Panorama.



- The Clinic Lead will be accountable to ensure that doses used have been entered against the event (within the timeframe outlined below) and to notify the Zone Bio-Coordinator once this has been completed.
- Each Nurse Immunizer will enter any paper immunization records they completed from the clinic into Panorama using the event worksheet. [\[User Guide\]](#). This should occur under exceptional circumstances only.
  - It is important to capture the doses given using the event worksheet and NOT through the individual client record.
  - Depending on zone resources, where a Nurse Immunizer is not able to enter paper records into Panorama post-clinic, the clinic lead or admin/data entry clerk may enter records as a non-provider entry. These are never to be entered as historical data.
  - Immunization records from the event must be entered into Panorama as soon as the system becomes available and within a one week maximum timeframe.
    - This process is important to ensure the accuracy of inventory reconciliation and prevent counting errors at subsequent clinics.
    - Zones will be accountable to allot the resources required for data entry to occur within the timeframe required.

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## RELATED DOCUMENTS

### Policies

NSHA Client Identification Policy [Interdisciplinary Clinical CL-SR-025]

[http://policy.nshealth.ca/Site\\_Published/NSHA/document\\_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=67407](http://policy.nshealth.ca/Site_Published/NSHA/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=67407)

NSHA Public Health Care Directive: Immunization Administration by Nurses (RN and LPN) Employed in Public Health [Public Health CD-PH-010]

[http://policy.nshealth.ca/Site\\_Published/nsha/document\\_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=69188](http://policy.nshealth.ca/Site_Published/nsha/document_render.aspx?documentRender.IdType=6&documentRender.GenericField=&documentRender.Id=69188)

**Reference and link to the new NSHA Immunization Policy** [Public Health MM-IM-001] once approved (*will supersede all former DHA immunization-related policies*)

**Reference and link to the new NSHA Anaphylaxis Policy** once approved (*will supersede all former related DHA policies*)

### Appendices

Appendix A-Definitions

Appendix B-Nova Scotia Immunization Schedule for Children

[https://novascotia.ca/dhw/cdpc/documents/13078\\_NsChildhoodImmPoster\\_En.pdf](https://novascotia.ca/dhw/cdpc/documents/13078_NsChildhoodImmPoster_En.pdf)

Appendix C-Nova Scotia Immunization Schedule for Adults

[https://novascotia.ca/dhw/cdpc/documents/13155\\_AdultImmunizationSchedule\\_En.pdf](https://novascotia.ca/dhw/cdpc/documents/13155_AdultImmunizationSchedule_En.pdf)

Appendix D-Nova Scotia School Immunization Schedule

[https://novascotia.ca/dhw/cdpc/documents/13153\\_SchoolImmunizationSchedule\\_En.pdf](https://novascotia.ca/dhw/cdpc/documents/13153_SchoolImmunizationSchedule_En.pdf)

Appendix E-Sample Reciprocal Immunization Form

<https://novascotia.ca/dhw/CDPC/documents/forms/Reciprocal-Notification-Form.pdf>

Appendix F-**Vaccine Order Request Form: Special Order**

<https://novascotia.ca/dhw/cdpc/documents/forms/High-Risk-Special-Release-Vaccine-Order-Request.pdf>

*This is a CONTROLLED document for internal use only. Any documents appearing in paper form are not controlled and should be checked against the electronic file version prior to use.*

Appendix G-Vaccine Usage Form

Appendix H-SIMS: Reporting Faints-A Step by Step Guide

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## Appendix A-Definitions

Consent for Disclosure	Consent granted by a client to a Nurse or MOH to view a file that has been masked by the DHW Privacy and Access Office. Masking is a process that limits the disclosure of specific portions of that client's personal health information.
Consent for Service	Consent given for the specific purpose of a given intervention (i.e. receipt of vaccine, or a series of vaccine, at school clinics).
Deferral	A postponement status assigned where a client is expected to have an eligible immunization at a date in the foreseeable future but could not receive it on the day originally scheduled.
Event	The clinic(s) held for a defined cohort of individuals. In the case of mass immunization and where more than one dose is required for a series, each round of dosing would be set up as separate events in Panorama.
Health Care Professional (HCP)	All persons employed by NSHA facilities, or NSHA funded facilities, as well as members of the medical staff, volunteers, board members, students, and others associated through contracts
Holding Point Location (HPL)	A discrete location where immunization product is kept in inventory. Immunization product must be received into, and issued from a specific HPL.
Immunization	The process by which immunity is conferred, either by injection of antigens (active Immunization) or by injection of serum containing specific antibodies (passive immunization).
Immunization Coverage	A measure of the extent to which immunizations administered cover the potential need in the population.
Immunization Team	Clinic Leads, PHNs, LPNs, and administrative support Staff who deliver the school immunization program.
Informed Consent	The process of giving information about a particular treatment or test in order for you to decide whether or not you wish to undergo a treatment or test. This process of understanding the risks and benefits of treatment is known as informed consent.
Lot Number	Number assigned to each vaccine by the vaccine manufacturer for identification purposes.
Non-Regular Staff	Refers to all learners, temporary and casual Staff who provide immunization related services to clients as part of assigned work

	activities within Public Health at the NSHA. This may include both administrative and nursing related functions.
Nurse Immunizer	Refers to all permanent status registered nurses and licensed practical nurses who provide immunization services to clients as part of assigned work activities within Public Health at the NSHA.
Panorama	An electronic public health surveillance system designed to increase efficiency in tracking vaccine usage, immunization coverage rates, and control of infectious notifiable diseases including outbreaks.
Publicly Funded Immunization Program	A provincially determined list of publicly funded vaccine which falls under various routine and non-routine eligibility criteria including childhood, school, adult and high risk categories.
Service Delivery Location (SDL)	The location where a service, such as immunization, is received by the client (i.e. the specific school or office where a clinic is held).
Staff	Unless specifically limited by a certain policy, refers to all employees, physicians, learners, volunteers, board members, contractors, contract workers, franchise employees, and other individuals performing work activities within NSHA.
Vaccination	Vaccination is a method of preventing certain infections. It consists of introducing preparations called Vaccines into an organism for the purpose of inducing active immunity.
Vaccine	An antigenic preparation which, when introduced into an organism, induces the production of antibodies capable of fighting off infection of that organism by a given micro-organism.
Zone Bio-Coordinator	Administrative personnel (i.e. secretary, clerk) assigned within the Zone to the functions related to vaccine inventory, storage, handling and distribution.

## Appendix B-Nova Scotia Immunization Schedule for Children

# Routine Childhood Immunization Schedule

Childhood immunizations have changed in the past few years. This schedule reflects these changes and may be different from what you or your children may have received in the past.

The immunizations shown on this schedule are those that are given **free of charge**.

**High-risk children may be eligible for additional vaccines.** For more information, talk to your health care provider or call your local Public Health Services office.

		SCHEDULE					
		2 months	4 months	6 months	12 months	18 months	4-6 years
<b>VACCINES</b>	<b>DTaP-IPV-Hib</b> Diphtheria, tetanus, acellular pertussis (whooping cough), polio, and Haemophilus influenzae type b vaccine	✓	✓	✓		✓	
	<b>Pneumo Conj.</b> Pneumococcal conjugate vaccine	✓	✓		✓		
	<b>Men C Conj.</b> Meningococcal group C conjugate vaccine				✓		
	<b>MMRV*</b> Measles, mumps, rubella and varicella vaccine				✓	✓*	✓*
	<b>Tdap-IPV</b> Tetanus, diphtheria, acellular pertussis (whooping cough), and polio vaccine						✓

\*The second dose of MMRV can be given only once between 18 months and 6 years of age.

### Seasonal Flu Vaccines

- Seasonal flu vaccines are free for all Nova Scotians. They are recommended for all adults and children EXCEPT for babies under 6 months.
- Seasonal flu vaccines are strongly recommended for anyone who lives with or takes care of a child under 5 years, and for anyone living in a home where a newborn is expected during influenza season (October to April). This includes both adults and older children.
- Seasonal flu vaccines are also strongly recommended for children with a health condition that places them at high risk and for anyone who lives with or takes care of these children.
- Children under 9 years old getting their first flu vaccine need 2 doses.

For more information about seasonal flu vaccines, see: [novascotia.ca/DHW/CDPC/flu.asp](http://novascotia.ca/DHW/CDPC/flu.asp)

Aussi disponible en français



13/51/APRIS REV15-16



## Appendix C-Nova Scotia Immunization Schedule for Adults

### Immunization Schedule for Adults

The immunizations shown here are given free of charge.

Adults at high risk may be eligible for additional vaccines. For more information, talk to your health care provider or call your local Public Health office.

		SCHEDULE	
		Adults to age 64	Adults 65 and older
VACCINES	<b>Seasonal Flu<sup>1</sup></b> <i>Influenza vaccine (every flu season)</i>	✓	✓
	<b>Td</b> <i>Tetanus, diphtheria vaccine. (Every 10 years. 1 dose should be given as Tdap<sup>2</sup> if not previously given in adulthood.)</i>	✓	✓
	<b>Pneumococcal polysaccharide</b> <i>Pneumococcal polysaccharide vaccine (1 dose)<sup>3</sup></i>	✓ <i>(high risk only)</i>	✓
	<b>MMR</b> <i>Measles, mumps and rubella vaccine (2 doses)</i>	✓ <i>(Adults born in 1970 or later)</i>	

1 For more information about flu vaccine, see [novascotia.ca/flu](http://novascotia.ca/flu)

2 Tdap (tetanus and diphtheria toxoid combined with acellular pertussis vaccine)  
 • All adults who have not received a dose of pertussis vaccine in adulthood should receive a single dose of Tdap for the prevention of pertussis (whooping cough), particularly if they are in regular contact with infants.

3 In most cases, pneumococcal polysaccharide vaccine should be given only once. More than one dose decreases the effectiveness of the vaccine. For some people, re-vaccination may be required.  
 For more information on re-vaccination,  
 • talk to your health care provider or  
 • visit [www.phac-aspc.gc.ca/publicat/clg-gcl/p04-pneu-eng.php](http://www.phac-aspc.gc.ca/publicat/clg-gcl/p04-pneu-eng.php)

## Appendix D-Nova Scotia School Immunization Schedule

### School Immunization Schedule

The immunizations shown on this schedule are those that are given **free of charge**.

**Children at high risk may be eligible for additional vaccines.** For more information, talk to your health care provider or talk to your local Public Health Office.

		School Year
		Grade 7
<b>VACCINES</b>	<b>HPV (for both boys and girls)</b> Human papillomavirus vaccine (2 doses)	✓
	<b>Hepatitis B (HB)</b> Hepatitis B vaccine (2 doses)	✓
	<b>Tdap</b> Tetanus, diphtheria, and acellular pertussis (whooping cough) vaccine	✓
	<b>Meningococcal Quadrivalent</b> Meningococcal Quadrivalent vaccine (Groups A, C, Y and W 135)	✓

13153 / APR15 REV15-16

Appendix E-Sample Reciprocal Immunization Form

# Reciprocal Notification Form

Public Health Services  
7 Melior Avenue, Unit 5  
Dartmouth, Nova Scotia  
BSB 0E8



www.gov.ns.ca/dhw

This form is to be completed by the person administering a vaccine.  
The blue copy is to be sent to the local Public Health Office.  
The yellow copy is to be sent to or retained by the health care provider.

Please print firmly with a ball-point pen—you are making 2 copies.

PATIENT INFORMATION																											
Surname		Given Names		Phone Number																							
Address					<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>																						
Address					Postal Code																						
If Attending School, Name of School																											
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>					<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>			<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>			<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>							<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>					<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> <td style="width: 20px;"> </td> </tr> </table>				
Y	M	D	M	F	Health Card Number																						
Date of Birth			Sex																								
Health Care Provider's Name (Please Print)				Health Care Provider's Phone Number																							

ANTIGEN ADMINISTERED. CHECK (✓) BOXES WHERE APPROPRIATE				
<b>DTaP-IPV-Hib</b> <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th <input type="checkbox"/> Meningococcal group C <input type="checkbox"/> Tdap-IPV	<b>Hepatitis B</b> <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <b>Hepatitis A</b> <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <b>MMR</b> <input type="checkbox"/> 1st <input type="checkbox"/> 2nd	<b>Varicella</b> <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> Pneumococcal Polysaccharide <input type="checkbox"/> Td <b>MMRV</b> <input type="checkbox"/> 1st <input type="checkbox"/> 2nd	<b>Influenza</b> <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> Hib <input type="checkbox"/> Tdap Other _____ <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	<b>Pneumococcal Conjugate</b> <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <b>Hepatitis A &amp; B</b> <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd Other _____ <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd
Site:	Site:	Site:	Site:	Site:
Dosage:	Dosage:	Dosage:	Dosage:	Dosage:
Route:	Route:	Route:	Route:	Route:
Lot #:	Lot #:	Lot #:	Lot #:	Lot #:

\_\_\_\_\_ Date Given (YYMM/DD)
\_\_\_\_\_ Signature of Person Giving Vaccine

\_\_\_\_\_ Office / Location where Immunization was Given
13068/JUN12 REV12-13

**Appendix F-Vaccine Order Request Form: Special Order**

**Vaccine Order Request:  
High Risk or Special Order**

**Place Vaccine Order**

Phone:  
Fax:  
Email:

Immunization Provider Information		
Provider Name	Email	
Professional Designation <input type="checkbox"/> Physician <input type="checkbox"/> Nurse Practitioner <input type="checkbox"/> Nurse <input type="checkbox"/> Pharmacist	Public Health Practitioner Yes <input type="checkbox"/> No <input type="checkbox"/>	
Practice Address		
Contact Person		
Phone:	Fax:	Email:
Order Date	Mode of Delivery Allow 2-3 days	<input type="checkbox"/> Pick up <input type="checkbox"/> Courier

Patient Details			
Patient 's Last Name	First Name	HCN	DOB
Reason for Vaccine Request	Specify details		
<input type="checkbox"/> Close contact or exposure to VPD			
<input type="checkbox"/> High Risk Condition			
<input type="checkbox"/> Other			

Immunizing Agent/ Product requested	# doses	Adult	Pediatric
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

Approved by: _____ Date _____
-------------------------------

5/24/2013

Appendix G-Vaccine Usage Form

*\*To be added here*

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## Appendix H-SIMS Reporting Faints: A Step-By-Step Guide

### SIMS

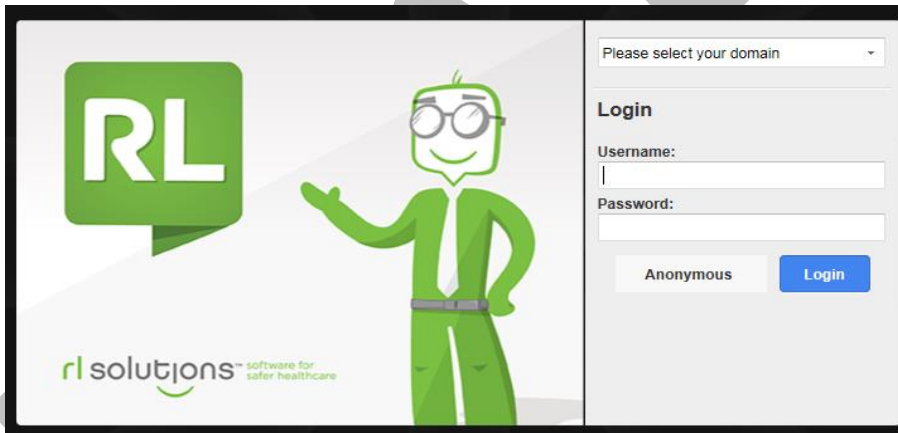
(Safety Improvement & Management System)

## Reporting Faints – A Step-By-Step How-To Guide

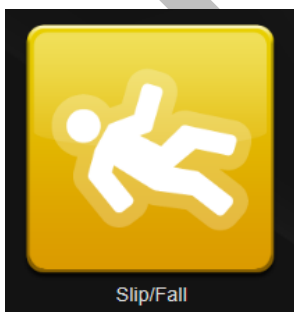
- ❖ Click on SIMS icon on desktop



- ❖ Sign in with Username/Password



- ❖ Click on Slip/Fall icon



## Slip/Fall

### General Information about Slip/Fall Event

1. Specific event type – choose other
2. Other specific event type – enter faint
3. Type of person affected – choose community based client
4. Severity level (reported) – choose no harm incident
5. Harm/injury occurred – choose no
6. Equipment involved/malfunctioned – choose no
7. Give brief factual description (what occurred and nursing action)

**Slip/Fall**

**Confidential Quality Improvement Information pursuant to the  
Quality Improvement Information Protection Act**

General information about the slip/fall event

Specific Event Type	* Other (please specify) ▾
Other Specific Event Type	* <input type="text"/>
Type of Person Affected	* <input type="text"/> ▾
Severity Level (Reported)	* <input type="text"/> ▾
Harm/Injury occurred?	* <input type="text"/> ▾
Equipment Involved/Malfunctioned?	* <input type="text"/> ▾
Brief Factual Description	* <input type="text"/>

Slip/Fall Event Details

- 1. Fall witnessed – choose appropriate answer
- 2. Mobility status at time of fall – leave blank
- 3. Attempted action prior to fall – leave blank
- 4. Was lift equipment used – leave blank
- 5. Fall risk assessment done on admission - leave blank
- 6. Time of last fall risk assessment – leave blank
- 7. Last fall risk assessment score – leave blank
- 8. Fall risk assessment score post fall – leave blank
- 9. Restraints in place – leave blank
- 10. History of falls in last month – leave blank
- 11. Medication contributed to fall – choose yes
- 12. Fall safety precautions in place at time of fall - leave blank

**Slip/Fall Event Details**

Details of the slip/fall event

Fall witnessed?	<input type="text"/>
Mobility status at time of fall	<input type="text"/>
Attempted action prior to fall	<input type="text"/>
Was lift equipment used?	<input type="text"/>
Fall risk assessment done on admission?	<input type="text"/>
Time of last fall risk assessment	<input type="text"/>
Last fall risk assessment score	<input type="text"/>
Fall risk assessment score post fall	<input type="text"/>
Restraints in place?	<input type="text"/>
History of falls in the last month?	<input type="text"/>
Medication contributed to fall?	* Yes <input type="text"/>
Fall safety precautions in place at time of fall?	<input type="text"/>



Medication Involved

- Click add to enter medication details

**Medication Involved**

Click Add to enter medication details

Medication(s) Involved

Drug Generic Name Ordered	Drug Generic Name Administered
Not Specified	

[Add](#) [Modify](#) [Delete](#)

When or Where Event Occurred

- Event date (dd/mm/yyyy)
- Time (use 24 hour clock)
- Authority/Zone/Branch – choose correct Zone
- Site – choose Public Health
- Medical service or department – choose Public Health
- Floor/Clinic/Unit – choose PH – Protecting Health team

**When and Where Event Occurred**

Event Date \*

dd/mm/yyyy

Time (00:00) \*

(Please use 24 hour time)

Authority/Zone/Branch \*

Site \*

Medical Service or Department \*

Floor/Clinic/Unit \*

Click TRASH BIN to clear location values

Person Affected Details (Details of the person affected by the event)

- Medical record number – leave blank
- Health card number (MSI) – enter HCN if provided
- Alternate number (OOP/Mil/etc.) – leave blank
- Person affected first name - \*mandatory field\*
- Person affected last name - \*mandatory field\*
- Person affected date of birth – dd/mm/yyyy
- Person affected age – will automatically populate field

**Person Affected Details**

Details of the person affected by the event

Medical Record Number

Health Card Number (MSI)

Alternate Number(OOP/Mil/etc.)

Person Affected First Name \*

Person Affected Last Name \*

Person Affected Date of Birth

dd/mm/yyyy

Person Affected Age

Disclosure Details

- Was the event initially disclosed to patient/client – choose yes
- Was the event disclosed to the decision maker/family – choose yes

Disclosure Details

Was the event initially disclosed to patient/client?

Was the event disclosed to the decision maker/family?

Parties' Involved/Notified/Witnesses

- Click add
- Add any staff involved/witnesses/family that was notified by filling in drop-down attachments

**Parties Involved / Notified / Witnesses**

Click Add to enter parties involved / notified / witnesses in the event

Party Involved / Notified / Witnesses

Role	Name
Not Specified	

[Add](#) [Modify](#) [Delete](#)

Attachments

- Do not add any health record or human resource documentation

**Attachments**

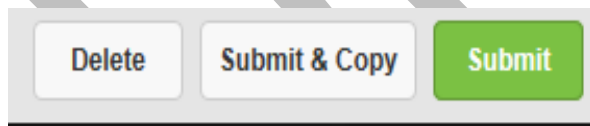
**Do NOT attach ANY health record or human resources documentation.**

Attachments

FileName	Category	Description
Not Specified		

[Open](#) [Add](#) [Modify](#) [Remove](#)

- ❖ Submit (located on the bottom right of screen)



**HISTORY**

<b>CURRENT VERSION</b>
<p>1. <b>Prepared by:</b> Catharine Langlois (Consultant-Health Protection)</p>
<p>2. <b>Reviewed by:</b> Michelle Huntington (PHN-Eastern Zone); Krista Piek (PHN-Northern Zone), Karin Brown (PHN-Central Zone); Stacey Bent (PHN-Western Zone); Kara Smith (LPN-Western Zone), Health Protection Provincial Team (HPPT) –managers; Panorama Immunization working group members as part of User Acceptance Testing January 22-26, 2018</p>
<p>3. <b>Version #:</b> February 1, 2018</p>

**Version History**

(To Be Completed by the Policy Office)

<b>Major Revisions (e.g. Standard 4 year review)</b>	<b>Minor Revisions (e.g. spelling correction, wording changes, etc.)</b>