

# P16-0371 Panorama Project

## **Panorama Immunization User Manual**

# **PNS IMM 101 - Single Immunization**

Version 1.0

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### **1 PURPOSE**

The purpose of this course is to provide detailed instructions on how to manage client immunization information on Panorama. This course is intended for all prospective Panorama users identified as health providers, e.g., nurses, as well as clerks, who will perform some tasks. The course is a pre-requisite for all the remaining immunization courses.

After completing the course, users should be able to:

- Use the client immunization profile
- View and record immunizations, complete special considerations, deferrals, AEFIs
- Record historical, provider, and non-provider immunization



### **2 CLIENT IMMUNIZATION PROFILE**

The client immunization profile contains all relevant information related to a client's immunization status. This section presents the documented immunizations that have been recorded for the selected client, a detailed summary of administered immunizations, special considerations related to the client, risk factors, deferrals, consents, participation in mass immunization events, and any past adverse events following immunization, and the immunization forecaster.

**Nova Scotia Standard Operating Procedure (SOP) Check:** You should be aware that a detailed SOP is available governing immunization and associated activities. Please refer to your SOP to ensure you are aware of the required protocols and responsibilities for each staff role in preparation for the provision of immunizations in Nova Scotia.

### 2.1 Client Immunization Profile

If the Client is not *In Context*, go to the Search screen and search for the client. See CLT 101 for more information on setting clients in Context.

Once the client is located, select the client in the **Search Results Table** and click **Client Imms Profile**. This will set the client *In Context* and proceed directly to the **Client Immunization Profile** screen.

Searc	h Res	sults							[	Client Quick Entry	Create Client
Pre	view	Update	Set In Context	Create	Cohort	Clier	nt Imms Profile				
-	▼	Client ID 💠	Emirate ID Nun	nber 🗘	First N	lame	Last Name	Gender ≎	Date of Birth	Health Region \$	Active \$
~	0	836			Colin		Firth	Male	2011 Sep 09	Sample Jurisdictional Organization	Active
otal	:1			_						1	20 -

If the client is already *In Context*, go to the Left-Hand Navigation, find the **Immunization** section, and select the **Immunization Profile**.

Immunization	_
	=
📌 Recent Work	
🔔 Client	~
<u></u> Cohort	~
🥜 Immunizations	~
Immunization Profile	
Special Considerations	

The Client Immunization Profile screen will be displayed.



<b>Client Immunization Prot</b>	file	Launch Report Add to WQ Sav	e Reset 🛛 🖓 🖨 ?
Alerts			Active
Client ID: 42	Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health Card No: 0091000000	Date of Birth / Age: 2005 Feb 24 / 12 years 8 months
Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Additional ID: Provincial health service provider identifier / -	

#### 2.1.1 View Immunization History

All historical client immunizations are displayed in Panorama in two formats, using a **Summary Grid** and a **Detailed Data Table.** 

The **Immunization History - Summary Grid** displays only the agent/antigen and date of administration.

The **Immunization History - Detailed Data Table**, which is presented immediately below the Summary Table, provides additional information such as the client age at administration, the status (whether the immunization is considered valid based on specific rules), dose revisions, trade names, anatomical site of immunization administration, and the volume of antigen/agent that was administered.

Imm	unizati	on Details											× (	\$
Immur	nization	History - Summa	ry Grid											
	Ager	nt *		Date Admin	istered	Date Administe	red	Date Admi	nistered	Date Administered		Date Administered	Date Administ	ered
0	BCG			2015 S	ep 09									
0	DTaF	P-IPV-Hib-HB		2015 N	ov 09									
Immur	nization	History - Detailed	d Data Table											
								[	<ul> <li>Add Single</li> </ul>	Immunization		<ul> <li>Add One or More</li> </ul>	Immuniza	tions
Up	date	View Dele	te											
	8	Agent ≎	Date Administer	ed 🔺	Age at Adminis	tration 💠	Status	\$	Revised Dose ≎	Trade Nam	e \$	Body Site \$	Volur	ne ¢
		BCG	2015 Sep 09	9	Om Od		Valid							
$\bigcirc$		DTaP-IPV- Hib-HB	2015 Nov 09	9	2m 0d		Valid							
Spe	cial Cor	A	EFI Allergi	es D	eferrals	Risk Factors	TBS	ikin Test	IGRA Tests	s Mass Imm	is Even	t View Consent	IHI	

#### 2.1.2 Invalid Immunizations

Any immunizations that do not meet the forecaster rules are marked as invalid in Panorama. Invalid doses are displayed with an 'X' mark in the immunization date in the **Immunization History- Summary Grid** table.

In the example below, a client was administered MMR below the minimum age of 12 months, and an X is displayed in the **Summary Grid** table alerting the clinician that this dose is invalid. Additionally, the status of the dose is identified as Invalid in the **Detailed Data Table** below the Summary Grid.



Immu	inizati	on Details											.1	\$
Immun	ization	History - Summa	ry Grid											
	Ager	nt *		Date Admin	nistered Date Administered			istered /	Date Administered ≎	Date Adm	Date Date Administered A		tered	
0	BCG			2015 S	ep 09									
0	DTaP-IPV-Hib-HB			2015 N	lov 09									
0	O MMR			2016 J	un 09 (X)									
Immun	ization	History - Detailed	d Data Table											
									<ul> <li>Add Single</li> </ul>	Immunization	- A	dd One or More	Immuniz	ations
Upo	date	View Dele	ete											
	B Agent ≎ Date Administer			ed 🔺	Age at Administr	ation ᅌ	Status	\$	Revised Dose 🗘	Trade Name	\$В	ody Site 🗘	Volu	ıme 🗘
	BCG 2015 Sep 0		9	Om Od		Valid								
	DTaP-IPV- Hib-HB 2015 Nov 0		2015 Nov 0	9	2m 0d		Valid							
$\bigcirc$		MMR	2016 Jun 09	)	9m 0d		Invalid							

Invalid doses will not be counted towards the client's total series when planning future doses. For example, the client in the above example will require Dose 1 of MMR to be administered as the Invalid dose will not count as Dose 1.

Immunization Forecast by	y Agent/Antige	n						× 👔		
Last Forecast Ran On: 2017 Mar 23										
Forecast Status calculated as of: 2017 Mar 23 Refresh Forecast										
lmmunizing Agent/Antigen ▲	Forecasted Dose # ≎	Codes 🗘	Volume \$	Brand \$	Eligible 🗘	Due 🔺	Overdue \$	Forecast Status \$		
MMR	1				2016 Sep 09	2016 Sep 09	2016 Sep 10	Overdue		
Pneumococcal Prevnar 13	1				2016 Sep 09	2016 Sep 09	2016 Sep 10	Overdue		
Polio-OPV	1				2016 Sep 09	2016 Sep 09	2016 Sep 10	Overdue		
Varicella	1				2016 Sep 09	2016 Sep 09	2016 Sep 10	Overdue		
DTaP-IPV-Hib-HB	2				2016 Dec 09	2016 Dec 09	2016 Jan 10	Overdue		

Invalid doses will be considered when calculating minimum intervals for planned doses for safety/clinical effectiveness reasons.

Scroll down to the **Invalid/Uncounted Immunization** section of the **Client Immunization Profile** to view the reasons that the dose was marked as invalid.

Invalid Immunization Rea	asons		
Imms Agent 🍝	Date of Immunization *	Invalid/Uncounted Antigens	Reason
MMR	2017 Apr 15	Measles	Professional judgement
MMR	2017 Apr 15	Mumps	Professional judgement
MMR	2017 Apr 15	Rubella	Professional judgement
Total: 3	( «) «		10 -

Each antigen will be listed with one of the following corresponding invalidation reasons:

• Client administered with same agent on same day: If two doses of the same agent/antigen are given on the same day, Dose 1 is marked valid and Dose 2 is marked as invalid. All the antigens within the invalid dose will have this reason.



- Additional dose resulting from use of a multi-antigen agent: If an antigen in a multi-antigen agent is not "Extra Dose Safe" (EDS), and is provided as an additional dose as part of this agent, this reason will display for the invalid antigen.
- Administered date is less than or greater than eligibility date: If neither of the above two reasons are given, the dose will have this reason. This is what will be seen most often, meaning that a minimum interval, minimum age, or maximum age was violated.

If you agree with the Forecaster designation of an administered dose as invalid, and the stated rationale, no changes or action on the part of the user will be required.

If you *disagree* with the Forecaster assessment that an administered dose is invalid, do not use the Forecaster assessment of a client immunization status to determine future doses for the vaccine until the issue is resolved (follow the NS policy to obtain a second clinical opinion if required).

The Forecaster will not invalidate doses in the following cases:

- · Additional doses beyond a series end are administered
- Dose was received by a route other than what is recommended
- · Higher (or lower) than recommended vaccine dosage was administered
- Less than a full dose of vaccine given due to syringe/needle malfunction

These and other reasons can be applied by an authorized user to manually mark vaccines as invalid.

Immunization doses marked as invalid by the user will be marked with 'OX' (as overridden) not 'X'.

	lmmu	nization Details						× 👔
h	mmuni	zation History - Summary Grid						
		Agent +	Date Administered	Date Administered	Date Administered ≎	Date Administered	Date Administered ≎	Date Administered
	0	BCG	2015 Sep 09					
	0	DTaP-IPV-Hib-HB	2015 Nov 09 (OX)					
	0	Rotavirus (Rot-5)	2016 Apr 10	2016 May 01 (X)	2016 Jun 09			
	0	MMR	2016 Jun 09 (X)					

#### 2.2 Immunization Override

There are two types of immunization override. These include:

- From Valid to Invalid, and
- From Invalid to Valid



If a clinician determines that a recorded immunization that is marked as Valid is actually invalid for a particular reason (such as an incorrect route or dosage or some other clinical reason), the status of this immunization can be manually set to Invalid. An immunization may also be changed from Invalid to Valid.

**Note**: Only users authorized to make such decisions should proceed to invalidate immunizations as this action directly affects the Forecaster and the recommendations for client immunizations.

#### 2.2.1 Changing from Valid to Invalid Status

1. To invalidate an immunization, navigate to the **Immunization Profile** screen. Click the radio button beside the specific immunization in the **Detailed Data Table**, and click **Update**.

Update	View Delete	•					
8	Agent +	Date Administered ≎	Age at Administration	Status \$	Trade Name 🗘	Body Site 🗘	Volume \$
•	HPV-4	2017 Nov 13	12y 8m	Valid	Gardasil	Arm: upper left	0.5 mL
	Men- C-ACYW-135	2017 Nov 13	12y 8m	Valid	Menveo	Arm: upper right	0.5 mL

- 2. The **Update Immunization** screen will appear. The user can select the combined agent or any single antigen of the agent by clicking on the radio button beside the desired choice.
- 3. Click the **Override Status** button.

S	tatus	Detail	s			✓ 👔
	Ove	rride S	tatus	Reset Status		
				Agent	Dose Number	Status
	•	•		HPV-4		Valid
	0	verride	Status	Reset Status		
		B	Ant	igen	Dose Number	Status
			HP	V-4	1	Valid

4. The **Status Override** screen will appear. The user must identify the **Status Change Reason** for overriding the immunization status. Panorama provides a warning to the user regarding the implications of the status override action.



Status Override				Apply	Reset	•	×
Warning: If this override is applied, the immunization status w * Status Change Reason:	vill be	Invalid (override). Once overridden, ti	he forecaster will no longer	validate this	dose.		
Given after vaccine expiration date.	-				( 2 S		
HepB and Rabies invalid if not given as IM.					Apply	Re	set
Internationally adopted.	Ξ						
MMR and VZV too close to the receipt of blood products.	18	Dose Number	Status		_	_	_
Other	18						
Patient was not within the licensed age group.			Valid				
Stem cell transplant.							
Stored at unacceptable temperatures prior to administration	-	Dasa Number	Ctatus			_	

5. Click **Apply** to confirm the status override.

Status Override	Apply Reset	0	×
Warning: If this override is applied, the immunization status * Status Change Reason: Other * Status Change Reason Other: Clinical judgement.	will be Invalid (override). Once overridden, the forecaster will no longer validate this dose.		
(230 characters remaining.)			

6. If the Status Change Reason is Other, the user is required to enter a comment in the Status Change Reason Other text box, supporting the change to the immunization record. If selecting a different Status Change Reason, an optional comment may be added in the Comments field at the bottom of the Update Immunization screen. Click Add and type the comment. Click Apply.

Comments and Status Updates				
	* Comments To create a new record click Add.	Add		

- 7. When all information has been updated, click **Apply** again.
- 8. Click Save.
- 9. Each time an immunization status is updated, the reason is documented in the **Comments and Status Updates** section for the immunization.

Comm	ents and Status Update	S				× 🙎
* Cor	nments					Add
▼	Date *	Antigens ≎	Old Status 🗘	New Status 🗢	Status Change Reason \$	Recorded By 🗘
0	2018 Jan 01	All	Invalid (override)	Valid	Override was performed in error	ALL, parsoncm



#### 2.2.2 Changing from Invalid to Valid Status

 To change an invalid immunization to valid, navigate to the Immunization Profile screen. Users will see the Immunization displayed in the Summary Grid with an "X" in the Date Administered cell, indicating that Panorama has invalidated a vaccine based on Forecaster rules.

Im	Immunization Details										
Imn	mmunization History - Summary Grid										
e	9	Agent +	Date Administered +	Date Administered \$	Date Administered \$	Date Administered 0	Date Administered O	Date Administered \$			
¢	>	DTaP-IPV-Hib	2004 May 04	2004 Jul 04	2004 Sep 03	2004 Dec 01 (X)					
•	>	Men-C-C	2005 Mar 06								
¢	>	MMRV	2005 Mar 06	2009 Mar 06							
4	>	Pneu-C-13	2004 May 04	2004 Jul 04	2005 Mar 06						
•	>	Tdap-IPV	2009 Mar 06								

2. Click the radio button beside the specific immunization in the **Detailed Data Table** and click **Update**.

Immunizatio	n History - Detailed	Data Table						
	-			▼ Add	Single Immunization	<ul> <li>Add One or More Immunizations</li> </ul>		
Update	View Delete	•						
2	Agent +	Date Administered	Age at Administration	Status 🗘	Trade Name 🗘	Body Site 🗘	Volume 🗘	
	DTaP-IPV-Hib	2004 May 04	1m 29d	Valid				
	DTaP-IPV-Hib	2004 Jul 04	3m 29d	Valid				
	DTaP-IPV-Hib	2004 Sep 03	5m 29d	Valid				
•	DTaP-IPV-Hib	2004 Dec 01	8m 26d	Invalid				
	Men-C-C	2005 Mar 06	1y 0m	Valid				
	MMRV	2005 Mar 06	1y 0m	Valid				
	MMRV	2009 Mar 06	5y 0m	Valid				
	Pneu-C-13	2004 May 04	1m 29d	Valid				
	Pneu-C-13	2004 Jul 04	3m 29d	Valid				
	Pneu-C-13	2005 Mar 06	1y 0m	Valid				
	Tdap-IPV	2009 Mar 06	5y 0m	Valid				

3. The **Update Immunization** screen will appear. The user can select the combined agent or any single antigen of the agent by clicking on the radio button beside the desired choice. Click the **Override Status** button.



pdate I	mmun	ization		Apply Reset	₽×
Status	Details			✓ [	\$
Ove	rride Sta				
		🖹 Agent	Dose Number	Status	
۲	•	DTaP-IPV-Hib		Invalid	
0	verride \$	Status Reset Status			
	8	Antigen	Dose Number	Status	
		Diphtheria (D)		Invalid	
		Haemophilus influenzae type b (Hib)		Invalid	
		Pertussis (aP)		Invalid	
		Polio (IPV)		Invalid	
		Tetanus (T)		Invalid	

4. The **Status Override** screen will appear. The user must identify the **Status Change Reason** for overriding the immunization status. Panorama provides a warning to the user regarding the implications of the status override action.

Status Override				Apply	Reset	•	×
Warning: If this override is applied, the immunization status v * Status Change Reason:	vill be	e Invalid (override). Once overridden, ti	ne forecaster will no longer	validate this	dose.		
Given after vaccine expiration date.	-				Apply	P	eat
HepB and Rabies invalid if not given as IM.					whhile	R	set
Internationally adopted.	Ξ						
MMR and VZV too close to the receipt of blood products.	18	Dose Number	Status			_	_
Other							
Patient was not within the licensed age group.			Valid				
Stem cell transplant.							
Stored at unacceptable temperatures prior to administratio		Dose Number	Status				

5. Click **Apply** to confirm the status override.

Update Immunization	Apply Reset 🖨 🗙
Status Details	<ul> <li>*</li> <li>*</li> </ul>
Status Override	Apply Reset 🖨 🗙
Warning: If this override is applied, the immunization status will be Valid (override). Once overridden, the forecaster will no longer v * Status Change Reason: Professional judgement	ralidate this dose.
	Apply Reset



6. If the **Status Change Reason** is **Other**, the user is required to enter a comment in the **Status Change Reason Other** text box, supporting the change to the immunization record. If selecting a different **Status Change Reason**, an optional comment may be added in the **Comments** field at the bottom of the Update Immunization screen. Click **Add** and type the comment. Click **Apply**.

Comments and Status Updates	8
* Comments To create a new record click Add.	Add

- 7. When all information has been updated, click **Apply** again.
- 8. Click Save.
- Panorama will display the new status with an "O" in the Date Administered cell to indicate that the immunization status was subject to a user override. In the Detailed Data Table, the immunization will be displayed as Valid (override).

lmm	unizati	on Details									<ul> <li>*</li> <li>*</li> </ul>
Immu	nization	History - Summary	Grid								
	Age	nt 🔺		Date Administer	ed 🔺	Date Administered \$	Date Adm	nistered 🔇	Date Administered \$	Date Administered \$	Date Administered \$
0	DTal	P-IPV-Hib		2004 May 0	4	2004 Jul 04	2004	Sep 03	2004 Dec 01 (O)		
0	Men-C-C			2005 Mar 0	6						
0	MMF	۲V		2005 Mar 0	6	2009 Mar 06					
0	Pneu	J-C-13		2004 May 0	4	2004 Jul 04	2005	Mar 06			
0	Tdap	o-IPV		2009 Mar 0	6						
Immu	nization	History - Detailed [	)ata Table								
								- 444 0		- Add One of Nor	- In munications
	data	Now Delete						<ul> <li>Add 5</li> </ul>	ingle immunization	<ul> <li>Add One or Mor</li> </ul>	e immunizations
	date	View Delete									
		Agent 🛎	Date Adm	ninistered	Age a	t Administration	Status	0	Trade Name 🗘	Body Site 🗘	Volume 🗘
		DTaP-IPV-Hib	2004 May	04	1m 29	ld	Valid				
		DTaP-IPV-Hib	2004 Jul 0	)4	3m 29	d	Valid				
		DTaP-IPV-Hib	2004 Sep	03	5m 29	d	Valid				
		DTaP-IPV-Hib	2004 Dec	01	8m 26	id	Valid (o	verride)			
		Men-C-C	2005 Mar	06	1y 0m		Valid				

#### 2.2.3 Reset a Status

1. In the event that an **Override Status** has been accidentally applied, users can **Reset** the original status of an immunization. If an **Override Status** was already applied by another user and that Override Status is determined to be incorrect, the status can be overridden again using the processes described in Sections 2.2.1 and 2.2.2 above.



To reset the immunization status, navigate to the **Immunization Profile** screen. Click the radio button beside the specific immunization in the **Detailed Data Table** and click **Update**.

Immun	ization	History - Detailed D	Data Table									
						▼ Add S	Single Immunization	<ul> <li>Add One or Mo</li> </ul>	re Immunizations			
Upo	Update View Delete											
	B         Agent ▲         Date Administered						Trade Name 🗘	Body Site 🗘	Volume 🗘			
$\bigcirc$		DTaP-IPV-Hib	2004 May 04	1m 29d	Valid							
		DTaP-IPV-Hib	2004 Jul 04	3m 29d	Valid							
		DTaP-IPV-Hib	2004 Sep 03	5m 29d	Valid							
$   \mathbf{O} $		DTaP-IPV-Hib	2004 Dec 01	8m 26d	Valid (ov	erride)						
		Men-C-C	2005 Mar 06	1y 0m	Valid							
		MMRV	2005 Mar 06	1y 0m	Valid							

2. The **Update Immunization** screen will appear. The user can select the combined agent or any single antigen of the agent by clicking on the radio button beside the desired choice.

Update Immunization				Apply	Reset	₽	×
Status Details					*	\$	
Override Status Reset St	atus						
Agent		Dose Number	Status				
DTaP-IPV-I	Hib	4	Valid (override	e)			
Override Status Reset	Status						Π.
🖺 Antigen	D	ose Number	Status				1
Diphtheria (D)	4		Valid (override)				]
Haemophilus infl	uenzae type b (Hib) 4		Valid (override)				
Pertussis (aP)	4		Valid (override)				1
Polio (IPV)	4		Valid (override)				
Tetanus (T)	4		Valid (override)				1
Immunization Details					~	\$	

3. Click **Reset Status**. Choose the appropriate **Status Change Reason**. Click **Apply**.

Status Override		Apply	Reset	₽×
Warning: Upon save, the immunization	status will be set by the Forecaster.			
Status Change Reason:				
Override was performed in error			Apply	Reset
Professional judgement				



- 4. Click Apply.
- 5. When all information has been updated, click **Apply** again.

Update I	mmun	izatio	n				Apply	Reset	•	×
Status	Details	;						× 1	\$	
Over	rride St	atus	Reset Status							
			Agent		Dose Number	Status				
	0	,	DTaP-IPV-Hib		4	Status will be	set by Fore	caster on Sa	ive.	
Ov	verride	Status	Reset Status							
		An	tigen	Do	ose Number	Status				
		Dip	htheria (D)	4		Valid (override)				
		Ha	emophilus influenzae type b (Hib)	4		Valid (override)				
		Per	rtussis (aP)	4		Valid (override)				1
		Pol	io (IPV)	4		Valid (override)				
		Tet	anus (T)	4		Valid (override)				
Immuni	ization	Deta	ils					~	\$	

- 6. Click Save.
- 7. Panorama will display the original immunization status. If Panoramna identified the immunization as invalid, it will be displayed with an "X" to indicate the invalid status.

lmmu	nizati	on Details									*
Immuni	ization	History - Summary	Grid								
	Ager	nt +		Date Administer	red +	Date Administered ©	Date	inistered 0	Date Administered ©	Date Administered \$	Date Administered \$
0	DTaF	P-IPV-Hib		2004 May (	)4	2004 Jul 04	2004	Sep 03	2004 Dec 01 (X)		
0	Men-	-C-C		2005 Mar 0	6						
0	MMF	RV		2005 Mar 0	6	2009 Mar 06					
0	Pneu	I-C-13		2004 May (	14	2004 Jul 04	2005	Mar 06			
0	Tdap-IPV 2				6						
mmuni	ization	History - Detailed D	ata Table					▼ Add Sir	ngle Immunization	<ul> <li>Add One or More</li> </ul>	re Immunizations
Upd	late	View Delete									
	8	Agent *	Date Adm	inistered	Age a	t Administration	Status	0	Trade Name 🗘	Body Site 🗘	Volume 🗘
		DTaP-IPV-Hib	2004 May	04	1m 29	d	Valid				
	DTaP-IPV-Hib 2004 Jul 04			14	3m 29d		Valid				
	DTaP-IPV-Hib 2004 Sep 03		03	5m 29	łd	Valid					
		DTaP-IPV-Hib	2004 Dec	01	8m 26	id	Invalid				
	Men-C-C 2005 Mar 06				1y 0m	1	Valid				



### **3 RECORD IMMUNIZATIONS**

It is expected that all immunizations regardless of where they are provided in Nova Scotia will be recorded in Panorama.

All immunizations that are administered by providers who are not using Panorama (such as family physician, or private health facilities) should be recorded in Panorama as historical immunizations.

This section includes the following:

- Record Historical Immunizations
- Update Historical Immunizations
- Assess and Immunize Provider and Non-Provider Recorded Immunizations

#### 3.1 Record Historical Immunizations

Historical immunizations are included in the client's immunization history to provide a comprehensive clinical record of the client's immunization status. Very little information is required to support the entry of historical immunizations; however, a user can enter as many details as are available.

Two modes of entry for historical immunizations are available for all immunizations - Add **Single Immunization** or Add One or More Immunizations. Within these two options, users can record a variety of immunizations, including historical immunizations, as well as Non-Provider Recorded Immunizations and Provider-Recorded Immunizations.

С	lient	Immunization Prof	ïle		La	unch Report	) <b>A</b>	dd to WQ Sa	ave Reset	: 😡 🖨 ?	
	🚹 Aler	ts								Active	
	Client II 42		Name(La Winter, N	ast, First Middle)/Gend Nanda / Female	er:	Health Card No: 0091000000			Date of Birth / A 2005 Feb 24 / 1	ge: 2 years 8 months	
F	Phone N -(902)-	umber: 667-5673(Primary home)	Jurisdict Northerr	tion Info: a Zone,Truro Public He	ealth Office	Additional ID Type / Additional ID: h Office Provincial health service provider identifier / -					
	Immu	nization Details								<ul><li></li></ul>	
	Immuni	ization History - Summary G	rid								
		Agent 🔺		Date Administered +	Date Administered	Date Administe	red 🗘	Date Administered 🗘	Date Administered 🗘	Date Administered 🗘	
	0	HPV-4		2017 Nov 13							
	0	Men-C-ACYW-135		2017 Nov 13							
	Immun	ization History - Detailed Dat	ta Table								
						- A	dd Sing	le Immunization	<ul> <li>Add One or More</li> </ul>	e Immunizations	

**Add Single Immunization** is used to support the quick entry of a single immunization. The only required data for historical immunizations is the immunizing agent name and the immunization date. If additional information is available, users can add this to the client record.



Add One or More Immunizations can be used to support the quick entry of multiple immunizations regardless of whether additional details other than the immunizing agent name and immunization date are available.

#### 3.1.1 Single Historical Immunizations

The following steps outline how to successfully record a Single Historical Immunization.

1. With a client in context, select **Immunization Profile** from the **Left-Hand Navigation** menu in the **Immunizations** section.

(	🔗 Immunizations 🛛 🗸 🗸 🗸 🗸 🗸
	Immunization Profile
	Special Considerations
	Adverse Events (AEFI)
	Deferrals
	Mass Immunization Events

- Review the client immunization history in the Immunization History Summary Grid to ensure the immunization you are about to record has not yet been documented.
- Select Add Single Immunization (or if multiple past immunizations are to be recorded, select Add One or More Immunizations). The same options exist for both types of immunization documentation.

✓ Add Single Immunization	✓ Add One or More Immunizations
Add Historical	
Add Non-Provider Recorded	it View Consent IHI
Add Provider Recorded	

Add Historical reflects the action of recording past immunizations that have been administered to your client. You may not have much information about past immunizations; however, only two pieces of information are required for historical immunizations:

- the agent/antigen that was administered
- date of administration



4. Select **Historical** from the Add Single Immunization. The **Add Immunization** screen will appear.

Add Immunization		Record Conse	ant Apply	Reset	₽ ×
Immunization Type: Historical  Immunization Type: Historical  Immunization Type: Historical  Date Administered:  yyyy/mm/dd  Consent Readiness:	hh:mm ADT Estimated	Age at Administr	ration: ths days		
Reason for Immunization: Information Source:	Verification Status:				
e.g. Provider Last Name, First Name	Requested     Not Requested				
Organization: e.g. Organization Display Name	Service Delivery Location: e.g. SDL Display Name		() Q		
Vaccine Details Comments:				[	8
(4000 characters remaining.)					
		R	ecord Consent	Apply	Reset

- 5. The top left-hand corner of the screen will display that the **Immunization Type** is Historical.
- 6. Select the **Agent** (vaccine name) from the immunizing agent drop-down list. Note the red asterisk in front of **Agent** confirming that this is a required field.

ent:	*												
	Q		1			Date /	Admir /mm/c	ister id	ed:	hh:n	nm	AD	r [
aP		- 1				0	Dec	;	0 2	2016	0	0	١
P-Hib		- 1				8	м	т	w	т	F	s	1
IPV		- 1			I					4		~	I
-IPV-Hib						4	5	6	7	8	9	10	I
-IPV-Hib-HB					1	11	12	13	14	15	16	17	,
		-1				18	19	20	21	22	23	24	P
ib		- 1			1	25	26	27	28	29	30	31	ļ
ib-HB		- 1			1	_					0		
N1													

7. Enter the Date Administered into the cell using the YYYY/MM/DD format. Do not use spaces or other separators between a year, month, and date; Panorama will separate them for you. Users can type the date directly or they can user the embedded calendar at the right of the data field.

On occasion, clients or their parents will be unable to identify a specific date of immunization. The user is advised, in alignment with NS policy, to estimate the date of administration. Enter the suspected date of administration and click on the Estimated check box to the right of the date field.



•	Date Administ	ered:		
	yyyy/mm/dd		hh:mm	ADT Estimated

- 8. If additional relevant information is available (such as the provider, reason for immunization, or lot number, etc.), it may be added in the appropriate fields.
- 9. Click **Apply**. The immunization will be added to the **Immunization History-Detailed Data Table**. The immunization will not be added to the actual record until the record is saved.

Clien	t Imm	unization Pro	ofile			Lau	nch Rep	ort	Add to WQ	Sav	/e Reset	
🔔 Ale	rts											Active
Client 42	D:		Name(Las Winter, W	st, First Middl √anda / Fema	le)/Gende ale	er: H C	lealth Car 0910000	d No: 00			Date of Birth / 2005 Feb 24 /	Age: 12 years 8 months
Phone I 1-(902)	Number: -667-56	: 73(Primary home)	Jurisdictie Northern	on Info: Zone,Truro F	<sup>p</sup> ublic He	A ealth Office P	dditional Provincial	ID Type / Ao health servi	dditional ID: ice provider identif	ier / -		
Imm	unizati	on Details										× 👔
Immur	nization	History - Summary	Grid									
	Ager	nt 🍝		Date Administer	ed 🔺	Date Administered \$	Date Adm	inistered 🔇	Date Administere	ed 🗢	Date Administered 🗘	Date Administered \$
0	HPV	-4		2017 Nov 1	13							
0	Men	-C-ACYW-135		2017 Nov 1	3							
Immur	nization	History - Detailed E	ata Table									
								▼ Add S	ingle Immunizati	on	<ul> <li>Add One or Mo</li> </ul>	re Immunizations
Up	date	View Delete										
	B	Agent 🔺	Date Admi	nistered	Age at	t Administration	Status	0	Trade Name 🗘	Body Site 🗘		Volume ≎
		HPV-4	2017 Nov 1	13	12y 8r	n	Valid		Gardasil	1	Arm: upper left	0.5 mL
	Men- 2017 Nov 13		13	12v 8m		Valid		Menveo		Arm: upper right	0.5 mL	
	●         ●         8 × 6 × w 165         ■         ■         ■           ●         ●         Men-C-C         2006 Mar 24				1y 1m							

10. Click **Save** at the top of the page.

A message will display indicating that the vaccination has been added successfully. The newly recorded immunization will appear in the **Historical Immunizations – Summary Table** and the **Detailed Data Table**.



Imn	nunizat	ion Details								× 👔
Immu	unizatio	n History - Summary	Grid							
	Age	nt +	Date Administ	ered 🔺	Date Administered 🗘	Date Administe	red 🗘	Date Administered \$	Date Administered \$	Date Administered 🗘
0	HP\	/-4	2017 Nov	13						
0	Mer	-C-ACYW-135	2017 Nov	13						
0	Mer	-C-C	2006 Mar	24						
Immu	unizatio	n History - Detailed D	Data Table			A •	dd Sin	gle Immunization	✓ Add One or More	Immunizations
U	pdate	View Delete								
		Agent +	Date Administered	Age a	t Administration	Status 🗘	1	Trade Name ≎	Body Site ≎	Volume 🗘
	)	HPV-4	2017 Nov 13	12y 8r	m	Valid	(	Gardasil	Arm: upper left	0.5 mL
	Men- C-ACYW-135 2017 Nov 13			12y 8r	m	Valid	1	Menveo	Arm: upper right	0.5 mL
	)	Men-C-C	2006 Mar 24	1y 1m		Valid				

#### 3.1.2 Multiple Historical Immunizations

The following are steps to successfully record one or more historical immunizations for a single client:

1. To record multiple historical immunizations, simply select **Add Historical** under **Add One or More Immunizations.** 



2. The **Add Multiple Immunizations** screen will appear with four (4) rows to add immunizations. If the user requires additional rows, click on the **Add 4 Rows** button on the right side of the screen. Users can add as many rows as necessary to document all historical immunizations.



Add Multiple Immunizations	Rec	ord Consent Apply Wit	hout Details Enter Deta	ils Reset 🔒 🗙
Immunization Type: Historical Include non-inventoried agents		Ci	rk a table cell to select or ente	ar a value Add 4 Powe
Agent	Date 1	Date 2	Date 3	Date 4
MMRV	2006/02/24	2006/08/25	yyyy/mm/dd	yyyy/mm/dd
DTaP-IPV-Hib	2005/04/26	2005/06/27	yyyy/mm/dd	yyyy/mm/dd
•	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd
•	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd

- 3. Repeat the same process as above to select the immunizing agent and the date(s) of administration. As mentioned previously, only the agent and date are required to record historical immunizations.
- 4. When all the historical immunizations have been recorded, click **Apply Without Details**.

If additional information about the historical immunizations is available, click on **Enter Details**. This will prompt Panorama to display a separate screen for each immunization so users can add the additional data.



Add Immunization		Previous Next Delete Reset 🖨 🗙
Immunization Type: Historical Agent: DTaP-IPV-Hib Connect Readiness:	Date Administered:     2017/02/10     Dimetric ADT Estimation	Age at Administration: Age at Administration: 1 5 years months days
Reason for Immunization:  Provider:  e.g. Provider Last Name, First Name	Information Source: Verification Status: Requested Not Requested Completed	
Organization: e.g. Organization Display Name Vaccine Details Comments:	Q     Service Delivery Loc     e.g. SDL Display N	aame Calion:
(4000 characters remaining.)		Previous Next Delete Reset

The agent and date will be identified on each screen, and Panorama displays the position of the immunizations being added, e.g., 2 of 3.

Add the details, and click **Next** until all available data is recorded.

If only one immunization was added, click Finish.

dd Immunization				Finish	Delete	Reset	8
Immunization Type: Historical					<b>1</b> of	1 immur	nizations
Include non-inventoried agents Agent: DTaP-IPV-Hib	Date Administered:     2006/08/28	hh:mm ADT	Age at Ad 1 years	6 months	days		
Consent Readiness: Missing							
Reason for Immunization:	Information Source: Credible Written Do	cume 💌					
Provider:		Verification Status:					
e.g. Provider Last Name, First Name	() Q	Requested					
		Not Requested					
		Completed					
Organization:		Service Delivery Location:					
e.g. Organization Display Name	Q	e.g. SDL Display Name			Q		
/accine Details							×
mments:							
000 characters remaining.)							
					Finish	Delete	Rese

5. Click **Save** at the top of the page.

Client Immunization Profile	Launch Report	Add to WQ	Save	Reset	I 🔤 🖨 ?



A message will display indicating that the immunization has been added successfully. The newly recorded immunization will appear in the **Historical Immunizations – Summary Table and the Detailed Data** Table.

### 3.2 Update Historical Immunizations

A user may choose to update the information about a previously recorded vaccination if new information becomes available, or if information has been recorded incorrectly.

- 1. With a client in context, select **Immunization Profile** from the **Left-Hand Navigation Menu**.
- 2. The Client Immunization Profile screen is displayed.
- 3. In the **Detailed Data** Table, select the immunization to be updated by clicking the radio button. Click **Update**.

Update	View Delet	e			Add Single Imm	unization	✓ Add O	ine or More I	mmunizations
8	Agent +	Date Administered	Age at Administration	Status 🗘	Trade N	ame 🗘	Body Site	0	Volume 🗘
	DTaP-IPV-Hib	2005 Apr 26	2m 2d	Valid					
	DTaP-IPV-Hib	2005 Jun 27	4m 3d	Valid					
	DTaP-IPV-Hib	2006 Aug 28	1y 6m	Valid					
	HPV-4	2017 Nov 13	12y 8m	Valid	Gardasil		Arm: uppe	r left	0.5 mL
	Men- C-ACYW-135	2017 Nov 13	12y 8m	Valid	Menveo		Arm: uppe	r right	0.5 mL
	Men-C-C	2006 Mar 24	1y 1m	Valid					
	MMRV	2006 Feb 24	1y Om	Valid					
	MMRV	2006 Aug 25	1y 6m	Valid					

4. The Status Details screen is displayed.



Update	lmmui	nizatio	on						Apply	Reset	×
Status	Detail	s								×	*
Ove	erride S	tatus	Reset Status								
			Agent		Dose Nur	nber		Status			
$\bigcirc$	0		DTaP-IPV-Hib		1			Valid			
0	verride	Status	Reset Status								
	8	Ant	tigen		Dose Numbe		Sta	itus			
		Dip	htheria (D)		1		Val	id			
		Нае	emophilus influenzae type b (Hib)		1		Val	id			
		Per	tussis (aP)		1		Val	id			
		Poli	io (IPV)		1		Val	id			
		Teta	anus (T)		1		Val	id			
Immun	izatio	n Detai								~	
Hie	torical	Non	-Provider Recorded Provider B	Recorded							
* Date A	dminist	tered:	-Flowder Recorded O Flowder IS	Age at Admir	nistration:						
2005/	04/26		hh:mm ADT		2 2						
_				years r	nonths day	S					
Reason	for Imn	nunizati	on:	Information S	Source:	*					
Provider:						Verification Status:					
e.g. Prov	vider La	ast Nam	ne, First Name	Q		Requested					
						Not Requested					
						Completed					
Organiza	tion:					Service Delivery Location:					
e.g. Org	anizatio	on Displ	lay Name	Q		e.g. SDL Display Name			Q		
Vaccine	Detail	s								[	*
Holding F	Point Na	ame:		-		Holding Point Location:		Pub	licly Funded		
Lot Numb	ber:					Dosage:		Dosage	UOM:		
Displ	ay Expi	ired and	Recalled Lots							*	
Snov		Public	Non-Publicity Funde	d		Site:	*	Route:		-	1
						Trade Name:		Manufac	turer:		l
Comme	nts an	d Statı	us Updates							[	*
* Com	ments	To cr	eate a new record click Add.							[	Add
										Apply	Reset
										трыу	Reset
Comme	ent								Apply	Reset	
* Comm	ent:								, the it		
The clie	ent's mo	other ac	dvised the nurse that this								
immuni	zation	was giv	en on April 29, 20005.								
(3910 ch	aracto	re remo	sining )								
(5910 0	aractel	is rema									
										Apply	Reset



- 5. Update or correct the data as necessary.
- 6. A comment is required to update documented immunization. Click **Add** to add the comment.
- 7. Once the comment is added, click **Apply**.
- 8. Click Apply again at the top of the Update Immunization screen.
- 9. Click **Save** at the top of the page.

A message will display indicating that the immunization has been updated successfully. The updated immunization will appear in **the Historical Immunizations – Summary Table** and the **Detailed Data Table**.

### 3.3 Assess and Immunize

Panorama supports a comprehensive process for immunization service delivery regardless of location. The end-to-end process includes advance preparation for immunization events, review of past immunizations with clients, alerts, and special considerations recorded for a client, decision support forecasting regarding the vaccines a client is due for based on his/her immunization and clinical history and the NS Immunization schedules, verification of consent status and consent documentation, documentation of immunizations administered at the point of care, or deferrals if a client is deemed unfit for immunization, and lastly, if necessary, documentation of adverse events following immunization.

Immunizations provided at the point of care are referred to as "administered" and include both provider and non-provider recorded immunizations.

*Provider recorded immunizations* are those immunizations administered and documented by the same clinician.

*Non-provider recorded immunizations* are immunizations administered by a provider other than the Panorama user who is documenting the immunization administration. Such immunizations may be entered into Panorama by a designated support person or a nurse on behalf of a colleague in mass immunization clinics, or in situations when Panorama was unavailable (during Panorama downtime). While the entry of non-provider immunizations into Panorama takes place after the service is provided, these immunizations are not considered historical if they were administered at a clinic registered to use Panorama after the Panorama deployment.

# *Policy: Non-Provider Immunization Data Entry*

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Support personnel may only enter immunizations on behalf of another provider if:

• The documented evidence exists in the form of a client chart, paper copy consent, or registration form.



- There is no lab data or other clinical tests/results to be entered.
- There is no immunization-related information such as warnings, special considerations, or AEFIs to be entered.
- A designated provider will verify the accuracy of entry of the immunization data into Panorama.

Recording immunizations follows a consistent process for documentation. Panorama provides a pathway to record a single immunization or multiple immunizations. Regardless of whether a single immunization or multiple immunizations are being recorded, Panorama enables documentation for both Provider Recorded and Non-Provider Recorded paths.



#### 3.3.1 Provider Recorded Immunizations

Best practice in clinical disciplines is to record the clinical activities that you perform in the service of clients. Panorama documentation protocols are in alignment with the rules set forth by professional colleagues and licensing authorities governing clinical documentation.

Before providing any direct care service to the client, the standard clinical process requires the clinician to review all relevant aspects of the client record to ensure that all information is up to date, and the clinician is fully informed prior to making a clinical judgement on the care. To support this process, Panorama makes information easy to access and review as clinicians conduct their client encounters and make clinical decisions.

#### 3.3.1.1 Provider Recorded – Single Immunization

The following steps describer how to Add Single Immunization – Provider Recorded:

 With a client in context, review the Client Header, noting the presence of any Alerts or Notes. Review the Warnings, Special Considerations, AEFIs, and other pertinent information contained in the Alerts section. Note any that are no longer applicable and expire these. Add new Alerts as necessary.



I				
	<b>Client Immunization Pro</b>	file	Launch Report Add to WQ Sav	ve Reset 🗉 🔯 🔒 🥐
	Alerts			Active
		Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health Card No: 0091000000	Date of Birth / Age: 2005 Feb 24 / 12 years 8 months
	Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Additional ID: Provincial health service provider identifier / -	

Client Alerts				▼ Actions
Client ID: 42	Clie Wir	<b>nt Name:</b> ter, Wanda	Health Card Number: 0091000000	Date of Birth / Age: 2005 Feb 24 / 12 years 8 months
Effective From *	Effective To *	Type +	Message	Last Edited By \$
2006 Nov 22		Allergy	Allergy: Egg protein, Severity: Mod (interferes with but does not prever daily activities), Reaction Desc: Gastrointestinal reaction	terate nt ALL, parsoncm
2017 Nov 14		Client Warning	Client experienced joint swelling an redness at injection site for 24 hour post injection.	nd rs ALL, parsoncm
Total: 2				10 -

Note Details	☆ Hide Note Details
Note is associated with Client ID 116	
Note ID: 37	Status: Complete
Author: PERMISSIONS, ALL	Note Date: 2017 Apr 18 15:49 GMT+03:00
Role: superuser	Created Date/Time: 2017 Apr 18 15:50 GMT+03:00
Note Type: Nurse	Completed Date: 2017 Apr 18
Subject Line: Example Note	
This is an example of a test note.	

2. Once the initial review has been completed, go to the Left-Hand Navigation menu and select Immunization Profile from the Immunizations section.



3. The **Client Immunization Profile** screen is displayed. This screen functions as a central hub of information for the clinician and provides the clinician with an overall view of the most important information about a client's immunization history. The **Immunization History - Summary Grid** provides a condensed summary of agents and dates of administration.

1	lmmu mmun	nization Details zation History - Summary Grid						*
		Agent *	Date Administered *	Date Administered <b>\$</b>	Date Administered <b>\$</b>	Date Administered <b>\$</b>	Date Administered 🗘	Date Administered <b>\$</b>
	0	HPV-4	2017 Nov 13					
	0	Men-C-ACYW-135	2017 Nov 13					
	0	Men-C-C	2006 Mar 24					



4. The **Immunization History – Detailed Data Table** provides additional immunization details. Some details may not be available if they were not documented for historical immunizations.

						<ul> <li>Add Single Immunization</li> </ul>	<ul> <li>Add One or Mor</li> </ul>	e Immunizations
Up	iate	View Delet	e					
		Agent *	Date Administered	Age at Administration	Status 🗘	Trade Name O	Body Site 🗘	Volume 🗘
		HPV-4	2017 Nov 13	12y 8m	Valid	Gardasil	Arm: upper left	0.5 mL
		Men- C-ACYW-135	2017 Nov 13	12y 8m	Valid	Menveo	Arm: upper right	0.5 mL
	Ð	Men-C-C	2006 Mar 24	1y 1m				

**Note**: The Immunization Profile will be populated with historical information from ANDS/ANDI as of January 2018.

Clinicians should review historical immunizations during every client encounter to ensure the client record is up to date. If a client received an immunization since their last visit, it can be recorded (as a historical immunization) in the client record. Refer to section 3.1 to review Historical Immunizations.

Special Considerations AEFI + Allergies Deferrals Risk Factors TB Skin Test IGRA Tests + Mass Imms Event + View Consent IHI

5. The Immunization Forecaster is located lower on the Immunization Profile screen. The forecast can be viewed either by specific Agent/Antigen or by Disease. Review the Immunization Forecast section to determine the vaccines the client may presently be due/overdue to receive. Cross-reference the client's immunization record and forecast with the NS Immunization schedule before administering a new vaccine.

 $\bigvee$  **Tip:** Remember that the Forecaster is a decision support tool that is intended to supplement a clinician's decision and should never replace a clinician's judgement. If there is any doubt about the forecasted immunizations, follow your clinical judgement and discuss with the Manager.



	y Agenu Antige	n						<ul> <li></li> <li></li></ul>
Last Forecast Ran On: 2017 Nor	v 13							
Forecast Status calculated as of	2017 Nov 21						R	efresh Forecast
Immunizing Agent/Antigen	Forecasted Dose # 🗘	Codes 🗘	Volume 🗘	Brand 🗘	Eligible 🗘	Due 🔺	Overdue ≎	Forecast Status 🗘
Tdap-IPV ( Pertussis (ap)*, Diphtheria (d)* )	1	EDS			2005 Apr 07	2005 Apr 24	2005 May 24	Overdue
MMRV	1				2006 Feb 24	2006 Feb 24	2006 Mar 24	Overdue
HPV-4	1				2014 Feb 24	2017 Sep 01	2018 Jan 01	Due
Men-C-ACYW-135	1				2005 Nov 24	2017 Sep 01	2018 Jan 01	Due
Meningococcal (Men-C-C)	1	LOA		neisvac-c	2018 May 13	2018 May 13	2006 Mar 24	Overdue
Pneu-P-23	1				2007 Feb 24	2070 Feb 24	2070 Mar 24	Eligible
Vaccine Preventable Disease D								
Disease 🔺	Disease Group	▼ Intigen ≎	Forecasted	Eligible \$	Due 🗘	Overdu	e 🗘 Forec	ast Status 🗘
Disease *	Forecasted A	▼ Intigen ≎	Forecasted Dose # \$	Eligible \$	Due \$	Overdue	e 🗢 Forec	ast Status ≎
Disease A Human papilloma virus Measles	Forecasted A HPV-4 Measles (M)	▼ Intigen ≎	Forecasted Dose # ≎ 1	Eligible \$ 2014 Feb 2 2005 Nov 2	Due ≎ 4 2017 Sep 4 2006 Feb	Overdue 01 2018 Jai 24 2006 Ma	e \$ Forec n 01 Due ar 24 Overd	ast Status ≎ ue
Disease A Human papilloma virus Measles Meningococcal disease	Forecasted A HPV-4 Measles (M) Meningococca	untigen ≎	Forecasted Dose # ≎ 1 1	Eligible \$ 2014 Feb 2 2005 Nov 2 2018 May 1	Due \$ 4 2017 Sep 4 2006 Feb 3 2018 May	0verdua 01 2018 Ja 24 2006 Ma 713 2006 Ma	e  Forec n 01 Due ar 24 Overd ar 24 Overd	ast Status 🗘 ue ue
Disease * Human papilloma virus Measles Meningococcal disease Meningococcal disease	Forecasted A           HPV-4           Measles (M)           Meningococca           C-ACYW-135)		Forecasted Dose # \$ 1 1 1 1 1	Eligible \$           2014 Feb 2           2005 Nov 2           2018 May 1           2005 Nov 2	Due \$           4         2017 Sep           4         2006 Feb           3         2018 May           4         2017 Sep	Overdue           01         2018 Jai           24         2006 Mai           13         2006 Mai           01         2018 Jai	e \$ Forec n 01 Due ar 24 Overd ar 24 Overd n 01 Due	ast Status ≎ ue ue
Disease * Human papilloma virus Measles Meningococcal disease Meningococcal disease Mumps	Forecasted A           HPV-4           Measles (M)           Meningococca           C-ACYW-135)           Mumps (Mu)	vantigen ≎	Forecasted Dose # ≎ 1 1 1 1 1 1	Eligible ≎ 2014 Feb 2 2005 Nov 2 2018 May 1 2005 Nov 2 2005 Nov 2	Due ≎           4         2017 Sep           4         2006 Feb           3         2018 May           4         2017 Sep           4         2006 Feb	Overdus           01         2018 Jai           24         2006 Mai           13         2006 Mai           01         2018 Jai           24         2006 Mai	e   Forec n 01 Due ar 24 Overd ar 24 Overd n 01 Due ar 24 Overd ar 24 Overd	ast Status \$ ue ue
Disease * Human papilloma virus Measles Meningococcal disease Meningococcal disease Mumps Pneumococcal disease	Forecasted A           HPV-4           Measles (M)           Meningococca           C-ACYW-135)           Mumps (Mu)           Pneumococca	v I (Men-C-C) I (Men- I (Pneu-P-u)	Forecasted Dose # ≎           1           1           1           1           1           1           1           1           1           1           1	Eligible ≎ 2014 Feb 2 2005 Nov 2 2018 May 1 2005 Nov 2 2005 Nov 2 2005 Nov 2 2007 Feb 2	Due ≎           4         2017 Sep           4         2006 Feb           3         2018 May           4         2007 Sep           4         2006 Feb           4         2007 Sep           4         2007 Feb	Overdus           01         2018 Jai           24         2006 Ma           13         2006 Ma           011         2018 Jai           24         2006 Ma           24         2006 Ma           24         2006 Ma           24         2006 Ma	e \$ Forec n 01 Due ar 24 Overd ar 24 Overd n 01 Due ar 24 Overd ar 24 Eligible	ast Status \$ ue ue ue
Disease * Human papilloma virus Human papilloma virus Meningococcal disease Meningococcal disease Mumps Pneumococcal disease Poliomyelitis	HPV-4       Measles (M)       Meningococca       C-ACYW-135)       Mumps (Mu)       Pneumococca       Polio (IPV)	v Intigen   v Intigen  v Intige	Forecasted Dose # <pre></pre> 1           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1	Eligible ≎ 2014 Feb 2 2005 Nov 2 2018 May 1 2005 Nov 2 2005 Nov 2 2005 Nov 2 2007 Feb 2 2005 Apr 0	Due ≎           4         2017 Sep           4         2006 Feb           3         2018 Mag           4         2007 Sep           4         2007 Feb           4         2070 Feb           4         2070 Feb           4         2070 Feb	Overdus           01         2018 Jai           24         2006 Mai           13         2006 Mai           011         2018 Jai           24         2006 Mai           201         2018 Jai           24         2006 Mai           24         2007 Mai           24         2005 Mai	e   Forec n 01 Due ar 24 Overd ar 24 Overd ar 24 Overd ar 24 Eligible ay 24 Overd	ast Status \$
Disease * Human papilloma virus Measles Meningococcal disease Meningococcal disease Mumps Pneumococcal disease Poliomyelitis Rubella	HPV-4       Measles (M)       Meningococca       C-ACYW-135)       Mumps (Mu)       Pneumococca       Polio (IPV)       Rubella (R)	v intigen    v il (Men-C-C) il (Men- ) Il (Pneu-P-u)	Forecasted Dose # <pre></pre> 1           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1	Eligible ≎ 2014 Feb 2 2005 Nov 2 2018 May 1 2005 Nov 2 2005 Nov 2 2005 Nov 2 2007 Feb 2 2005 Apr 0 2005 Apr 0	Due ≎           4         2017 Sep           4         2006 Feb           3         2018 Mag           4         2007 Sep           4         2006 Feb           4         2070 Feb           7         2005 Apr           4         2006 Feb	Overdue           01         2018 Jai           24         2006 Mai           13         2006 Mai           011         2018 Jai           24         2006 Mai           24         2007 Mai           24         2005 Mai           24         2006 Mai           24         2006 Mai	e   Forec  n 01  Due  ar 24  Overd  ar 24  Overd  ar 24  Overd  ar 24  Cverd  ar 24  Eligible  ay 24  Overd  ar 24  Overd	ast Status \$
Disease * Human papilloma virus Measles Meningococcal disease Meningococcal disease Mumps Pneumococcal disease Poliomyelitis Rubella Tetanus	HPV-4       Measles (M)       Meningococca       C-ACYW-135)       Mumps (Mu)       Pneumococca       Polio (IPV)       Rubella (R)       Tetanus (T)	v Intigen    v Intigen	Forecasted Dose # ≎           1	Eligible 2014 Feb 2 2005 Nov 2 2018 May 1 2005 Nov 2 2005 Nov 2 2005 Nov 2 2005 Nov 2 2007 Feb 2 2005 Apr 0 2005 Apr 0	Due ≎           4         2017 Sep           4         2006 Feb           3         2018 Mag           4         2007 Sep           4         2006 Feb           4         2070 Feb           7         2005 Apr           4         2006 Feb           7         2005 Apr           4         2006 Feb	Overdue           01         2018 Jai           24         2006 Ma           13         2006 Ma           01         2018 Jai           24         2006 Ma           24         2007 Ma           24         2005 Ma           24         2005 Ma           24         2005 Ma           24         2005 Ma	e C Forec n 01 Due ar 24 Overd ar 24 Overd ar 24 Overd ar 24 Overd ar 24 Eligible ay 24 Overd ar 24 Overd ar 24 Overd ar 24 Overd	ast Status \$

6. Once the clinician has reviewed the relevant client record and forecast, and determined the appropriate immunizations to administer, the clinical process continues with a clinical assessment regarding whether the client is fit to immunize, and with obtaining consent.

If the client is deemed to be unfit to immunize for any reason, a **Deferral** can be made. Refer to Section 6.

The clinician also needs to confirm that a consent for the immunization is obtained.

Once the clinical assessment is completed, consent is confirmed, and the client is deemed fit to receive the immunization, the clinician can proceed to administer the vaccine as per the NS guidelines for vaccine administration. Record the immunization after it has been administered.

7. Panorama can record both single and multiple immunizations using the same basic process. For a single immunization, select the **Provider Recorded** option for **Add Single Immunization**.





8. The **Add Immunization** screen is displayed. Required data fields are identified with a red asterisk.

Add Immunization		Record Conse	nt Apply	Reset	₽	×
Immunization Type: Provider Recorded  Immunization Type: Provider Recorded  Agent:  yyyy/mm/dd  Consent Readiness:  Consent for Servit	d: hh:mm ADT	Age at Administra	tion: s days			
Reason for Immunization:     Information Source       * Provider:     PIEK, KRISTA LEIGH	Verification Status:					
Organization: Truro PHO     O     Vaccine Details	Not Requester     Completed     Service Delivery I     Truro PHO, Truro,	ocation: Nova Scotia	<b>()</b> Q		*	
Holding Point Name:	Holding Point Loca	tion:	Publicly Funded			
* Lot Number: Display Expired and Recalled Lots	Dosage:	Do	age UOM:	*		
Show All Publicly Funded Non-Publicly Funded	* Site:	• R	oute:	Ψ.		
	Trade Name:	Ma	nufacturer:			
Comments:						
(4000 characters remaining.)						
		Re	cord Consent	Apply	Re	set

9. Select the required immunizing agent from the Immunizing Agent drop-down list. Remember this is a type ahead field. Type in a few letters and Panorama will provide options.

* Agent:		
MMRV		•
MMRV	ą	
MMRV		



- 10. Record the date of administration by clicking on the calendar icon beside the date field or by manually entering a different date using the format YYYMMDD. Do not enter slashes when typing the date manually as Panorama will provide these automatically. Although not identified as a required field, it is best practice to record the time of administration as well, enabling more accurate tracking when Adverse Events occur. Users should comply with NS policy regarding recording both date and time of vaccine administration.
- 11. The Consent Status will be displayed. If consent is not granted or documented, clinicians may do a consent override based on clinical judgement in urgent situations. Such action requires a physician order and must comply with NA policy.



12. To add consent prior to the immunization, click the **Record Consent** at the top of the screen.

Add Immunization	Record Consent	Apply	Reset	0	×

- 13. The Record Consent for Service screen displays.
- 14. Select Grant or Refuse from the Instruction drop-down menu.
- 15. Add the **Effective From** and **To** dates, adding manually or using the calendar icon.
- 16. Select Consent Give To and Consent Given By. Click Save.



Record Consent for Service		×
Clients: Winter, Wanda	Consent will be recorded for agents:	
Instruction: Reason for Refusal:     Grant	Reason Description:	
• Effective From: To: 2017/11/21 2018/11/20	Number of Doses:     Form of Consent:       1     *	
Consent Given To:	Consent Given By:	
Not Specified	Not Specified	
Current User ALL, parsoncm	Related Client 👻	
Other	Other Relation     Parent	
Comments:		
	Save	et

17. The Provider information will default based on the user's login information and will include their **Provider Name, Organization**, and **Service Delivery Organization**.

* Provider:		Verification Status:
PIEK, KRISTA LEIGH	<b>0 </b>	Requested
		Not Requested
		Completed
* Organization:		Service Delivery Location:
Truro PHO	<b>()</b> Q	Truro PHO, Truro, Nova Scotia Q

- 18. Enter the Holding Point Name and Holding Point Location if these have not been already added as defaults. Prior to administering the immunization, consult with your Bio Coordinator and ensure sufficient inventory is in the assigned Holding Point Location. The immunization dose will be auto-decremented.
- 19. Enter the **Lot Number** from the dropdown menu. Note that multiple Lot Numbers may be available for the agent/antigen.

* Lot Number:	
Display Expired and Recalled Lots	
Show All      Publicly Funded      Non-I	Publicly Funded
AMRVA467AA - Exp. 2017 Dec 31	0

20. Enter the anatomical **Site** of vaccine administration from the dropdown menu.



\* Site:

•
م
Arm: upper left
Arm: upper right
Deltoid: left
Deltoid: right
Dorsogluteal: left
Dorsogluteal: right
Mouth
Nares: bilateral

21. Enter the **Route** of administration from the dropdown menu.

* Route:	
	-
م ا	J
Infiltrate	
Intradermal	
Intramuscular	
Intranasal	
Intravenous	
Oral	
Subcutaneous	

22. Panorama will automatically enter the **Dosage** based on the Lot Number. Users can also change the **Dosage UOM** by clicking on the arrow and scrolling through the dropdown menu.

* Dosage UOM:	
mL	-

23. Click Apply.


Immunization Type: Provider Recorded   Agent: 207/11/21   WMRV 12   Basson for Immunization: 12   Reason for Immunization: Immontantion Source:   Routine Immunization: Immontantion Source:   Provider: Verification Status:   PIEK, KRISTA LEIGH Immontantion:   Turo PHO Immontantion:   Immontantion: Immontantion:   Turo PHO Immontantion:   Immontantion: Immontantion:   Immontantion:<	Add Immunization			Record Co	nsent	Apply	Reset	₽ ×
Consent Readiness: Granted Reason for Immunization: Provider: Provider: PIEK, KRISTA LEIGH • Organization: Turo PHO • Organization: Turo PHO • Organization: Turo PHO • Vaccine Details Holding Point Name: Turo PHO • Lot Number: Display Expired and Recalled Lots • Show All Publicly Funded AMRVA467AA - Exp. 2017 Dec 31 • Organization: Trade Name: Priorix-Tetra 4000 characters remaining.) • Record Consent • Apply Reset	Immunization Type: Provider Recorded Include non-inventoried agents * Agent: MMRV	• Date Administered: 2017/11/21	mm ADT	Age at Admin	istration:	ays		
Routine Immunization <ul> <li>Provider:</li> <li>Provider:</li> <li>Provider:</li> <li>PIEK, KRISTA LEIGH</li> <li>Requested</li> <li>Not Requested</li> <li>Completed</li> </ul> • Organization:       Truro PHO <ul> <li>Completed</li> <li>Store Delails</li> <li>Vaccine Details</li> <li>Molding Point Name:</li> <li>Truro PHO</li> <li>Lot Number:</li> <li>Display Expired and Recalled Lots</li> <li>Show All Publicly Funded</li> <li>Non-Publicly Funded</li> <li>AMRVA467AA - Exp. 2017 Dec 31</li> <li>Imments:</li> </ul> 4000 characters remaining.)       Record Consent       Apply       Reset	Consent Readiness: Granted Reason for Immunization:	Information Source:		-		-		
	Routine Immunization		*					
PIEK, KRISTA LEIGH Requested   • Organization: Completed   • Organization: Truro PHO   Truro PHO Image: Completed   • Vaccine Details   Holding Point Name:   Truro PHO   • Lot Number:   Display Expired and Recalled Lots   • Show All Publicly Funded   Non-Publicly Funded   Non-Publicly Funded   Non-Publicly Funded   • Stite:   • Recur   Intramuscular   • Stite:   • Route:   Intramuscular   • State:   • Route:   Intramuscular   • State:   • Comments:	* Provider:		Verification Status:					
<ul> <li>Not Requested</li> <li>Completed</li> </ul> <li> <ul> <li>Organization:</li> <li>Truro PHO</li> <li>Organization:</li> <li>Truro PHO</li> <li>Organization:</li> <li>Truro PHO, Truro, Nova Scotia</li> </ul> </li> <li> <ul> <li>Vaccine Details</li> <li> <ul> <li>Vaccine Details</li> </ul> </li> <li> <ul> <li>Vaccine Details</li> <li> <ul> <li>Vaccine Details</li> </ul> </li> <li> <ul> <li>Vaccine Details</li> <li>Vaccine Details</li> <li> <ul> <li>Vaccine Details</li> <li>Vaccine Details</li> <li>Vaccine Details</li> <li></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li></ul></li>	PIEK, KRISTA LEIGH	0 0	Requested					
Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Truro PHO     Organization:     Organization:     Organization:     Truro PHO     Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Truro PHO     Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Truro PHO     Organization:     Truro PHO     Organization:     Organization:     Organization:     Truro PHO     Organization:     Organization:     Truro PHO     Organization:     Organizatio			Not Requested					
• Organization: Truro PHO  • Vaccine Details  • Service Delivery Location: Truro PHO, Truro, Nova Scotia  • Vaccine Details  • Vaccine Details • Vaccine • Vaccine Details •			Completed					
<ul> <li>Organization: Truro PHO</li> <li>Vaccine Details</li> <li>Vaccine Details</li> <li>Holding Point Name: Truro PHO</li> <li>Lot Number: Display Expired and Recalled Lots Show All Publicly Funded Non-Publicly Funded AMRVA467AA - Exp. 2017 Dec 31  </li> <li>Manufacturer: Priorix-Tetra</li> <li>Vaccine Delivery Location: Truro PHO</li> <li>Desage UOM: 0.5 </li> <li>Show All Publicly Funded Non-Publicly Funded</li> <li>Site: Trade Name: Priorix-Tetra</li> <li>Vacute: GlaxoSmithKline</li> <li>Record Consent Apply Reset</li> </ul>			Completed					
I'uris PHO       I'uris PHO, I'uris, Nova Scotta         'Vaccine Details         *Vaccine Details         Holding Point Name:         Truro PHO         * Lot Number:         Display Expired and Recalled Lots         Show All         Publicly Funded         Non-Publicly Funded         Non-Publicly Funded         Non-Publicly Funded         Name:         Intramuscular         Intramuscular         Manufacturer:         Priorix-Tetra         GlaxoSmithKline	* Organization:	<b>A O</b>	* Service Delivery Location:			<b>A</b>		
• Vaccine Details     Holding Point Name:   Truro PHO     • Lot Number:   Display Expired and Recalled Lots   • Show All   Publicly Funded   Non-Publicly Funded   • Site:   AMRVA467AA - Exp. 2017 Dec 31     • Comments:     4000 characters remaining.)     Record Consent     • Record Consent     • Publicly Funded     • Dosage:   • Dosage:   0.5   • Site:   • Route:   • Intramuscular     • Route:   • Intramuscular     • Record Consent     Apply     Record Consent						• ~		
Holding Point Name: Holding Point Location:   Truro PHO Truro-HPL2-Clinic     • Lot Number: Dosage:   Display Expired and Recalled Lots 0.5   Show All Publicly Funded   Non-Publicly Funded • Site:   AMRVA467AA - Exp. 2017 Dec 31 Iml   Trade Name: Manufacturer:   Priorix-Tetra GlaxoSmithKline	* Vaccine Details							\$
Truro PHO       Truro-HPL2-Clinic       Publicly Funded         • Lot Number:       Dosage:       0.5         Display Expired and Recalled Lots       0.5       ImL         Show All       Publicly Funded       Non-Publicly Funded         AMRVA467AA - Exp. 2017 Dec 31       Iml       Route:         Trade Name:       Manufacturer:         Priorix-Tetra       GlaxoSmithKline	Holding Point Name:		Holding Point Location:		_			
• Lot Number: Dosage: • Dosage UOM:   Display Expired and Recalled Lots 0.5   Show All Publicly Funded   AMRVA467AA - Exp. 2017 Dec 31 • Site:   AMRVA467AA - Exp. 2017 Dec 31 • Osage UOM:   Trade Name: Manufacturer:   Priorix-Tetra GlaxoSmithKline	Truro PHO	*	Truro-HPL2-Clinic		Public	ly Funded		
Display Expired and Recalled Lots O.5 Now All Publicly Funded Non-Publicly Funded AMRVA467AA - Exp. 2017 Dec 31 Comments: Comm	* Lot Number:		Dosage:		• Dosage l	JOM:		
Show All Publicly Funded Non-Publicly Funded Site: AMRVA467AA - Exp. 2017 Dec 31  AMRVA467AA - Exp. 2017 Dec 31  Amr: upper left Trade Name: Priorix-Tetra GlaxoSmithKline	Display Expired and Recalled Lots		0.5		mL		-	
AMRVA467AA - Exp. 2017 Dec 31  Arm: upper left Intramuscular Amaufacturer: GlaxoSmithKline	Show All Publicly Funded Non-Publicly	Funded	* Site:		* Route:			
Trade Name:     Manufacturer:       Priorix-Tetra     GlaxoSmithKline       2000 characters remaining.)     Record Consent     Apply	AMRVA467AA - Exp. 2017 Dec 31 🔹 🚯		Arm: upper left	-	Intramuse	cular	-	
Priorix-Tetra GlaxoSmithKline Comments: 4000 characters remaining.) Record Consent Apply Reset			Trade Name:		Manufactu	irer:		
Comments: 4000 characters remaining.) Record Consent Apply Reset			Priorix-Tetra		GlaxoSm	ithKline		
4000 characters remaining.)  Record Consent Apply Reset	Comments:							
4000 characters remaining.)  Record Consent Apply Reset								
Record Consent Apply Reset	(4000 characters remaining.)							
					Record (	Consent	Apply	Reset

24. Panorama will return to the Immunization profile screen and display the newly added immunization in the **Immunization History - Detailed Data Table**. The new immunization will appear at the bottom of the table with an icon that indicates an addition to the client record is documented, and will be added when the record is saved.



ient	Imn	nunization Pr	rofile		Launch Report	Add to WQ	Save	Reset
nmuni	zatior	History - Detailed	Data Table					
					- 1	Add Single Immunization	n 🔻 Add Or	ne or More Immunization
Upd	ate	View Delete	2					
	8	Agent +	Date Administered	Age at Administrati	ion Status 🗘	Trade Name 🗘	Body Site	≎ Volume ≎
		DTaP-IPV-Hib	2006 Aug 28	1y 6m	Valid			
		DTaP-IPV-Hib	2005 Jun 30	4m 6d	Valid			
		DTaP-IPV-Hib	2005 Apr 29	2m 5d	Valid			
		HPV-4	2017 Nov 13	12y 8m	Valid	Gardasil	Arm: upper	left 0.5 mL
		Men- C-ACYW-135	2017 Nov 13	12y 8m	Valid	Menveo	Arm: upper	right 0.5 mL
		Men-C-C	2006 Mar 24	1v 1m	Valid			
	Ð	MMRV	2017 Nov 21	12y 8m		Priorix-Tetra	Arm: upper	left 0.5 mL
		MMRV	2006 Feb 24	1y 0m	Valid			
		MMRV	2006 Aug 25	1y 6m	Valid			

25. Click Save. Panorama will confirm that the record is successfully updated.



#### 3.3.1.2 Provider Recorded – Add One or More Immunizations

The following steps describe how to Add One or More Single Immunization – Provider Recorded:

If the client is receiving multiple immunizations, the user will follow the same process as previously outlined, except to start the process by selecting **Add One or More Immunizations**.



1. Select the agents/antigens from the **Agent** dropdown menu. Enter the **Date(s)** of administration. Click **Enter Details**.



Add Multiple Immunizations				Record Consent Er	nter Details Reset 🔒 🗙
mmunization Type: Provider Recorded Include non-inventoried agents					
				Click a table cell to sele	ct or enter a value. Add 4 Rows
Agent		Date 1	Date 2	Date 3	Date 4
MMRV	*	2017/11/21	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd
Pneu-P-23	-	2017/11/21	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd
	*	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd 🔳	yyyy/mm/dd
	-	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd
Override/Set Defaults for New I	mmunizatio	ons			
Provider:			Organization:		
PIEK, KRISTA LEIGH	e		Truro PHO		0 Q
Service Delivery Location:			Information Source:		
Truro PHO, Truro, Nova Scotia		<b>0</b> Q		-	
				Record Con	sent Enter Details Reset

 The Add Immunization screen will appear. Panorama will identify the number of immunizations being documented in the top right-hand corner in purple highlight. When all required fields (identified by the red asterisk) are completed, click Next to proceed to the next screen to document the additional immunizations.

ent Immunization Profile	Launch Report Add t	o WQ Save	Reset	
Add Immunization		Next	Delete R	teset 🕰
Immunization Type: Provider Recorded			1 of 2	immunization
Include non-inventoried agents     Agent:     MMRV	hh:mm ADT	Age at Administratio	n: days	
Consent Readiness: Granted				
Reason for Immunization: Information Source	e:			
Routine Immunization	*			
* Provider:	Verification Status:			
PIEK, KRISTA LEIGH	Requested			
	Not Requested			
	Completed			
* Organization:	* Service Delivery Location:			
Truro PHO Q	Truro PHO, Truro, Nova Sc	otia	0 Q	
* Vaccine Details				8
Holding Point Name:	Holding Point Location:			
Truro PHO	Truro-HPL2-Clinic	Pu	blicly Funded	
* Lot Number:	Dosage:	* Dosa	ge UOM:	
Display Expired and Recalled Lots	0.5	mL		*
Show All Publicly Funded Non-Publicly Funded	* Site:	* Rout	e:	
AMRVA467AA - Exp. 2017 Dec 31 🔹 🚯	Arm: upper left	• Intrar	nuscular	-
	Trade Name:	Manuf	acturer:	
	Priorix-Tetra	Glaxo	SmithKline	
omments:				
4000 characters remaining.)				



3. Compete the required information fields for the next immunization, and continue to click **Next** until all immunizations have been documented. On the screen of the final immunization, click **Finish**.

dd Immunization			Previous	Finish	Delete	Reset	₽ ×
Immunization Type: Provider Recorded					<b>2</b> of	2 immun	izations
Include non-inventoried agents	* Date Administered:		Age at Ag	ministration			
Agent:	2017/11/21	hhimm ADT	12	9			
Pneu-P-23			12	0			
Consent Readiness: Granted			years	months	days		
Reason for Immunization:	Information Source:						
Routine Immunization		-					
Provider		Verification Status:					
PIEK, KRISTA LEIGH	6 0	Requested					
		Not Requested	3				
		Completed					
Organization:		* Service Delivery L	ocation:				
Truro PHO	<b>0</b> Q	Truro PHO, Truro,	Nova Scotia		0 0		
Vaccine Details							\$
Holding Point Name:		Holding Point Loca	ition:				
Truro PHO	-	Truro-HPL2-Clinic	-	Pub	licly Funded		
Lot Number:		Dosage:		* Dosag	e UOM:		
Display Expired and Recalled Lots		0.5		mL		*	
Show All Publicly Funded Non-Publi	icly Funded	* Site:		* Route		_	
M034698 - Exp. 2018 Apr 01		Arm: upper right	-	Intram	uscular	-	
		Trade Name:	Constant of Consta	Manufa	cturer:		
		Pneumovax23		Merck	Frosst		
omments:							
000 characters remaining.)							
3.7					<i>c</i>		
				Previous	Finish	Delete	Rese

4. The added immunizations will appear in the **Historical Immunizations – Detailed Data Table** with an icon indicating that the immunizations will be added when the client record is saved. Click **Save** to add the immunizations to the client record.

		rome		aunch Repor	rt Add	to WQ	Save	Reset	
munizatio	on History - Detailed	i Data Table				L			
					<ul> <li>Add Single</li> </ul>	Immunization	▼ Ad	d One or More I	mmunizations
Update	View Delet	te							
8	Agent +	Date Administered	Age at Administration	Status 🗘	Trad	le Name 🗘	Body S	Site 🗘	Volume 🗘
	HPV-4	2017 Nov 13	12y 7m	Valid	Gard	liasil	Arm: up	oper left	0.5 mL
	Men- C-ACYW-135	2017 Nov 13	12 <mark>y</mark> 7m	Valid	Men	veo	Arm: up	oper right	0.5 mL
	MMRV	2017 Nov 21	12y 8m		Prior	rix-Tetra	Arm: up	oper left	0.5 mL
	Pneu-P-23	2017 Nov 21	12y 8m		Pner	umovax23	Arm: up	oper right	0.5 mL

5. A message will appear confirming the update was saved.



The Client Immunization Profile was successfully updated.

#### ) Tip: Provider Recorded Immunizations

If a user has the Immunization Nurse (Imms Nurse) role, all immunizations recorded by the user will be automatically recorded as administered by the Provider associated with the user's account. If the Provider associated with your account is wrong, or there is no Provider, contact the service desk.

#### 3.3.2 Non-Provider Recorded Immunizations

On occasion, users may be permitted to record immunizations administered by another provider. This action is typically limited to other clinicians but NS policy will determine which users are permitted to perform this action. Check your SOP for specific guidance.

Users entering information about services provided by another provider should follow the steps outlined below to support the structured entry of all clinical information recorded as a result of assessment and service delivery, including special considerations, and client warnings. Not all steps may apply as the nurse is not performing a clinical assessment but recording the event after the fact. Consult the provider who authored the patient record, your nursing supervisor, or the NSHA for clarifications.

 With a client in context, review the Client Header, noting the presence of any Alerts or Notes. Review the Warnings, Special Considerations, AEFIs, and other pertinent information contained in the Alerts section. Note any that are no longer applicable and expire these. Add new Alerts as necessary.

	Client Demograp	hics		Add to WQ	Save	Reset	Save and	Sync with Registry		8	?
Π	🛕 Alerts 📃 🥂 Note	es								Activ	e
	Client ID: 41	Name(Last, Spring, May	First Middle)/Gender: y / Female	1	Health Card No: 0040000000			Date of Birth / 2005 Nov 15 /	Age: 12 years 0	months	;
	Phone Number: 1-(902)-555-7890(Primary	home) Jurisdiction	n Info: one,Truro Public Healt	th Office	Additional ID Ty Provincial healt	pe / Additiona h service prov	al ID: /ider identifier /	-			
	-					_	_	A			
	Client Alerts							-	- Acti	ons	×
	Client Alerts Client ID: 41	Client I Spring	Name: , May		Health Card No 0040000000	umber:		Date of Birth / Age: 2005 Nov 15 / 12 yea	• Action	ons	×
	Client Alerts Client ID: 41 Effective From ▼	Client I Spring Effective To *	Name: ,May Type ≛		Health Card No 0040000000 Messag	umber: e		Date of Birth / Age: 2005 Nov 15 / 12 yea Last Edited By	✓ Actionars	ons	×



Note Details	Alide Note Details
Note is associated with Client ID 41	
Note ID: 6	Status: Complete
Author: ALL, parsoncm	Note Date: 2017 Nov 22 21:00 AST
Role: superuser	Created Date/Time: 2017 Nov 22 21:03 AST
Note Type: Immunization	Completed Date: 2017 Nov 22
Subject Line: Clinic Visit	
Client presented at the clinic to review her immunization history with the nu Dr. Greene.	rse. She has had cold symptoms for the past four days; she was seen by

2. Once the initial review has been completed, go to the Left-Hand Navigation menu and select Immunization Profile from the Immunizations section.



- The Client Immunization Profile screen is displayed. This screen functions as a central hub of information for the clinician and provides the clinician with an overall view of the most important information about a client's immunization history. The Immunization History - Summary Grid provides a condensed summary of agents and dates of administration.
- 4. The **Immunization History Detailed Data Table** provides additional immunization details. Some details may not be available if they were not documented for historical immunizations.

Immun	nmunization History - Detailed Data Table										
	▼ Add Single Immunization ▼ Add One or More Immunizations										
Upo	Update View Delete										
	B	Agent +	Date Administered	Age at Administration	Status ≎	Trade Name ≎	Body Site ≎	Volume ≎			
		HPV-4	2017 Nov 13	11y 11m	Valid	Gardasil	Arm: upper left	0.5 mL			
		Men- C-ACYW-135	2017 Nov 13	11y 11m	Valid	Menveo	Arm: upper right	0.5 mL			

Clinicians should review historical immunizations during every client encounter to ensure that if a client received an immunization since their last visit to this clinician, it can be recorded (as a historical immunization) in the client record to ensure the record is up to date.

5. The summary table with tabs for clinical aspects of the record are also included on this screen, providing easy access to Special Considerations, Adverse Events Following Immunizations (AEFIs), Allergies, Deferrals, Mass Immunization Events and Consents. A checkmark appears in the tab when information has been documented on the client record, and Users can select each tab to review



the respective information. Note that Risk Factors will not be documented in the Immunization module.

Information from some of the tabs will appear in the **Alerts** in the **Client Header** as noted in Step 1. This includes Special Considerations and AEFIs. Users may need to update or create new Special Considerations to reflect the client's current health status.



6. The Immunization Forecaster is located lower on the Immunization Profile screen. The forecast can be viewed either by specific Agent/Antigen or by Disease. Review the Immunization Forecast section to determine the vaccines the client may presently be due/overdue to receive. Cross-reference the client's immunization record and forecast with the DHW Immunization schedule before administering a new vaccine.

Last Forecast Ran On: 2017 Nov	13							
Forecast Status calculated as of:	2017 Nov 22							Refresh Forecast
Immunizing Agent/Antigen	Forecasted Dose # ≎	Codes ≎	Volume ≎	Brand 🗘	Eligible ≎	Due 🔺	Overdue \$	Forecast Status ≎
Tdap-IPV ( Pertussis (ap)*, Diphtheria (d)* )	1	EDS			2005 Dec 27	2006 Jan 15	2006 Feb 1	5 Overdue
MMRV	1				2006 Nov 15	2006 Nov 15	2006 Dec 1	5 Overdue
HPV-4	1				2014 Nov 15	2017 Sep 01	2018 Jan 0	1 Due
Men-C-ACYW-135	1				2006 Aug 15	2017 Sep 01	2018 Jan 0	1 Due
Meningococcal (Men-C-C)	1	LOA		neisvac-c	2018 May 13	2018 May 13	2006 Dec 1	5 Overdue
Pneu-P-23	1				2007 Nov 15	2070 Nov 15	2070 Dec 1	5 Eligible
Last Forecast Ran On: 2017 Nov Forecast Status calculated as of: Filter by Disease Group:	2017 Nov 22							Refresh Forecast
Last Forecast Ran On: 2017 Nov Forecast Status calculated as of: Filter by Disease Group: Vaccine Preventable Disease Di Disease *	2 13 2017 Nov 22 isease Group Forecasted Ant	▼ tigen ≎	Forecasted	Eligible \$	Due ≎	Overde	ue 🗢 🛛 Fo	Refresh Forecast
ast Forecast Ran On: 2017 Nov Forecast Status calculated as of: litter by Disease Group: Vaccine Preventable Disease Di Disease • Human papilloma virus	13 2017 Nov 22 isease Group Forecasted Ant HPV-4	▼ tigen ≎	Forecasted Dose # ≎ 1	Eligible \$	Due ≎ 5 2017 Sep	Overda	ue ≎ Fo an 01 Du	Refresh Forecast
ast Forecast Ran On: 2017 Nov Forecast Status calculated as of: litter by Disease Group: Vaccine Preventable Disease Di Disease A Human papilloma virus Measles	13 2017 Nov 22 isease Group Forecasted Ant HPV-4 Measles (M)	▼ tigen ≎	Forecasted Dose # ≎ 1 1	Eligible \$ 2014 Nov 1 2006 Aug 1	Due ≎           5         2017 Sep           5         2006 Nov	Overda 0 01 2018 J 7 15 2006 D	ue ≎ Fo an 01 Du Dec 15 Ov	Refresh Forecast
Last Forecast Ran On: 2017 Nov Forecast Status calculated as of: Filter by Disease Group: Vaccine Preventable Disease Di Disease A Human papilloma virus Measles Meningococcal disease	13 2017 Nov 22 isease Group Forecasted Ant HPV-4 Measles (M) Meningococcal (	v tigen ≎ (Men-C-C)	Forecasted Dose # ≎ 1 1 1	Eligible \$ 2014 Nov 1 2006 Aug 1 2018 May 1	Due ≎           5         2017 Sep           5         2006 Nov           13         2018 May	Overda 0 01 2018 J 7 15 2006 D 7 13 2006 D	ue ≎ Fo an 01 Du lec 15 Ov lec 15 Ov	Refresh Forecast
Last Forecast Ran On: 2017 Nov Forecast Status calculated as of: "litter by Disease Group: Vaccine Preventable Disease Di Disease * Human papilloma virus Measles Meningococcal disease Meningococcal disease	13 2017 Nov 22 isease Group Forecasted Ant HPV-4 Measles (M) Meningococcal ( C-ACYW-135)	▼ tigen ≎ (Men-C-C) (Men-	Forecasted Dose # ≎ 1 1 1 1	Eligible \$ 2014 Nov 1 2006 Aug 1 2018 May 1 2006 Aug 1	Due \$           5         2017 Sep           5         2006 Nov           3         2018 May           5         2017 Sep	Overda 0.01 2018 J v 15 2006 D v 13 2006 D 0.01 2018 J	ue \$ Fo an 01 Du lec 15 Ov an 01 Du an 01 Du	Refresh Forecast recast Status recrue recrue recrue recue rec
Ast Forecast Ran On: 2017 Nov Forecast Status calculated as of: iliter by Disease Group: Vaccine Preventable Disease Di Disease A Human papilloma virus Measles Meningococcal disease Meningococcal disease Mumps	13 2017 Nov 22 isease Group Forecasted Ant HPV-4 Measles (M) Meningococcal ( Meningococcal ( C-ACYW-135) Mumps (Mu)	▼ tigen ≎ (Men-C-C) (Men-	Forecasted Dose # ≎           1           1           1           1           1           1           1           1	Eligible \$ 2014 Nov 1 2006 Aug 1	Due ⇒           5         2017 Sep           5         2006 Nov           3         2018 May           5         2017 Sep           5         2018 Nov	Overda           01         2018 J           /15         2006 D           y 13         2006 D           01         2018 J           y 13         2006 D           y 13         2006 D	ue ≎ Fo an 01 Du lec 15 Ov an 01 Du lec 15 Ov ec 15 Ov	Refresh Forecast
Last Forecast Ran On: 2017 Nov Forecast Status calculated as of: Filter by Disease Group: Vaccine Preventable Disease Di Disease A Human papilloma virus Measles Meningococcal disease Meningococcal disease Mumps Pneumococcal disease	13 2017 Nov 22 isease Group Forecasted Ant HPV-4 Measles (M) Meningococcal ( C-ACYW-135) Mumps (Mu) Pneumococcal (	v tigen ≎ (Men-C-C) (Men- Pneu-P-u)	Forecasted Dose # ◊           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1	Eligible \$ 2014 Nov 1 2006 Aug 1 2007 Nov 1	Due \$           5         2017 Sep           5         2006 Nov           3         2018 May           5         2017 Sep           5         2017 Nov           5         2006 Nov           5         2007 Nov	Overday           011         2018 J           v15         2006 D           v13         2008 J           v15         2018 J           v15         2006 D           v15         2006 D           v15         2006 D           v15         2006 D           v15         2007 D	ue ≎ Fo an 01 Du lec 15 Ov lec 15 Ov an 01 Du lec 15 Ov lec 15 Ov	Refresh Forecast
Ast Forecast Ran On: 2017 Nov Forecast Status calculated as of: iliter by Disease Group: Vaccine Preventable Disease Di Disease A Human papilloma virus Measles Meningococcal disease Meningococcal disease Mumps Pneumococcal disease Poliomyelitis	13 2017 Nov 22 isease Group HPV-4 Measles (M) Meningococcal ( C-ACYW-135) Mumps (Mu) Pneumococcal ( Polio (IPV)	v tigen ≎ (Men-C-C) (Men- Pneu-P-u)	Forecasted Dose # ◊           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1           1	Eligible \$ 2014 Nov 1 2006 Aug 1 2007 Nov 1 2007 Nov 1 2005 Dec 2	Due \$           5         2017 Sep           5         2006 Nov           3         2018 May           5         2017 Sep           5         2017 Nov           5         2006 Nov           5         2007 Nov           5         2070 Nov           5         2006 Jan	Overdage           011         2018 J           v15         2006 D           v13         2006 D           v15         2018 J           v15         2006 D	ue ≎ Fo an 01 Du lec 15 Ov lec 15 Ov lec 15 Ov lec 15 Ov lec 15 Eli eb 15 Ov	Refresh Forecast
Ast Forecast Ran On: 2017 Nov Forecast Status calculated as of: iliter by Disease Group: Vaccine Preventable Disease Di Disease A Human papilloma virus Measles Meningococcal disease Meningococcal disease Mumps Pneumococcal disease Poliomyelitis Rubella	13 2017 Nov 22 isease Group Forecasted Ant HPV-4 Measles (M) Meningococcal ( C-ACYW-135) Mumps (Mu) Pneumococcal ( Polio (IPV) Rubella (R)	v tigen ≎ (Men-C-C) (Men- Pneu-P-u)	Forecasted Dose # \$           1	Eligible \$ 2014 Nov 1 2006 Aug 1 2007 Nov 1 2005 Dec 2 2006 Aug 1	Due \$           5         2017 Sep           5         2006 Nov           3         2018 May           5         2017 Sep           5         2017 Nov           5         2006 Nov           5         2007 Nov           5         2006 Nov           5         2000 Nov           5         2000 Nov           5         2000 Nov	Overdage           011         2018 J           v15         2006 D           v13         2006 D           v15         2006 D	ue ≎ Fo an 01 Du lec 15 Ov lec 15 Ov lec 15 Ov lec 15 Ov lec 15 Eli eb 15 Ov lec 15 Ov	Refresh Forecast
Last Forecast Ran On: 2017 Nov Forecast Status calculated as of: iliter by Disease Group: Vaccine Preventable Disease Di Disease A Human papilloma virus Measles Meningococcal disease Meningococcal disease Mumps Pneumococcal disease Poliomyelitis Rubella Tetanus	13 2017 Nov 22 isease Group Forecasted Ant HPV-4 Measles (M) Meningococcal ( C-ACYW-135) Mumps (Mu) Pneumococcal ( Polio (IPV) Rubella (R) Tetanus (T)	v tigen ≎ (Men-C-C) (Men- Pneu-P-u)	Forecasted Dose # \$           1	Eligible \$ 2014 Nov 1 2006 Aug 1 2018 May 1 2006 Aug 1 2006 Aug 1 2006 Aug 1 2007 Nov 1 2005 Dec 2 2006 Aug 1 2005 Dec 2	Due \$           5         2017 Sep           5         2006 Nov           13         2018 May           5         2017 Sep           5         2017 Nov           5         2006 Nov           5         2007 Nov           5         2000 Nov	Overdig           01         2018 J           15         2006 D           y 15         2006 D           y 13         2006 D           y 15         2006 D           15         2006 D           y 15         2006 D           15         2006 D           15         2006 D           15         2006 D           15         2006 D	ue ≎ Fo an 01 Du lec 15 Ov lec 15 Ov an 01 Du lec 15 Ov lec 15 Eli eb 15 Ov lec 15 Ov lec 15 Ov	Refresh Forecast

7. Once the clinician has reviewed the relevant client record and Forecast, and determined the appropriate immunizations to administer, the clinical process continues with a clinical assessment regarding whether the client is fit to immunize and to obtain consent.

If the client is deemed to be unfit to immunize for any reason, a **Deferral** can be made. Refer to Section 6 for guidance on Deferrals.

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Once the clinical assessment is completed, consent is confirmed, and the client is deemed fit to receive the immunization, the clinician can proceed to administer the vaccine as per the NS guidelines for vaccine administration. Record the immunization after it has been administered.

8. Panorama can record both single and multiple immunizations using the same basic process.

#### 3.3.2.1 Non-Provider Recorded – Add Single Immunizations

For a single immunization, select the **Non-Provider Recorded** option for **Add Single Immunization**.



1. The **Add Immunization** screen is displayed with an **Immunization Type** of Non-Provider Recorded. Required data fields are identified with a red asterisk.

Add Immunization		Record Consent	Apply	Reset	8	×
Immunization Type: Non-Provider Recorded Include non-inventoried agents * Agent: Consent Readiness: * Consent for Service Ov	n:mm ADT	Age at Administration	days			
Reason for Immunization:       Information Source:         * Provider:       PIEK, KRISTA LEIGH	Verification Status: Requested Not Requested					
Organization: Truro PHO     Vaccine Details	* Service Delivery Location: Truro PHO, Truro, Nova S	cotia	<b>0</b> Q		*	
Holding Point Name:	Holding Point Location:	Pu	blicly Funded			
Display Expired and Recalled Lots	Dosage:	Dosag	e UOM:			
Show All Publicly Funded     Non-Publicly Funded	• Site: Trade Name:	* Rout Manuf	e: acturer:	Y		
Comments:						
(4000 characters remaining.)						
		Reco	rd Consent	Apply	Rese	ət



2. Select the required immunizing agent from the Immunizing Agent drop-down list. Remember this is a type ahead field. Type in a few letters and Panorama will provide options.

* Agent:		
MMR		-
MMR	ą	
MMR		
MMRV		

- 3. Record the date of administration by clicking on the calendar icon beside the date field or by manually entering a different date using the format YYYYMMDD. Do not enter slashes when typing the date manually as Panorama will provide these automatically. Although not identified as a required field, it is best practice to record the time of administration as well, enabling more accurate tracking when Adverse Events occur. Users should comply with DHW policy regarding recording both date and time of vaccine administration.
- 4. The Consent Status will be displayed. If consent is not granted or documented, clinicians may do a consent override based on clinical judgement in urgent situations. Such action requires a physician order and must comply with DHW policy.

	•	
	٩	
9	Created from external system	cation Status: Requested
	Imminent danger Immunized without consent	Not Requested

5. In Non-Provider Recorded documentation, the user will search for the name of the Provider that administered the immunization to the client. Type the first few letter of the Provider's last name. Panorama will generate a list of all the Providers whose names match the search. Select the desired **Provider** from the list. Follow the same search process to select the appropriate **Organization**, and **Service Delivery Organization**, if they are not already listed.

	Verification Status:	
<b>0</b> Q	Requested	
	Not Requested	
	Completed	
	* Service Delivery Location:	
<b>0</b> Q	Truro PHO, Truro, Nova Scotia	<b>0</b> Q
	<ul><li>(1)</li><li>(2)</li><li>(3)</li><li>(4)</li><li>(4)</li><li>(5)</li><li>(4)</li><li>(4)</li><li>(5)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><li>(4)</li><l< td=""><td>Verification Status:</td></l<></ul>	Verification Status:

6. Add the Holding Point Name and Holding Point Location.

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* Vaccine Details		
Holding Point Name:		Holding Point Location:
Truro PHO	-	Truro-HPL2-Clinic

7. Enter the **Lot Number** from the dropdown menu. Multiple Lot Numbers may be available for the agent/antigen.



8. Enter the anatomical **Site** of vaccine administration from the dropdown menu.

	ρ
Arm: upper left	
Arm: upper right	
Deltoid: left	
Deltoid: right	
Dorsogluteal: left	
Dorsogluteal: right	
Mouth	

9. Enter the **Route** of administration from the dropdown menu.

[	٩
ļ	
ļ	Infiltrate
l	Intradermal
ł	Intramuscular
l	Intranasal
l	Intravenous
	Oral
l	Subcutaneous

10. Panorama will automatically enter the **Dosage UOM** based on the Lot Number. Users can also change the **Dosage UOM** by clicking on the arrow and scrolling through the dropdown menu.



* Dosage UOM:	
mL	•

11. Click Apply. Panorama will return to the Immunization profile screen and display the newly added immunization in the Immunization History - Detailed Data Table. The new immunization will appear at the bottom of the table with an icon indicating an addition to the client record is documented and will be added when the record is saved.

Immu	Immunization History - Detailed Data Table											
	✓ Add Single Immunization ✓ Add One or More Immunizations											
Up	Update View Delete											
	B	Agent 🔺	Date Administered	Age at Administration	Status \$	Trade Name 🗘	Body Site 💠	Volume ≎				
		HPV-4	2017 Nov 13	11y 11m	Valid	Gardasil	Arm: upper left	0.5 mL				
		Men-	2017 Nov 13	11y 11m	Valid	Menveo	Arm: upper right	0.5 mL				
	Ð	MMRV	2017 Nov 22	12y 0m		Priorix-Tetra	Arm: upper left	0.5 mL				

12. Click **Save**. Panorama will confirm that the record is successfully updated.



#### 3.3.2.2 Non-Provider Recorded – Add One or More Immunizations

The following steps outline how to Add One or More Single Immunization – Non-Provider Recorded:

1. If the client is receiving multiple immunizations, the User will follow the same process except to start the process by selecting **Add Non-Provider Recorded** under **Add One or More Immunizations.** 



2. Select the Agents/antigens from the **Agent** dropdown menu. Enter the **Date(s)** of administration. Click **Enter Details**.



Add Multiple Immunizations	d Multiple Immunizations						ĸ	
Immunization Type: Non-Provider Recorded Include non-inventoried agents								
	Click a table cell to select or enter a value. Add 4 Rows							
Agent	Date 1	Date 2	Date 3	Da	ate 4			
IPV 🔹	2017/11/22	yyyy/mm/dd	yyyy/mm/dd	у	yyy/mm/dd			
Pneu-P-23	2017/11/22	yyyy/mm/dd	yyyy/mm/dd	] 🔲 🛛 У	yyy/mm/dd			
•	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd	у	yyy/mm/dd			
•	yyyy/mm/dd	yyyy/mm/dd	yyyy/mm/dd		yyy/mm/dd			

 The Add Immunization screen will appear. Panorama will identify the number of immunizations being documented in the top right-hand corner in purple highlight. When all required fields (identified by the red asterisk) have been completed, click Next to proceed to the next screen to document the additional immunizations. Ensure that the correct Provider, Organization, and Service Delivery Location are searched for and selected.

Immunization Type: Non-Provider Recorded		1 of 2 immunizations
Agent:	Age at ADT 12	Administration:
Consent Readiness: Granted	years	months days
Reason for Immunization: Information Source:	*	
* Provider:	Verification Status:	
PIEK, KRISTA LEIGH	Requested	
	Not Requested	
	Completed	
* Organization:	* Service Delivery Location:	
Truro PHO 0	Truro PHO, Truro, Nova Scotia	<b>()</b> Q
* Vaccine Details		<b>^</b>
Holding Point Name:	Holding Point Location:	
Truro PHO 👻	Truro-HPL2-Clinic	Publicly Funded
* Lot Number:	Dosage:	* Dosage UOM:
Display Expired and Recalled Lots	0.5	mL 👻
Show All Publicly Funded Non-Publicly Funded	* Site:	* Route:
T44RTY6 - Exp. 2019 Nov 19	Arm: upper left	•
	Trade Name:	Manufacturer:
	Imovax Polio	Sanofi Pasteur Ltd.
Comments:		
(4000 characters remaining.)		
		Next Delete Reset

4. Compete the required information fields for the next immunization, and continue to click **Next** until all immunizations have been documented. On the screen for the final immunization, click **Finish**.



Immunization Type: Non-Provider Recorded					<b>2</b> of	2 immuni	zations
Include non-inventoried agents	Date Administered:		Age at Adn	ninistration:			
* Agent:	2017/11/22 🔳 hh:n	nm ADT	12	0			
Pneu-P-23			vears	months	davs		
Consent Readiness: Granted			,				
Reason for Immunization:	Information Source:						
*		*					
Provider:		Verification Status:					
PIEK, KRISTA LEIGH	Q	Requested					
		Not Requested					
		Not Requested					
		Completed					
Organization:		* Service Delivery Location:					
Truro PHO	Q	Truro PHO, Truro, Nova S	cotia		0 Q		
* Vaccine Details							\$
Holding Point Name:		Holding Point Location:					
Truro PHO	*	Truro-HPL2-Clinic		Publi	cly Funded		
Lot Number:		Dosage:		* Dosage	UOM:		
Display Expired and Recalled Lots		0.5		mL			
Show All Publicly Funded Non-Publicly Fun	nded	* Site:		* Route:			
M034698 - Exp. 2018 Apr 01		Arm: upper right	-			-	
		Trade Name:		Manufact	urer:	_	
		Pneumovax23		Merck F	rosst		
Comments:							
(4000 characters remaining.)							
				P i	Finish	Delete	Dent
				Previous	Finish	Delete	Reset

5. The new immunizations will appear in the **Immunization History – Detailed Data Table** with an icon indicating that the immunizations will be added when the client record is saved. Click **Save** to add the immunizations to the client record.

lient	Imn	nunization Pr	ofile		Launch Report	Add to WQ	Save Reset	
Upo	late	View Delete						
	8	Agent +	Date Administered	Age at Administration	<sup>n</sup> Status ≎	Trade Name 💠	Body Site 🗘	Volume 🗘
		HPV-4	2017 Nov 13	11y 11m	Valid	Gardasil	Arm: upper left	0.5 mL
	Ð	IPV	2017 Nov 22	12y 0m		Imovax Polio	Arm: upper left	0.5 mL
		Men- C-ACYW-135	2017 Nov 13	11y 11m	Valid	Menveo	Arm: upper right	0.5 mL
		MMRV	2017 Nov 22	12y 0m	Valid	Priorix-Tetra	Arm: upper left	0.5 mL
	Ð	Pneu-P-23	2017 Nov 22	12y 0m		Pneumovax23	Arm: upper right	0.5 mL

6. A message will appear confirming the update was saved.





# Tip: Non-Provider Recorded Immunizations

The values in the **Provider**, **Organization**, and **Service Delivery Location** fields will be applied to all immunizations recorded at the same time. If you are recording several immunizations for a client that were administered by different providers at the same clinic, you will need to record them separately.



## **4 IMMS HISTORY INTERPRETATION**

The **Immunization History Interpretation Summary** screen provides a summary view of available interpretation data regarding a client's susceptibility/immunity to a disease. Available information may be obtained directly from a client, laboratory records, or from a client's healthcare provider.

You can view, create, update, or delete an immunization history interpretation via the **Immunization History Interpretation Summary** screen only if there is a client in context.

#### 4.1 View Imms History Interpretation

- 1. Place a client In Context.
- 2. Go to the Left-Hand Navigation menu and click on Imms History Interpretation.



3. The **Immunization History Interpretation Summary** screen displays a list of interpretations for the client in context.



	GATIONS OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN	-					
Immunization Hi	istory Interpretati	on Summar	у			?≞					
Alerts	Alerts ACTIVE										
Client ID:	Name(Last, First	Health Card No:	Da	te of Birth / Age:							
<u>42</u>	Winter, Wanda / Female	0091000000	200	05 Feb 24 / 12 years 9	9 months						
Phone Number:	Jurisdiction Info:	Additional ID Typ	e /								
1-(902)-667-5673(Primary home)	Northern Zone, Truro Public Health Office	Provincial health s	Additional ID: Provincial health service provider identifier / -								
Immunization History Int	terpretation Summary										
		Disease:			Create Interp	pretation					
1 Interpretation(s) total	-		Click on Pertinent	to Investigation ID to	view Investigation	Summary.					
Row Action View/Update	]										
Status Interpreta	tion Disease	Interpretation of Disease Immunity	Reason 🔻	Vaccine T	Doses Pertine Needed Investig	nt to gations					
• Active 2017 Dec 3	3 Varicella	Immune	Previous Disease	- 0	) -						

- 4. To view the interpretation, select the radio button next to the Status column.
- 5. Click the View/Update button.
- 6. The Immunization History Interpretation Details will display.

Alerts						ACTIVE
Client ID:	Name(Last, First	Health Card No:	Date of Birth / Age:			
42	Winter, Wanda / Female	0091000000	2005 Feb 24 / 12 years	s 9 months		
Phone Number:	Jurisdiction Info:	Additional ID Type / Additional ID:				
I-(902)-667-5673(Primary nome)	Northern Zone,Truro Public Health Office	Provincial health service provider identifier / -				
				Save	Reset	Can
			* Reason for Deletion:			
					0	Dele

### 4.2 Record Imms History Interpretation

- 1. Go to the **Left-Hand Navigation** menu and click on **Imms History Interpretation**.
- 2. On the **Immunization History Interpretation Summary** screen, select a disease from the **Disease** drop-down menu. The **Create Interpretation** button will become enabled. Click the button.



nmunization H	istory Interpretation	on Summary		0
Alerts				ACTIVE
Client ID:	Name(Last, First	Health Card No:	Date of Birth / Age:	
42	Winter, Wanda / Female	0091000000	2005 Feb 24 / 12 years 9 month	s
Phone Number:	Jurisdiction Info:	Additional ID Type /		
1-(902)-667-5673(Primary home)	Northern Zone, Truro Public Health Office	Provincial health service provider identifier / -		
nmunization History In	terpretation Summary			
		Disease: Varicella	Cri	eate Interpretation
Interpretation(s) total		Click on P	Pertinent to Investigation ID to view Inv	estigation Summa
Row Action: View/Update				
Status Interpretati	on Disease	Interpretation Reason	Vaccine Doses Per Needed Inve	tinent to estigations

3. The Create Immunization History Interpretation screen will display.

Create Immunization History Inte	erpretation
Note: Once submitted, only Status and F	Pertinent to Investigation fields will be editable with the option of adding Comments.
Disease:	Varicella
* Interpretation of Disease Immunity:	Immune
* Interpretation Date:	2017 / 12 / 03
	yyyy mm dd
Reference Data:	
* Reason:	Previous Disease
Vaccine:	
Valid Doses Received:	
Doses Needed:	
Follow-up:	
* Status:	• Active O Inactive
Comments	
Comments:	
	(4000 characters) Add
Date Comments	Recorded By
2017 Dec 3 Client had Varice	la at 2 years of age. ALL, parsoncm
	Save Clear Can

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- 4. Make a selection from the Interpretation of Disease Immunity drop-down menu.
- 5. Complete the **Interpretation Date**. The fields will be populated with today's date. Change if required.
- 6. Select from the **Reason** drop-down menu.
- 7. Status defaults to Active.
- 8. Add a comment in the **Comments** field. Click **Add**. Saving alone will not save the comment.
- 9. The user does not need to complete the **Valid Doses Received** or **Doses Needed** boxes.
- 10. Click Save.
- 11. A confirmation message will display.

Immunization I	History Interpretation	on Details		?≞
Alerts				ACTIVE
Client ID:	Name(Last, First Middle)/Gender:	Health Card No:	Date of Birth / Age:	
<u>42</u>	Winter, Wanda / Female	0091000000	2005 Feb 24 / 12 years 9 months	
Phone Number:	Jurisdiction Info:	Additional ID Type / Additional ID:		
1-(902)-667-5673(Primary home)	Northern Zone, Truro Public Health Office	Provincial health service provider identifier / -		
			*Reason for Deletion:	t Cancel
				Delete
* Required Field Immunization History	Interpretation Details			
Immunization History Interp	pretation successfully saved.			

#### 4.3 Update an Immunization History Interpretation

1. To update an Immunization History Interpretation, select the interpretation and click **View/Update**.



WORK MGMNT	INVESTIGATION	S OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	_	ADMIN	
Immunizat	tion Histor	y Interpretation	on Summar	у			۲	Ē
Alerts							ACTIV	Æ
Client ID:	Nam	e(Last, First le)/Gender:	Health Card No:	Dat	te of Birth / Age:			
<u>42</u>	Winte	er, Wanda / Female	0091000000	200	05 Feb 24 / 12 years	9 months		
Phone Number:	Juris	diction Info:	Additional ID Typ Additional ID:	e /				
1-(902)-667-5673 home)	Realt	ern Zone,Truro Public h Office	Provincial health s provider identifier /	ervice				
Immunization H	listory Interpret	ation Summary						
			Disease:			Crea	ate Interpretatio	n
1 Interpretation(s)	total			Click on Pertinent t	to Investigation ID to	view Inve	stigation Summa	ary.
Row Action: Vi	ew/Update							
<u>Status</u>	Interpretation Date	<u>Disease</u>	Interpretation of Disease Immunity	Reason 🔻 🗄	Vaccine 🔻	Doses Needed	Pertinent to Investigations	
<ul> <li>Active</li> </ul>	2017 Dec 3	/aricella	Immune	Previous Disease	-	0	-	

2. The only updates that can be made are to change the status (Active or Inactive), and to add a comment in the **Comments** section. If adding a comment, click **Add**.

mmunization History Interpretation	on Details	
Pertinent to Investigations:		
Disease:	Varicella	
Interpretation of Disease Immunity:	Immune	
Interpretation Date:	2017 Dec 3	
Reference Data:		
Reason:	Previous Disease	
Vaccine:		
Valid Doses Received:	0	
Doses Needed:	0	
Follow-up:		
* Status:	• Active Inactive	
Comments		
Comments:		
	(4000 characters)	Add
Date Comments	Recorded By	
2017 Dec 3 Client had Varicella	a at 2 years of age. ALL, parsoncm	
		Save Reset Cancel



#### 4.4 Delete an Immunization History Interpretation

- 1. To delete an Immunization History Interpretation, select the interpretation and click **View/Update**.
- 2. The Immunization History Interpretation Details screen displays.

WORK MGMNT	INVESTIC	GATIONS	OUTBREAKS	IMMUNIZATION	FAMILY HEALTH	INVENTORY	ADMIN	
Immunizat	tion H	istory I	Interpretation	on Details			0	
Alerts A	Notes						AC	TIVE
Client ID:		Name(La	st, First	Health Card No:	Date	of Birth / Age:		
<u>42</u>		Winter, W	anda / Female	0091000000	2005	Feb 24 / 12 years 9 m	nonths	
Phone Number:		Jurisdict	ion Info:	Additional ID Type	1			
1-(902)-667-5673 home)	(Primary	Northern Health Of	Zone,Truro Public fice	Provincial health se provider identifier /	rvice			
							Bave Reset C	ancel
					* Reason for	Deletion:		
					✓ Entered	In Error		Delete
* Required Field								

- 3. Make a selection from the **Reason for Deletion** drop-down menu.
- 4. Click Save.



## **5 SPECIAL CONSIDERATIONS**

Special considerations are factors that impact a client's eligibility for an immunization and as such, impact the client's immunization forecast for future immunizations. They include contraindications, exemptions, and precautions.

- **Contraindications:** A contraindication to an immunizing agent is recorded when a client's health risk associated with receiving this agent outweighs the benefit of the vaccination. A contraindication will suspend the forecast for the vaccine to which it applies.
- **Exemptions:** An exemption to an immunizing agent is recorded when a client has documented evidence of immunity to a disease, or in rare cases where a client refuses a vaccine and does not want any future reminders regarding the refused vaccine. An exemption will suspend the forecast for the vaccine to which it applies.
- **Precautions:** A precaution is recorded to alert other providers of any changes in routine immunization practice for specific clients. A precaution is also recorded to document additional information that is relevant when providing immunization services. *When a precaution is recorded, the client will still be forecasted for the immunizing agent(s) to which it applies.*

This section includes the following:

- 1. View Special Considerations
- 2. Record Special Considerations
- 3. Update Special Considerations
- 4. Delete Special Considerations
- 5. Determining the Appropriate Special Considerations
- 6. Expire Special Considerations

### 5.1 View Special Considerations

There are several ways to view **Special Considerations**, all of which provide rapid, easy access to this information.

The first method is designed to be the most significant, delivering rapid communication among clinicians, and is included as an **Alert**.

 The Alert icon is a yellow triangle that is internationally recognized as a caution sign. When relevant client data is recorded that meets specific criteria, the Alerts icon will appear; it is permanently located in the top left-hand corner of the Client Header. This icon will be visible at all times on the Client Header regardless of which screen the User may be working on.



ſ	Client Demographics	Add to WQ	Save Reset Save and Syr	nc with Registry
	Alerts			Active
	Client ID: 41	Name(Last, First Middle)/Gender: Spring, May / Female	Health Card No: 0040000000	Date of Birth / Age: 2005 Nov 15 / 12 years 0 months
	Phone Number: 1-(902)-555-7890(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Additional ID: Provincial health service provider identifier / -	

2. Clicking on the **Alert** icon will prompt Panorama to display the summary table with all active warnings and Special Considerations. When done reviewing the Special Considerations, users can simply close the viewing screen by clicking the "x" on the top right-hand corner.

1	Client Alerts							<ul> <li>Actions</li> </ul>	×
-	Client ID: 41	Client I Spring,	Name: May	H 01	Health Card Number:Date of Birth / 2005 Nov 15		Date of Birth / Age: 2005 Nov 15 / 12 years		
	Effective From *	Effective To *	Туре *		Message		Last Edited By 🗘		
	2017 Nov 22		Client Warning		Client become receiving imm time.	es very anxious prior to nunizations. Provide extra	ALL, parsoncm		
	2007 Nov 22		Special Conside	ration: Exemption	Antigen: Vario Presumed im Interpretation	cella (Var), Reason: mune (Imms History )	ALL, parsoncm		
	Total: 2							10	-

The second method is by accessing the **Special Considerations** tab on the **Left-Hand Navigation Menu.** 

1. Go to the **Left-Hand Navigation** and click on the **Special Considerations** section.

🔗 Immunizations 🛛 🗸 🗸					
Immunization Profile					
Special Considerations					
Adverse Events (AEFI)					
Deferrals					
Mass Immunization Events					
TB Skin Test Summary					
Mass TB Event Summary					
Invalidate Vaccine					
Vaccine Wastage					
Schedule Reforecast					
Encounter Details					
 Subject Summary					

2. The **Special Considerations** screen will appear. A summary table will display Special Considerations.



peci	al Co	onsiderations				Add to WQ	Save	Reset 🛛 🛛 🗖 🔒 🤶	
🚹 Ale	rts							Active	
Client ID: 1 Name(Last, First Middle)/Gender: Health Card No 41 Spring, May / Female 004000000						Date of Birth / Age: 2005 Nov 15 / 12 years			
Phone M 1-(902)-	lumber: -555-78	: 90(Primary home)	Jurisdiction Info: Northern Zone, Truro Publi	Additional ID Type / / Provincial health ser	Type / Additional ID: adth service provider identifier / -				
Spec	ial Co	nsiderations							
								Add	
Up	date	View Delete							
	6	Туре 🝝	Applies To 🔺	Antigen/Age /Disease	nt Reason	•	Effective From 🗘	Effective To 🗢	
		Exemption	Antigen	Varicella (Var	) Presumed (Imms His	d immune story	2007 Nov 22		

The third way to view documented **Special Considerations** is to click on the **Immunization Profile** for a client In Context.

1. Go to the **Left-Hand Navigation** menu and click on the **Immunizations** section and click on the **Immunization Profile**.

🧷 Immunizations 🗸 🗸 🗸
Immunization Profile
Special Considerations
Adverse Events (AEFI)
Deferrals
Mass Immunization Events
TB Skin Test Summary
Mass TB Event Summary
Invalidate Vaccine
Vaccine Wastage
Schedule Reforecast
Encounter Details
Subject Summary

2. The **Immunization Profile** screen will be displayed. Below the Immunization History- Detailed Data Table are the summary tabs for the various aspects of the client record. Tabs containing a checkmark have documented information that can be viewed by clicking on the tab.

Special Considerations is the first tab in this section and will always be immediately visible when users go to the Immunization Profile.



Immu	inization	History - Detailed	Data Table									
						- Add	Single In	munization	- Add	One or More I	mmunizations	
						+ Auu	Single in	inumzation	+ Auu (	one or more r	mmumzations	
U	pdate	View Dele	te									
	B	Agent 🔺	Date Administered	Age at Administration	Status	\$	Trade	Name ≎	Body Sit	e \$	Volume ≎	
		HPV-4	2017 Nov 13	11y 11m	Valid		Garda	sil	Arm: upper left		0.5 mL	
		Men- C-ACYW-135	2017 Nov 13	11y 11m	Valid Menve		0	Arm: upp	er right	0.5 mL		
	Special (	Considerations	AEFI Allergies De	eferrals Risk Factors	TB Skin Te	est IG	RA Tests	✓ Mass Im	ms Event	✓ View Cor	nsent IHI	
Ľ.,												
	Type * Applies To *		Antigen/Agent /Disease	Reason 🗘			Effective From \$		Effective T	• •		
	Exemption Antigen		Varicella (Var)	Presumed i (Imms Histo Interpretatio		Presumed immune (Imms History Interpretation)		2007 Nov 22				
	Total: 1				1						10 -	

### 5.2 Record Special Considerations

To record a new Special Consideration, follow the steps below.

1. Go to the Left-Hand Navigation menu and click on the Special Considerations section. The Add Special Considerations screen will be displayed. Click Add.

	Special Considerations			Add to WQ	Save	Reset	ii log	₽?
Γ								Active
	Client ID: 41	Name(Last, First Middle)/Gender: Spring, May / Female	Health Card No: 0040000000			Date of Birth / 2005 Nov 15 /	Age: 12 years 0	months
	Phone Number: 1-(902)-555-7890(Primary home)	Jurisdiction Info: Northern Zone,Truro Public Health Office	Additional ID Type / Add Provincial health service	ditional ID: æ provider identifier	/-			
	Special Considerations							<b>^</b>
	To create a new record click Add.							Add

 The Add Special Considerations screen will be displayed. There are several required fields on this screen, all marked with the red asterisk. Aside from the Organization and Service Delivery Location which will be defaulted according to the User's login credentials, the required fields include Type of Special Consideration, Reason for Special Consideration, Special Consideration Applies To, Effective From date, and Source of Evidence.



Add Special Consideration		Apply	Reset	₽	×
* Organization: Truro PHO ① Q	* Service Delivery Location: Truro PHO, Truro, Nova Scotia	<b>0</b> Q			
Type of Special Consideration:     Exemption	* Reason for Special Consideration:			*	
Special Consideration Applies to:					
Antigen					
Agent					
Agent Group					
Disease					
Disease Group					
* Effective From: To: 2017/11/21 III yyyy/mm/dd III					
* Source of Evidence: Date Documented: Created from external system  vyyyy/mm/dd					
Recommended Actions:					
Do not Immunize					

3. Select the **Type of Special Consideration** from the dropdown menu. Users must select between the three types of Special Considerations.

* Type of Special Consideration:	
Contraindication	-
Contraindication	
Exemption	
Precaution	

4. Select the Reason for Special Consideration from the dropdown menu.

The list of options will be adjusted based on the specific **Type of Special Consideration** the User selected in the previous step. The list is comprehensive and Users will be required to scroll through to locate the correct reason. Remember that this is a type ahead field and Users can type a few letters to quickly display the preferred reason.

* Reason for Special Consideration:	
	-
٩	
Conscientious objector	
Immunity confirmed by lab result	
Presumed immune (Imms History Interpretation)	

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- 5. When considering the **Special Consideration Applies To** field, users have several options from which to choose, and can indicate their choice by clicking on the round radio button beside the desired choice.
  - Select **Antigen** if the Special Consideration applies to only one antigen, such as Varicella.
  - Select Agent if the Special Consideration applies to a single agent, such as DPT.
  - Select **Agent Group** if the Special Consideration applies to an entire group or type of vaccines. **All Live Vaccines** is the only choice in this group at present.
  - Select **Disease** if the Special Consideration applies to a specific disease, such as Diphtheria.
  - Select **Disease Group** if the Special Consideration applies to an entire group of diseases. **Vaccine Preventable Communicable Diseases** is the only choice in this group at present.

* Special Consideration Applies to:						
Antigen	Varicella (Var)	•				
Agent	Vari	l				
Agent G	Varicella (Var) Varicella zoster immune globulin (Varlg)					

Agent		•					
Agent		٩					
Diseas	Anth						
Diseas	Diseas BAT-heptavalent BAT-unspecified						
* Effective F 2017/11/21	F BCG 1 Chol-Ecol-O						
* Source of I Created fro	Chol-I Chol-O Chol-unspecified						
Agent 0	Group	•					
Diseas	e	٩					
Disease	e Grou	All Publicly Funded Vaccines					
* Effective Fr 2017/11/21	om:	Publicly Funded Live Vaccines School Vaccines					



Disease	Diphtheria -	
Disease	Dip	
	Diphtheria	
* Effective From	Diphtheria: Acute	
2017/11/21	Diphtheria: Carrier	
* Source of Evi	Diphyllobothriasis	
Created from	exiemai sysiem	
Disease Grou		
* Effective Eremu		l
2017/11/21		I
* Source of Evidence	DNA Disease Group	ər
Created from exte	rn: ISPA Disease Group	1
Recommended Act	ior Vaccine Preventable Disease Disease Group	

6. Enter the Effective From date, which is a required field. Enter the Date Documented. Both dates will default to the date that User is documenting the Special Consideration in Panorama. If the Special Consideration started before the date of documentation, adjust the Effective To date accordingly. For example, if the client had chickenpox on January 1, 2017, but is only seeing a clinician on April 13, 2017, the Effective From: date would be January 1<sup>,</sup> 2017 and the Date Documented would be April 13, 2017.



## Tip: Immunization Forecaster and Effective To Dates

An exemption or contraindication without a value in the **Effective To** date field will stop the forecast for a client <u>indefinitely</u>. Even if the client qualifies for an associated vaccine based on other factors and the provincial schedule, this vaccine will not be displayed in the client's forecast as long as there is an active contraindication or an exemption for that client.

## Tip: Immunization Forecaster and Effective To Dates

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The **Effective To** date may be used in cases when the special consideration is known to be in effect for a limited time, for example in the case of pregnancy or when a reassessment may be required at a specific future date to confirm that it still applies.

If the Special Consideration is a type that stops the immunization forecast (Contraindication or Exemption), this date would have an impact on when the forecast for the affected agent is applied again.

For example, if the client was pregnant and contraindicated for a live vaccine, the user can set up an **Effective to** date to the date of delivery. During pregnancy, the client will not be forecast for a vaccine, but as soon as the **Effective To** date passes, the vaccine will be displayed in the client forecast again.

7. Enter the **Source of Evidence** from the drop-down menu. Again, these options will be adjusted to align with the **Type of Special Consideration** selected.

Source of Evidence:					
Created from external system					
م ا					
Created from external system					
Direct observation					
Immunization record					
Lab report					
Verbal report					

8. An optional field is the **Recommended Actions**. Select the desired action and click on the action arrows in the centre to confirm the desired action in the right-hand box.

Recommended Actions:			
	p		م
Do not Immunize		$\rightarrow$	
Immunize		⇒I	
		÷	

9. When all require fields have been completed, click Apply.



special Considerations						\$
Add Special Consideration			Appl	y Reset	₽	×
Organization:		* Service Delivery Location:				
Truro PHO	Q	Truro PHO, Truro, Nova Scotia	0	Q		
Type of Special Consideration:		• Reason for Special Consideration:				
Exemption	-	Presumed immune (Imms History Interp	retation)			
Special Consideration Applies to:						
Antigen Varicella (Var)						
Annet						
Agent						
Agent Group						
Disease						
Disease						
Disease Group						
Effective From: To: 2007/11/22						
Source of Evidence: Da Immunization record 20	te Documented:					
Recommended Actions:						
٩	د	D				
Immunize Do not Immur	nize					
14-						
14-						
Comments:						
4000 characters remaining.)						
Documents						
No Documents exist for the current page context.						
				Apply	Re	set

10. Panorama will then display the new **Special Considerations** in the summary table with an icon to indicate a pending Special Considerations. Click **Save** to add the new Special Considerations.

Special Considerations											
	Add										
Up	Update View Delete										
	8	Туре 🔺	Applies To *	Antigen/Agent /Disease +	Reason ≎	Effective From \$	Effective To 🗘				
	Ð	Exemption	Antigen	Varicella (Var)	Presumed immune (Imms History Interpretation)	2007 Nov 22					
Tota	otal: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										

11. The User will receive a confirmation that the **Special Considerations** has been successfully saved on the client record.



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#### Tip: Recording a Special Consideration

**Special Considerations** are recorded at the vaccine level and created at the antigen level. For example, a contraindication documented for DTaP will create individual contraindications for Diphtheria, Tetanus, and Pertussis.

#### 5.3 Update Special Considerations

If changes are required to the client's Special Considerations, users can perform this easily.

- 1. Go to the **Left-Hand Navigation** and the **Special Considerations** section. The summary table will display current Special Considerations.
- 2. Select the desired Special Considerations to be updated. Click **Update**.

Specia	I Cor	nsiderations					× .		
	_						Add		
Upda	Update View Delete								
		Туре 🔺	Applies To *	Antigen/Agent /Disease +	Reason ©	Effective From \$	Effective To 🗘		
•		Exemption	Antigen	Varicella (Var)	Presumed immune (Imms History Interpretation)	2007 Nov 22			
Total:	1						10 -		

3. The **Update Special Considerations** screen will be displayed. Enter the updated information in the appropriate fields. Note that all fields except the **Effective To** date are grayed out, meaning that the user cannot edit these.



Jpdate Special Consideration				Apply	Reset	0	×
Organization:			* Service Delivery Location:				
Truro PHO			Truro PHO, Truro, Nova Scotia				
Type of Special Consideration:			* Reason for Special Consideration:				
Exemption		Ψ.	Presumed immune (Imms History Interpretation)			*	
Special Consideration Applies to:							
Antigen Varicella (Var)	· · ·						
* Effective From: To:							
2007/11/22 yyyy/mm/dd							
Source of Evidence:	Date Documen	ited:					
Immunization record	2017/11/21						
Recommended Actions:							
<u>م</u>		р					
Immunize	Do not Immunize						
-+1	t						
14-							
							_
Comments To create a new record clic	ck Add.					Ad	d
					Contex	t Docu	iment
Documents							
No Documents exist for the current page of	context.					1	
						_	

4. If the User wishes to update more than the **Effective To** date, a comment can be added. Click **Add** to add a comment in the **Comment** field. When the comment is complete, click **Apply** to record the comment.

Add Comment Apply	Reset	⊖ ×
Comments: (4000 characters remaining.)		
	Apply	Reset

5. The **Update** screen will display the new comment and updated information. Click **Apply** to document the overall update.



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Update Special Consideration			Apply	Reset	<b>×</b>
Organization: Truro PHO		* Service Delivery Location: Truro PHO, Truro, Nova Scotia 🚯			
Type of Special Consideration:		* Reason for Special Consideration:			
Exemption	÷	Presumed immune (imms History interpretation)			· ·
* Special Consideration Applies to:					
Antigen Varicella (Var)					
Effective From:     To:     yyyy/mm/dd					
* Source of Evidence: Date Docu	mented:				
Immunization record   2017/11/2	21				
Recommended Actions:					
٩	Q				
Immunize Do not Immunize					
+1					
14					
Comments					Add
Update Delete					
Date Date	Comments	Recorded By	1		
€ 2017 Nov 22 19:03:19 GMT	Current copy of difficult to read. ordered.	f the immunization record is An official record has been ALL, parsono	m		

- 6. The updated **Special Considerations** will be displayed in the summary table with an icon indicating that an update is pending.
- 7. Click Save. A message will appear confirming the update was saved.

pecia	al Co	onsiderations	1		Add to V	WQ Save Reset    🜆 🖨 1
Upd	late	View Delete				Add
	8	Туре 🔺	Applies To *	Antigen/Agent /Disease *	Reason ≎	Special Considerations was successfully updated.
		Exemption	Antigen	Varicella (Var)	Presumed immune (Imms History Interpretation)	2007 Nov 22
Total:	: 1					10 🔽

### 5.4 Delete Special Considerations

If for any reason a Special Considerations should be deleted from a client record, this can be done easily and quickly. Remember that Panorama will retain an audit record of all transactions in client records for security purposes, but users can and should delete Special Considerations documented in error.

- 1. Go to the **Left-Hand Navigation** and the Special Considerations section. The summary table will display current **Special Considerations**.
- 2. Select the desired Special Considerations to be updated by clicking on the checkbox to the left. Click **Delete.**



Spec	cial Co	onsiderations					*
							Add
Up	date	View Delete					
	8	Туре 🔺	Applies To 🔺	Antigen/Agent /Disease	Reason ≎	Effective From <b>\$</b>	Effective To 🗘
•		Exemption	Antigen	Varicella (Var)	Presumed immune (Imms History Interpretation)	2007 Nov 22	
Tota	ıl: 1				2 X		10 💌

3. Panorama will prompt the user to provide a **Reason for Deletion**. Select the reason from the drop-down menu.

Confirmation	×
Select the reason for deletion of	f: Exemption Varicella (Var)
* Reason for Deletion:	
•	
	Confirm
Entered in error	
Other	

If the reason is **Other**, a separate comment box will appear so users can record the specific reason.

4. Click **Confirm**.

Confirmation		×
Select the reason for • Reason for Deletion:	deletion of: Exemptio	on Varicella (Var)
Entered in error	-	

5. The Special Consideration will appear greyed out in the summary table. Click **Save** to confirm the deletion is saved in the client record.

Special Considerations						Add to WQ	Save	teset log	€ ?
Client   41	D:	11	Name(Last, First Middle)/ Spring, May / Female	Gender:	Health Card No: 0040000000		Date of 2005 N	Birth / Age: lov 15 / 12 years 0	months
Phone I 1-(902)	Number -555-78	r: 890(Primary home)	Jurisdiction Info: Northern Zone, Truro Put	blic Health Office	Additional ID Type / Ad Provincial health servi	lditional ID: ce provider identifier	-1-		
Spec	ial Co	onsiderations						1	\$
									Add
Up	date	View Delete							
	8	Туре 🛎	Applies To 🔺	Antigen/Agent /Disease +	Reason ¢	Effe	ctive From 🗘	Effective To	0
۰	8	Exemption	Antigen	Varicella (Var)	Presumed i (Imms Histo Interpretatio	mmune ry 2007 n)	7 Nov 22		
Tota	l: 1								10 •

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6. The deleted Special Consideration will be removed from the summary table and Panorama will provide a message confirming the Special Considerations was successfully updated (deleted).



### 5.5 Determining the Correct Special Consideration

As noted through this chapter, clinicians can choose between three different types of Special Considerations to document client information. The following chart offers sample situations and the recommended choice for a Special Consideration.

Clinical Factor	Type of Special Consideration	Stops the Forecast	Reason for Special Consideration	Additional Details/Actions
Laboratory confirmed case of varicella disease	Exemption	Yes	Medical – documented immunity	Source of Evidence: Laboratory or Healthcare professional Imms History Interpretation
Reported case of varicella disease	Exemption	Yes	Previous History of infection with vaccine preventable disease	Client or Parent/guardian Imms History Interpretation
Serological evidence of measles, mumps, rubella, HA, or HB immunity	Exemption	Yes	Medical – documented immunity	Source of Evidence: Laboratory or Healthcare professional Imms History Interpretation
Client with chronic HB infection or immunity due to natural infection	Exemption	Yes	Previous History of infection with vaccine preventable disease	Source of Evidence: Laboratory, Healthcare professional, Client, or Parent/guardian Imms History Interpretation
Client with HIV	Contraindication	Yes	Immunosuppression	Source of Evidence: Laboratory or Healthcare professional Document for Agent Group - All live vaccines – BCG, MMR, Polio- OPV, Rotavirus (Rot-1 and Rot-5), oral



				Typhoid, Varicella, and Yellow Fever.
				Interpretation
Person with a Primary Immunodeficiency disorder	Contraindication	Yes	Immunosuppression	Source of Evidence: Laboratory, Healthcare professional, Client, or Parent/guardian
				Document for Agent Group - All live vaccines – BCG, MMR, Polio- OPV, Rotavirus (Rot-1 and Rot-5), oral Typhoid, Varicella, and Yellow Fever.
				Record an applicable Risk Factor: Immunocompromised
Client has received a blood product that cannot be documented in Panorama (e.g., packed cells)	Contraindication	Yes	History of blood product	Source of Evidence: Laboratory, Healthcare professional, Client, or Parent/guardian
				Document for measles, mumps, rubella, and varicella- containing vaccines.
Immuno- compromised - Related to Disease	Contraindication (if severe)	Yes	Immunosuppression or Medical – Clinical decision	Source of Evidence: Laboratory or Healthcare professional
				Document for Agent Group - All live vaccines – BCG, MMR, Polio-
				OPV, Rotavirus (Rot-1 and Rot-5), oral Typhoid, Varicella, and Yellow Fever.
History of fainting	Precaution	No	History of syncope	Source of Evidence: Verbal Report or Written Documentation
				Document for one of the vaccines when the event occurred.
Allergy to a vaccine component (i.e., eggs, thimerosal, etc.)	Precaution	No	Allergy (vaccine related)	Source of Evidence: Verbal Report or Written Documentation
				Document specific details in the Comments field.

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				Add Allergy
Confirmed DHW	Contraindication	Yes	Previous Adverse	Add comments with
AEFI with a			Event following	details of the event.
recommendation not			immunization	
to immunize				

## 5.6 Expire Special Considerations

There are some types of Special Considerations that are time limited. Pregnancy or a specific course of medication are both examples of a time limited special consideration. In these types of situations, the User is advised to expire the Special Consideration when it is no longer applicable.

There are two ways to ensure that the Special Consideration is removed when it is no longer applicable. The first way is to enter the **Effective To** date when creating the Special Consideration. This ensures that the Special Consideration will only be applied for the designated dates and will be removed after reaching the **Effective To** date.

The second way to expire a Special Consideration is to update the Special Consideration as detailed in Section 4.3 above.

1. Go to the **Left-Hand Navigation** and the **Special Considerations** section. The summary table will display current Special Considerations.

Special Considerations				Add to WQ	Save	Reset	log	8	?
Alerts								Activ	e
Client ID: 59	Name(Last, First Middle)/Gender: Wind, Willow / Female			Health Card No: 0067650000			Date of Birth / Age: 1997 Jul 03 / 20 years		
Phone Number:         Jurisdiction Info:         Additional ID Type / Additional ID:           1-(902)-943-1111(mobile contact)         Department of Health and Wellness,Nova Scotia Health Authority         Provincial health service provider identifier / -									
Special Considerations							¥.	\$	
								Add	
Update View Delete									
🖺 Type 🔺	Applies To 🔺	Antigen/Agent /Disease -	Reason	≎ Eff	ective From 💲	Ef	fective To	0	
Contraindication	Agent	MMR	Client cur pregnant	rently 20	17 Apr 03				

2. Select the desired Special Considerations to be updated. Click **Update**.

- 3. The **Update Special Considerations** screen will be displayed. Enter the updated information in the appropriate fields. Note that all fields except the **Effective To** date are greyed out, meaning that the user cannot edit these.
- 4. To expire the Special Consideration, the User can enter the current date in the Effective To date field. This is true whether a date is already entered in the Effective To date field or not. From time to time, Special Considerations may conclude earlier than expected, and users can simply update the Effective To date to expire the Special Consideration.


5. An optional comment can be added if desired. Click **Apply**.

Special Considerations						-		*
Update Special Conside	ration				Apply	Reset	₽	×
Organization: Truro PHO				Service Delivery Location: Truro PHO, Truro, Nova Scotia				
• Type of Special Consideratio	n:			* Reason for Special Consideration:				
Contraindication			-	Client currently pregnant			1	
Special Consideration Applie	es to:							
Agent MMR		~						
Effective From: To:	:	-						
2017/04/03 20	017/11/22							
* Source of Evidence:		Date Documented:						
Verbal report	· · · ·	2017/11/20						
Recommended Actions:								
	P		p					
Immunize		Do not Immunize						
	-+1							
	10-							
							_	_
Comments To create a n	ew record click /	Add.					Ad	ld
						Contex	t Docu	iment
Documents								
No Documents exist for the cu	urrent page cont	ext.						
						Apply	Re	set

- 6. The rest of the process is the same as for any other update to Special Considerations. The **Update** screen will display the new comment and updated information. Click **Apply** to document the overall update.
- 7. The updated **Special Considerations** will be displayed in the summary table with an icon indicating that an update is pending. The revised **Effective To** date is displayed.

peolar oo	onsiderations	S		Add to	WQ Save F	Reset 🛛 🖬 🕒
Alerts						Activ
Client ID: 59	<u></u>	Name(Last, First Middle)/Ger Wind, Willow / Female	nder:	Health Card I 0067650000	No:	Date of Birth / Age: 1997 Jul 03 / 20 ye
hone Number: -(902)-943-111	11(mobile contact)	Jurisdiction Info: Department of Health and W	/ellness,Nova Scotia Health	Additional ID Authority Provincial he	Type / Additional ID: alth service provider identifie	r/-
Special Cor	nsiderations					× 🔉
						Add
Update	View Delete	2				Add
Update	View Delete	Applies To 🔺	Antigen/Agent /Disease *	Reason \$	Effective From \$	Add
Update	View Delete Type  Contraindication	Applies To * Agent	Antigen/Agent /Disease * MMR	Reason ≎ Client currently pregnant	Effective From 2017 Apr 03	Add Effective To 2017 Nov 22

8. Click Save. A message will appear confirming the update (expiry) was saved.





## 6 DEFERRALS

A deferral is created when a condition or situation necessitates a temporary delay in the administration of a scheduled immunization for a specific immunizing agent and dose. Recording a deferral indicates to other clinicians the reason an immunization was not administered at the recommended time.

The client will continue to be forecast for the immunizing agent that is deferred. The deferral will remain on the client record until the deferral end date is reached.

This chapter contains the following sections:

- 1. View Deferrals
- 2. Record Deferrals
- 3. Update Deferrals
- 4. Delete Deferrals

#### 6.1 View Deferrals

There are two ways to view deferrals, both of which provide rapid, easy access to this information. The first method is outlined in the following steps.

1. Go to the Left-Hand Navigation and click on the Deferrals section.



2. The Deferrals screen will appear. A summary table will display deferrals.



eferrals				Add to WQ Save	Reset 🛛 🖬 🖨	
1 Alerts					Active	
Client ID: 41	<u>2</u> t	Name(Last, First Middle)/Gender: Spring, May / Female	Health Card No: 0040000000	Card No: Date of Birth / Age: 00000 2005 Nov 15 / 12 y		
hone Number -(902)-555-78	: 90(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health	Additional ID Type / Office Provincial health se	Additional ID: rvice provider identifier / -		
Deferrals					*	
					Add	
Update	Delete					
8	Immunizing Agent	≎ Reason ≎	Created By 🗘	Effective From *	Effective To \$	
	MMRV	Emotional distress	ALL, parsoncm	2017 Nov 22	2017 Nov 23	
Total: 1					10 -	

The second way to view documented deferrals is by selecting the **Immunization Profile** and following the Deferral process as outlined in the following steps.

3. Go to the **Left-Hand Navigation** menu and click on the **Immunizations** section and click on the **Immunization Profile**.



4. The **Immunization Profile** screen will be displayed. Below the **Immunization History- Detailed Data Table** are the summary tabs for the various aspects of the client record. Tabs containing a checkmark have documented information that can be viewed by clicking on the tab.

Immun	mmunization History - Detailed Data Table									
	Add Single Immunization     Add One or More Immunizations									
Upd	Update View Delete									
Image: Base of the second s				Volume ≎						
		HPV-4	2017 Nov 13	11y 11m	Valid	Gardasil	Arm: upper left	0.5 mL		
	Men- C-ACYW-135         2017 Nov 13         11y 11m         Valid         Menveo         Arm: upper right         0.5 mL									
<b>√</b> S	pecial (	Considerations A	EFI Allergies 🗸 D	eferrals Risk Factors	TB Skin Test	GRA Tests 🗸 Mass I	mms Event 🗸 View C	onsent IHI		

5. When the User clicks on the **Deferrals tab**, a summary table will display the deferrals.



✓ Special Considerations	AEFI	Allergies	✓ Deferrals	<b>Risk Factors</b>	TB Skin Test	IGRA Tests	✓ Mass Imms Ev	vent 🗸 View Consent	IHI
Immunizing Agent 🗘		Reason ≎		Created By	>	Effective Fro	om 👻	Effective To 🔻	
MMRV		Emotional dist	ress	ALL, parsonci	m	2017 Nov 22		2017 Nov 23	

### 6.2 Record Deferrals

To record a new deferral, follow the steps below.

1. Go to the **Left-Hand Navigation** menu and click on the **Deferrals** section. The **Deferrals** screen will be displayed. Click **Add**.

Deferrals			Add to WQ	Save	Reset		₽?	]
Alerts							Active	
Client ID: 41	Name(Last, First Middle)/Gender: Spring, May / Female	Health Card No: 004000000			Date of Birth / 2005 Nov 15 /	Age: 12 years 0	months	
Phone Number: 1-(902)-555-7890(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Ad Provincial health servio	Iditional ID: ce provider identi	ifier / -				
Deferrals						1	\$	
To create a new record click Add.							Add	

- 2. Select the **Immunizing Agent** from the dropdown menu. Remember that users can type a few letters to quickly display the preferred agents.
- 3. Select the reason for deferral from the **Reason** dropdown menu. If **Other** is selected as the Reason, the user should add comments in the **Comment** field below the Date fields.

* Immunizing Agent:	* Reason:
MM p	٩
MMR MMRV	Awaiting imms record Awaiting serology Communication barrier Emotional distress Illness Immunocompromised Parent/guardian/client request Pregnancy

4. Enter the **Effective From** date, which is a required field. If known, enter the **Effective To** date. Click **Apply**.



Add Deferrals		Apply Reset	<b>A</b> ×
Immunizing Agent:     MMRV	• Reason: Emotional distress		
• Effective From: To: 2017/11/22 2017/11/24 2017/11/24 2017/11/24			
Client's pet dog is ill. Client is too upset to receive an immunization today. The immu week.	nization will be postponed until next		
(1869 characters remaining.)			
		Apply	Reset

5. Panorama will then display the new deferral in the summary table with an icon to indicate a pending deferral. Click **Save** to add the new deferral.

eferra	als				Add to WQ	Save	Reset 🛛 🖉 🖨
Alerts	s						Act
lient ID:	0	11	Name(Last, First Middle)/Gender: Spring, May / Female	Health Card No: 0040000000		D 2	ate of Birth / Age: 005 Nov 15 / 12 years 0 month
hone Nu -(902)-5	imber: 55-78	30(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Healt	Additional ID Typ h Office Provincial health	pe / Additional ID: h service provider identifie	ur / -	
Deferra	als						
							Ad
Upda	te	Delete					
		Immunizing Agent	C Reason C	Created By 🗘	Effective From	n -	Effective To \$
	•	MMRV	Emotional distress	ALL, parsoncm	2017 Nov 22		2017 Nov 24

6. The user will receive a confirmation that the deferral has been successfully saved on the client record.



#### 6.3 Update Deferrals

If changes are required to the client's deferral, users can perform this easily.

- 1. Go to the **Left-Hand Navigation** and the **Deferrals** section. The summary table will display current **Deferrals**.
- 2. Select the desired **Deferral** to be updated. Click **Update**.

Deferrals					Add
Update	Delete				Au
8	Immunizing Agent 🗘	Reason 🗘	Created By 🗘	Effective From *	Effective To \$
•	MMRV	Emotional distress	ALL, parsoncm	2017 Nov 22	2017 Nov 24
Total: 1					10 -



3. The **Update Deferral** screen will be displayed. Enter the updated information in the appropriate fields. Note that all fields except the **Effective To** date are greyed out, which means the user cannot edit these fields.

Update De	ferrals		Apply Reset 🔒 🗙
* Immunizing	J Agent:	• Reason: Emotional distress	
* Effective Fr 2017/11/22	2017/11/24		
Commen	ts		Add
Update	Delete		
B	Date	Comments	Recorded By
	2017 Nov 22 22:55:52 GMT	Client's pet dog is ill. Client is too upset to receive an immunization today. The immunization will be postponed until next week.	ALL, parsoncm
Total: 1			10 💌
			Apply Reset

4. If the user wishes to update more than the **Effective To** date, a comment may be added. Click **Add** to add a comment in the **Comments** field. When the comment is complete, click **Apply** to record the comment.

Apply Reset	⊖ ×
Analy	Posat
	Apply

5. The **Update** screen will display the new comment and updated information. Click **Apply** to document the overall update.

Update I	Deferrals					Apply	Reset	₽	×
• Immunizi MMRV	ing Agent:			• Reason: Emotional distress					
• Effective 2017/11/2	22	To: 2017/11/23							
Comme	ents							Ad	d
Update	e Delete								
	Date		Comments		Recorded By				
Ð	2017 No	v 22 23:14:34 GMT	Client's mother of The client would tomorrow afterno	alled to say the dog is better. like to receive her immunization oon.	ALL, parsoncm				
	2017 No	v 22 22:55:52 GMT	Client's pet dog i receive an immu will be postponed	s ill. Client is too upset to nization today. The immunization d until next week.	ALL, parsoncm				
Total: 2	2						ŀ	10	•
							Apply	Re	set



- 6. The updated **Deferral** will be displayed in the summary table with an icon indicating that an update is pending.
- 7. Click Save. A message will appear confirming the update was saved.



#### 6.4 Delete Deferrals

If for any reason a deferral must be deleted from a client record, this can be done easily and quickly. Remember that Panorama will retain an audit record of all transactions in client records for security purposes, but users can and should delete deferrals made in error.

1. Go to the **Left-Hand Navigation** and the **Deferrals** section. The summary table will display current deferrals.

Select the desired deferral to be updated by clicking on the checkbox to the left. Click **Delete**.

Deferral	s			Add to WQ	Reset	log	•	?	
Alerts								Ac	tive
Client ID: 41	0 <u>1</u>	Name(Last, First Middle)/Gender: Spring, May / Female	Health Card No: 004000000			Date of Birth / 2005 Nov 15 /	Age: 12 years (	) month	15
Phone Num 1-(902)-555	ber: 5-7890(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health	Additional ID Typ Office Provincial health	be / Additional ID: a service provider identifie	er / -				
Deferral	8						Ŕ		8
								Ac	bk
Update	Delete								
E	Immunizing Agent	≎ Reason ≎	Created By \$	Effective From	n <del>*</del>	Effectiv	e To 🗘		
	MMRV	Emotional distress	ALL, parsoncm	2017 Nov 22		2017 No	ov 23		

2. Panorama will prompt the user to provide a **Reason for Deletion**. Select the reason from the drop-down menu.





3. If the reason is **Other**, a separate comment box will appear so users can record the specific reason.

Confirmation			×
Select the reason for de * Reason for Deletion:	letion o	of: MMRV * Other Reason:	
Other	*	Client decided she wanted her immunization today. She is busy tomorrow.	
		(178 characters remaining.)	
		Confirm	1

- 4. Click **Confirm**.
- 5. The deferral will appear grayed out in the summary table. Click **Save** to confirm the deletion is saved in the client record.

onal ID: rovider identifier / -	Date of Birth / Age: 2005 Nov 15 / 12 years	Active 0 months
onal ID: rovider identifier / -	Date of Birth / Age: 2005 Nov 15 / 12 years	0 months
onal ID: rovider identifier / -		*
	3	*
		Add
Effective From *	Effective To 🗘	
2017 Nov 22	2017 Nov 23	
	Effective From × 2017 Nov 22.	Effective From *     Effective To \$       2017 Nov 22     2017 Nov 23

6. The deleted deferral will be removed from the summary table and Panorama will provide a message confirming the deferral was successfully updated (in this case, deleted).





# 7 ADVERSE EVENTS FOLLOWING IMMUNIZATION (AEFI)

Panorama supports the provision of end-to-end immunization services, including in the rare situations that an adverse event occurs. Comprehensive reporting is supported by easy to follow processes that ensure all relevant details are recorded, and that all relevant authorities are engaged and decisions are readily accessible in the client record.

This chapter includes the following sections:

- 1. Defining and Reporting Adverse Events
- 2. Recording Mild to Moderate Reactions That Do Not Meet Reportable Criteria
- 3. Recording MOH Orders for Mild to Moderate Reactions
- 4. Viewing Documented Adverse Events Following Immunizations
- 5. Updating Documented Adverse Events Following Immunizations
- 6. Recording Severe, Unusual, or Unexpected Reactions That Meet Reportable Adverse Event Criteria

### 7.1 Defining and Reporting Adverse Events

NS defines Adverse Events Following Immunizations (AEFIs) as any adverse event or medical incidents that occur after an immunization has been administered, are believed to be caused by the immunization, and are cause for concern. Under the Nova Scotia Health Protection Act and the Regulations under the Act 2005, an Adverse Event Following Immunization (AEFI) is notifiable and must be reported to the Medical Officer of Health through local Public Health in the Nova Scotia Health Authority (NSHA).

Most reactions to vaccines are mild and self-limited. These can be local (e.g. tenderness or redness at injection site) or systemic (e.g. fever, joint or muscle pain) but are minor in severity. **Minor expected reactions as outlined in the vaccine product monograph do not need to be reported.** 

# If there is any doubt as to whether or not an event should be reported, a conservative approach should be taken and the event should be reported.

According to the NS Immunization Manual, AEFIs should be reported when the following occurs:

- Has a temporal association with a vaccine: Temporal association alone is not proof of causation.
- Has no other clear cause at the time of reporting: A causal relationship between immunization and the event that follows does not need to be proven and submitting a report does not imply or establish causality. Sometimes the



vaccinee's medical history, recent disease, concurrent illness/condition and/or concomitant medication(s) can explain the event(s)

- Is serious in nature (A serious adverse event is one that is life threatening or results in death, requires hospitalization (≥24 hours) or prolongation of an existing hospitalization, results in residual disability or associated with a congenital malformation.)
- Is unusual or unexpected: (An event that has either not been identified previously or one that has been identified previously but is being reported at an increased frequency.)
- Cluster of Events: Known or new event that occur in a geographic or temporal cluster (eg., in a 6 week, or 6 in a zone) that require further assessment, even if the total number of AEFIs may not be higher than expected.

NS further notes that the following events should be reported:

- Serious events immediately
- Other adverse events within 2 weeks

The steps involved in reporting and managing adverse events involve multiple stakeholders including:

- Nurses
- Clerks
- MOHs
- Epidemiologists

### 7.2 Recording Mild to Moderate Reactions That Do Not Meet Reportable Criteria

Mild or moderate reactions may not meet the criteria of a reportable AEFI but should still be recorded on a client record for transparency and clinician awareness. In these instances, users may record the incident in either **Warnings** or the **Comments** section in the individual Immunization record associated with the specific reaction. Refer to CLT 102 for guidance in creating and maintaining Warnings.

Below are the steps for adding a **Comment** under the client's immunization profile:

1. With a Client in Context, start at the **Left-Hand Navigation** and go to the **Immunization** section. Select the **Immunization Profile**.



Immunizations ~
Immunization Profile

 The Client Immunization Profile screen will appear. In the Immunization History – Detailed Data Table, select the immunization associated with the reaction by clicking on the round radio button. Click on Update.

						<ul> <li>Add Single</li> </ul>	Immunization	<ul> <li>Add One or Mor</li> </ul>	re Immunization
Jpda	ate	View Delet	e						
	8	Agent +	Date Administered	Age at Administration	Status	≎ Tra	de Name 🗘	Body Site 🗘	Volume 🗘
		HPV-4	2017 Nov 13	12y 10m	Valid	Ga	rdasil	Arm: upper left	0.5 mL
		Men- C-ACYW-135	2017 Nov 13	12y 10m	Valid	Me	nveo	Arm: upper right	0.5 mL

3. The **Update Immunization** screen will appear. Scroll down to the Comments section at the bottom of the page. Click **Add** and type the comment regarding the minor adverse symptoms.

Comments and Status Opdates	~
* Comments To create a new record click Add.	Add

4. The **Comments** screen will appear and Users can add their relevant comments. Click **Apply**.

Comment	Apply	Reset	₽	×
Comment:     Client experienced redness at the injection site.     (3950 characters remaining.)				
		Apply	Re	set



5. The comment will be displayed in a summary table on the **Update Immunization** screen. Click **Apply** to add the update.

* Con	nments							Add
▼	Date - Antigens $\diamondsuit$ Old Status $\diamondsuit$ New Status $\diamondsuit$ Status Change Reason $\diamondsuit$ Record							
0	2017 Nov 14					PERMI	SSIONS, /	ALL
Total	: 1						10	•
							Apply	Res

 Panorama will display the updated immunization in the Immunization History – Detailed Data Table with an icon to indicate that the update will be saved when the record is saved. Click Save. Panorama will display a message confirming the update was successfully saved.



#### 7.2.1 Recording Physician Orders for Mild to Moderate Reactions

Physicians may provide specific orders regarding the management of mild to moderate reactions after immunization. If a **Warning** has been created regarding a mild to moderate reaction to an immunization, the physician may provide additional direction or orders. These can be recorded by updating the Warning. Follow CLT 102 for guidance on updating Warnings.

Any specific physician directions should also be recorded in the **Comment** section of the specific immunization as detailed in the section above.

### 7.3 Viewing Documented Adverse Events Following Immunization

Documented AEFIs will be accessible for review in several locations in the Client Record. The first location is in the **Alerts** at the top of the Client Header, the second is under the **Client Immunization Profile,** and the third is in the **Adverse Events** section in the **Left-Hand Navigation**.

1. Start with a Client in Context. The client header will display **Alerts** in the top lefthand corner if any are documented.



<b>Client De</b> mographics	Add to WQ	Save Reset Save and Save and Save Save Save Save Save Save Save Save	Sync with Registry
Alerts			Active
Client ID: 42	Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health Card No: 0091000000	Date of Birth / Age: 2005 Feb 24 / 12 years 8 months
Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Additional ID: Provincial health service provider identifier / -	

 Click on Alerts to display the summary. The summary will display all relevant information related to AEFIs, Warnings, Special Considerations, and Deferrals. When done reviewing the Client Alerts summary, click the x in the top right-hand corner to close the screen.

Client Alerts					✓ Actions ¥
Client ID: 42	Client Minter,	Name: Wanda	<b>Не</b> 00	alth Card Number: 91000000	Date of Birth / Age: 2005 Feb 24 / 12 years 8 months
Effective From *	Effective To *	Туре *		Message	Last Edited By 🗘
2017 Nov 23		Adverse Event		2017 Nov 23, Status: Submitted for review, MMRV Site: Arm: upper left	ALL, parsoncm
2006 Nov 22	Allergy			Allergy: Egg protein, Severity: Moderate (interferes with but does not prevent daily activities), Reaction Desc Gastrointestinal reaction	ALL, parsonom
2017 Nov 14		Client Warning		Client experienced joint swelling and redness at injection site for 24 hours post injection.	ALL, parsoncm
Total: 3					10 -

3. The second way to view AEFIs is to start in the **Left-Hand Navigation**, and proceed to **Immunizations** and the **Immunization Profile**.



4. The **Client Immunization Profile** screen will be displayed. Scroll down to the summary tabs and click on **AEFI**. The summary will display all AEFIs and their current status.

Special Consideratio	s 🗸 AEFI	✓ Allergies	Deferrals	Risk Factors	TB Skin Test	IGRA Tests	✓ Mass Imms	s Event	✓ View Consent	IHI
Event ID *		ID • Immunization(s)		Date Administered D		Date Reported 🗢		Status 🗘		
3		MMRV	2017	Nov 21	201	2017 Nov 23		Submitted for review		

5. The third way to view AEFIs is to start again in the **Left-Hand Navigation**, and proceed to **Immunizations** and **Adverse Events.** The **Adverse Event Summar**y will display.



Alert	S							Active
Client ID: 42 Name(Last, First Middle)/Gender: Winter, Wanda / Female		Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health Card No: 0091000000		Date of Birth / Age: 2005 Feb 24 / 12 years 8 months			
Phone Number: Jurisdiction Info: 1-(902)-667-5673(Primary home) Northern Zone,Truro Public Healt			Jurisdiction Info: Northern Zone, Truro Public Health Office	Ad e Pro	ditional ID Type / Additional ID: vvincial health service provider identifier / -			
Adverse Event Summary								
Create								
Upda	ate	Dele	te View	History				
			Event ID 🗘	Date Reported 🔻	Status	\$		
•	Θ		3	2017 Nov 23	Submitt	ed for review		
					Immuni	zation	Date of Immunization	
					MMRV		2017 Nov 21	
Total:	1				1			10 -

### 7.4 Updating Documented Adverse Events

Multiple personnel are involved in the reporting and management of serious adverse events. Each authorized user has a specific role in contributing to the complete process of recording and managing adverse events.

1. With a Client in Context, go to the Left-Hand Navigation, and proceed to Immunizations and Adverse Events.



- 2. The Adverse Event Summary screen will display all documented AEFIs.
- 3. Select the **AEFI** to be updated. Click **Update**.



Alerts	Alerts Active									
Client ID: 42	Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health Card No: 0091000000	Date of Birth / Age: 2005 Feb 24 / 12 years 8 months							
Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Additional ID: e Provincial health service provider identifier / -								
Adverse Event Summary										
			Create							
Update Delete Vi	iew History									
Event II	D  C Date Reported  T	Status 🗘								
<ul><li>3</li></ul>	2017 Nov 23	Submitted for review								
		Immunization	Date of Immunization							
	MMRV 2017 Nov 21									
Total: 1	<b></b>		10 -							

4. The Update Adverse Event screen is lengthy and users will need to scroll down to the specific section(s) they wish to update. Required fields are identified with a red asterisk (\*). Typically, updates will be made as the documentation progresses through the various contributors in the standard AEFI documentation and analysis review process.

Update Adverse Event		Save Expand All Reset	▼ Additional Actions
Alerts			Active
Client ID: 42	Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health Card No: 0091000000	Date of Birth / Age: 2005 Feb 24 / 12 years 8 months
Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Additional ID: Provincial health service provider identifier	1-
Adverse Event			*
Adverse Event ID: 3 * Status: Submitted for review	Unique Episode number:	IMPACT LIN:	
Health Region:     Truro PHO	<b>()</b> Q	Service Delivery Location: Truro PHO, Truro, Nova Scotia	<b>()</b> Q

5. When the desired update is completed, click **Save** at the top of the page. A **Comments** box will appear and users will be required to type a comment. If the comment needs to be revised, click **Reset**. Click **Save**.

Confirm Save	×
* Comments:	
An update was made on the type of treatment the client received to manage her symptoms.	
	Save Reset
A Alexand Providing 0	

6. Panorama will display a confirmation that the AEFI was successfully updated.



### 7.5 Recording Severe, Unusual, or Unexpected Reactions That Meet Reportable Adverse Event Criteria

Multiple personnel are involved in the reporting and management of serious adverse events. The general process that will be discussed in the following section is as follows:

- Documentation of initial incident and symptoms by a public health nurse. Nurses submit the AEFI for review to the MOH.
- Review and update by MOH, with public health recommendations,
- Review by MOH and public health staff as necessary to action the recommendations.
- Submit AEFI to PHAC.

The following are the steps to complete the initial documentation by the public health nurse:

1. With a Client in Context, start at the Left-Hand Navigation and go to the Immunization section. Select Adverse Events (AEFI).



2. The Adverse Event Summary screen will be displayed.

Adverse Event Summary	/	Add to WQ Save	Reset 🛛 🖬 🕒 ?
Alerts			Active
Client ID: 42	Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health Card No: 0091000000	Date of Birth / Age: 2005 Feb 24 / 12 years 8 months
Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Additional ID: Provincial health service provider identifier / -	
Adverse Event Summary			<b>*</b>
			Create

- 3. Click Create to document a new adverse event.
- 4. The **Create Adverse Event** screen will be displayed. Required fields will be identified with a red asterisk. The screen is divided into sections that users can complete to fully document the adverse event. The process starts by identifying who is reporting the AEFI.



reate Adverse Event		Save Expand All Reset - Additional Actions
Alerts	Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health Card No:         Date of Birth / Age:           0091000000         2005 Feb 24 / 12 years 8 month
hone Number: -(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Additional ID: Provincial health service provider identifier / -
Adverse Event		
Status: Draft  Health Region:	Unique Episode number:	MPACT LIN:   Service Delivery Location:
Reported By		
2017/11/23	Setting:	otner setting:
Provider: Indexed: PIEK, KRISTA LEIGH , Regist	tered Nurse	<b>()</b> Q
Non-Indexed:		Add

If the nurse is the first clinician to document the AEFI, the **Status** field should be set to **Draft**. This enables the nurse to review the report before submitting the AEFI to the MOH. If the MOH is the first to document the AEFI, **Draft** may be used as an initial setting pending more detail or the AEFI may be documented and immediately submitted for review.

As the AEFI progresses through the documentation and review process, the AEFI status options in the dropdown menu will vary, based on the stage of review. The following are valid status values for an AEFI, set by the content of the AEFI data recorded:

- Draft (User selected Save As Draft)
- Submitted for Review (All mandatory data entered and submitted for Review & Recommendation)
- Pending Review
- Review in Progress
- Review Complete (Recommendation created and AEFI record set to Review Complete)
- 5. **Status** is a mandatory field and may be selected from the dropdown menu.



* Status:							
	Draft	-					
1		Q					
l	Draft						
I	Submitted for review						

6. Setting is an optional field and may be selected from the dropdown menu.

	Setting:
1	م
Nι	
1	Hospital
1	Other
1	Physician or Nurse Practitioner
	Public Health

7. The **Provider** must be identified. Indexed Providers are NS licensed providers. Non-indexed Providers may be added manually.

* Provider: Indexed:	
e.g. Provider Last Name, First Name	() Q
Non-Indexed:	Add

8. The **Source of Information** is a required field. Users may select the appropriate source from the dropdown menu.



ą					
Client					
Created from external system					
Other					
Parent/Guardian					
Same as Reporter					

9. Next, open the next section on **Immunization Linked to AEFI** by clicking on the chevrons on the right side.

Immunizations linked to AEFI	<ul><li>✓</li><li>✓</li></ul>
Information at Time of Immunization and AEFI Onset	×
AEFI Details	*
Impact of AEFI, outcome and Level of Care	♥
Supplementary Information	<b>×</b>

- 10. Click on the square checkbox to select the immunization that is to be linked to the AEFI.
  - If the immunization is not listed, click **Create New Immunization**. This action will take the user to the **Client Immunization Profile**, where an immunization may be added.

Imn	Immunizations linked to AEFI										× 🛕
										Create New Immunization	
	iew										
		Linked to this AEFI	Linked to another AEFI \$	Date Administered	Agent ÷	Trade Name \$	Manufacturer	Lot Number 🗢	Dose Number \$	Route ≎	Body Site ≎
		~		2017 Nov 21	MMRV	Priorix-Tetra	GlaxoSmithKline	AMRVA467AA Exp. 2017 Dec 31	3	Intramus	Arm: upper left

11. Next, open the section on Information at Time of Immunization and AEFI Onset.

Immunizations linked to AEFI	✓ ▼
Information at Time of Immunization and AEFI Onset	
AEFI Details	×
Impact of AEFI, outcome and Level of Care	<b>×</b>
Supplementary Information	<b>*</b>



12. Enter the information about time of administration and the circumstances around the time of the immunization.

Information at Time of Immunization and AEFI Onse	t	*
Did an AEFI follow a previous dose of any of the above immunization	on agents?	
🔵 Yes, specify 💿 No 🔵 No Prior Dose 🔵 Unknown		
Previous Dose Comments:		
(4000 characters remaining )		
(+000 characters remaining.)		
Did this AEFI follow an incorrect immunization?		
🔵 Yes 💿 No 📄 Unknown		
Incorrect Immunization Comments:		
(4000 characters remaining.)		
Acute illeges/inium		
Concomitant medication(s)		
Known medical conditions/allergies		
Unknown		
Medical History Comments:		
Client was well with no known illnesses.		

13. Open the **AEFI Details** section.

Immunizations linked to AEFI	× 😜
Information at Time of Immunization and AEFI Onset	×
AEFI Details	
Impact of AEFI, outcome and Level of Care	
Supplementary Information	×

14. Select from the categories of reactions. Users can document Local Reactions at Injection Site, Anaphylaxis or Other Allergic Event, Neurological Event, or Other Events. Enter the details of the AEFI by providing the onset, duration, and clicking on the checkboxes beside the symptoms and descriptions in the appropriate sections.



AEFI Details	*
Onset: a value is required when values of the same event section are selected.	
Duration: a value in at least one field is required when the status review is 'Review Comple	ster.
Local reaction at or near injection site	<b>^</b>
Onset: Duration:	Interchard
10 Z	Unresolved
nina noura uaya	
Reactions:	
Adenopathy/Lymphadenitis	
Cellulitis	
Nodule	
Other, specify	
Pain or redness or swelling persisting for 10 days or more	
Pain, redness, or swelling extends past the nearest joint	
Sterile abscess	
Descriptors should only be entered after at least one reaction has been selected	
Descriptors:	
Swelling	
✓ Pain	
Erythema	
Warmth	
Induration	
Rash	
Largest diameter of injection site reaction (cm):	
Site(s) of reaction Left Arm	
Palpable fluctuance	
Fluid collection shown by imaging technique (e.g. MRI, CT, ultrasound)	
Regional lymphadenopathy cal Reaction Comments: 000 characters remaining.)	
haphylaxis or Other allergic events	*
set: Duration:	
	Unresolved
ns hours days mins hours days	
Anaphylaxis Oculo-Respiratory Syndrome (ORS) Other allergic even	nts
Skin/Mucosal Respiratory	▼ Cardio-vascular
GENERALIZED     Sneezing	Measured hypotension
LOCALIZED     Rhinorrhea     ANGIOEDEMA     Hoarse voice	Decreased central pulse volume Decreased or loss of consciousness
EYES     Sensation of thr	oat closure Tachycardia
Stridor	Capillary refill time >3sec
Tachypnea	
Wheezing	Gastro intestinal
Grunting	Abdominal pain
Cyanosis	Nausea Vomiting
Difficulty swallo	wing
Difficulty breath	ing
Chest tightness	
naphylaxis or Other Allergy Comments:	
000 characters remaining.)	

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set: Duration:	
ns hours days mins hours days	Unresolved
scriptors should only be entered after at least one reaction has been se	lected
(MD) Meningitis         (MD) Encephalopathy/Encephalitis         (MD) Guillain-Barr         (MD) Guillain-Barr         (MD) Bell's Palsy         (MD) Other Paralysis         Seizure(s)	Descriptors: Depressed/altered level of consciousness, lethargy or personality change lasting >= 24hrs Focal or multifocal neurologic sign(s) Fever( >=38.0 C) CSF abnormality EEG abnormality EMG abnormality
(MD) Other neurologic diagnosis, specify urologic Event Comments: 100 characters remaining.)	Neuroimaging abnormality     Brain/spinal cord histopathologic abnormality
her events	A 10 10 10 10 10 10 10 10 10 10 10 10 10
set: Duration: Duratio: Duratio: Duratio: Duratio: Duratio: Duratio: Duratio: Duratio:	Unresolved
Hypotonic-Hyporesponsive Episode (age < 2 years) Limpness Pallor/cyanosis Reduced responsiveness/unresponsiveness Persistent crying (crying which is continuous and unaltered for (MD) Intussusception Arthritis Joint redness Joint warm to touch Joint swelling Inflammatory changes in synovial fluid Parotitis (parotid gland swelling with pain and/or tenderness) Rash (Non-allergic) Generalized Localized at non-injection site (MD) Thrombocytopenia Other clinical evidence of bleeding Petachial rash Platelet count <150 x 10^9/L Fever >= 38.0 C Other serious or unexpected event(s) not listed above	r >= 3hrs)

15. Once the details of the AEFI are documented, open the **Impact of AEFI**, **outcomes, and Level of Care**.



Immunizations linked to AEFI	¥ ¥
Information at Time of Immunization and AEFI Onset	<b>*</b>
AEFI Details	×
Impact of AEFI, outcome and Level of Care	×
Supplementary Information	× .

16. Document the **Highest Impact of AEFI**, **Outcome at Time of Report**, and **Highest Level of Care Required** by selecting the appropriate option from the dropdown menus.

Highest impact of AEFI:	
Prevented daily activities	•
٩	
Did not interfere with daily activities Interfered with but did not prevent daily activities	
Prevented daily activities	

Outcome at time of report:	
Not yet recovered	-
٩	
Death	
Fully recovered	
Not yet recovered	
Permanent disability/incapacity	
Unknown	

	٩	
	Emergency visit	ļ
F	Non urgent visit	ł
	None	ł
	Required hospitalization	ł
L	Resulted in prolongation of existing hospitalization	ł
Г	Telephone advice from a health professional	ł
	Unknown	I
		- 11

17. Additional comments may be added in the optional section on **Supplementary Information**.



18. Change the status of the AEFI from Draft to Submitted for review and click Save.

Create Adverse Event		Save	Expand All	Reset	<ul> <li>Additional Actions</li> </ul>	i log	8
Alerts							Activ
Client ID: Name(Last, First Middle)/Gender: 42 Winter, Wanda / Female			th Card No: 1000000	Date of Birth / 2005 Feb 24 /	Date of Birth / Age: 2005 Feb 24 / 12 years 8 months		
Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Office	Additional ID Type / Additional ID: Provincial health service provider identifier / -			er / -		
Adverse Event						372	\$
	Unique Episode number:	IMF	ACT LIN:				
Submitted for review							
Submitted for review		• S	ervice Delivery Locat	tion:			

19. Panorama will prompt the User to provide a **Comment**. Click **Save** again.



Y Note: Users will be expected to email their local MOH when they submit an AEFI for review in the system. The Client ID should be used, as it is a direct match and does not include personal information. When an AEFI is ready to submit to PHAC, the MOH should communicate via email and include the client ID to inform the next step at DHW.

TIP: To print a copy of the AEFI, select View on the Adverse Event Summary screen and click the print icon. This screen will produce a report that only contains fields that have been completed.

20. With the Client in Context, the MOH will select Adverse Events (AEFI).



21. The **Adverse Event Summary** screen will appear. Click on the round radio button for the AEFI to be reviewed, and click **Update.** 



Adverse Event Sur	nmary			Add to WQ	Save	Reset	I log	₽?
Alerts								Active
Client ID: 42	Name Winte	e(Last, First Middle)/Gender: er, Wanda / Female	Health Card No: 0091000000			Date of Birth / 2005 Feb 24 /	Age: 12 years 8 r	months
Phone Number: 1-(902)-667-5673(Primary home)         Jurisdiction Info: Northern Zone,Truro Public Health Office         Additional ID Type / Additional ID: Provincial health service provider identifier / -								
Adverse Event Summa	ary						44	*
								Create
Update Delete	View His	story						
Eve	ent ID 🗘	Date Reported *	Status 🗘					
O 3 2017 Nov 23 Submitted for review								
			Immunization		0	Date of Immunia	zation	
			MMRV		2	017 Nov 21		

22. Once all fields are reviewed and a decision has been made regarding any necessary follow up, the Status can be changed to Review in Progress. Panorama will prompt the user to add comments and click Save. Once complete, click Save again.

Confirm Save	×
* Comments:	
Review in progress. PH recommendations in place.	
	Save Reset
Advised Freedults ()	

- 23. Add **Public Health Recommendations** by clicking **Add** in the **Public Health Recommendations** section at the bottom of the screen.
- 24. Select the appropriate **Public Health Recommendations** by clicking on the checkbox beside the desired recommendation. Optional comments may be added in the **Recommendation comments** section. Click **Apply**.

Public Health Recommendations		*
AEFI Status: Review in progress	Last Review Date: 2017 Nov 23	
Eligible for reporting to PHAC		
Reviewer On behalf of Health Service Provider:		
e.g. Provider Last Name, First Name	Q	
Public Health Recommendations To create a new	record click Add.	Add



Add Public Health Recommendation Appl	y Reset	₽ ×
Public Health Recommendations:		
Active follow-up for AEFI recurrence after next vaccine		
Controlled setting for next immunization		
Determine protective antibody level		
Expert referral, specify		
No change to immunization schedule		
No further immunizations, specify		
No recommendations		
Other, specify		
Recommendation comments:		
(4000 characters remaining.)		
	Apply	Reset

#### 25. The **Public Health Recommendations** will be saved in a summary table.

Pub	Public Health Recommendations Add						
De	elete						
		B	Dat	e *	Comments 🗘		Recorded By 🗘
$\bigcirc$	0		201	7 Nov 23			ALL, parsoncm
	Public Health Recommendations Details						
				Active follow-u	p for AEFI recurrence after next vaccine		
	0		201	7 Nov 23			ALL, parsoncm
	Public Health Recommendations Details						
				Controlled set	ting for next immunization		

26. Change the status to **Review Complete**, if no further information is required. Click **Save.** 

Update Adverse Event	Save	Expand All		Reset		<ul> <li>Additional A</li> </ul>	ctions	1	log	₽?	
Alerts											Active
Client ID: 42	Name(Last, First Middle)/Gender: Winter, Wanda / Female	Healt 0091	th Card No: 1000000				Date of 2005 F	f Birth / A eb 24 / 1	ge: 2 yea	rs 8 m	onths
Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Offic	Addi e Prov	itional ID Type / Add incial health service	dition e pro	nal ID: ovider ide	ntifier	/-				
Adverse Event										•	\$
Adverse Event ID: 3											
* Status:	Unique Episode number:	IMP	ACT LIN:								
Review complete											
Truco PHO	0 0	* Se	uro PHO, Truro, No	ation	: Scotia		8	0			
	9 4	III		ovd c	round		U	4			

27. Panorama will prompt the User to provide a **Comment**. Click **Save** again.

Confirm Save	×
* Comments:	
Investigation complete.	



28. Panorama will display a message to confirm the AEFI was successfully submitted.

#### 7.5.1 Further Information Required

When the MOH reviews the submitted AEFI report, more information may be requested before completing the review. Below are the steps to change the AEFI status to **Information Required.** 

1. Access the AEFI report either from the **Left-Hand Navigation** (Section 7.5). Change the status of the AEFI to **Review in Progress.** Click **Save.** 

### Tip: Change Status

Ϋ́

If the AEFI was submitted as Review Complete and further information is needed, the status must first be changed to **Submitted for Review** and saved. The status may then be changed to **Review in Progress**.

Update Adverse Event		Save	Expand All	Reset	<ul> <li>Additional Actions</li> </ul>	i log	Ð	?
Phone Number: Jurisdiction Info: 1-(902)-667-5673(Primary home) Northern Zone, Truro Public Health Of			itional ID Type / Addit vincial health service	ional ID: provider identifi	er / -			
Adverse Event						Ý	\$	
Adverse Event ID: 3  * Status: Review in progress  * Health Region: Truro PHO	Unique Episode number:	• Sa	PACT LIN: ervice Delivery Locati uro PHO, Truro, Nova	ion: a Scotia	<b>()</b>			

#### 2. Add comments and click **Save**.

Confirm Save	×
Comments:     Further investigation is required.	
	Save Reset

3. If further information is required, change the status to **Information required** and email the nurse that submitted the AEFI to complete another review. Click **Save**.

Adverse Event			× 🔊
Adverse Event ID: 3 • Status: Information required • • Health Region: Truro PHO	Unique Episode number:	MPACT LIN:     Service Delivery Location:     Truro PHO, Truro, Nova Scotia	Q
Reported By			
• Date Reported: 2017/11/23	Setting:	Other Setting:	
Provider: Indexed:     PIEK, KRISTA LEIGH , Regi	stered Nurse	<b>()</b> Q	
Non-Indexed:		Add	



4. Panorama will prompt the user to confirm by adding **Comments** and clicking **Save**.

Confirm Save	×
* Comments:  Further information about the clinic will be obtained.	
	Save Reset

5. The nurse can search for the client using the Client ID and access **Adverse Events** from the **Left-Hand Navigation.** The nurse can then select **Update** to update the AEFI report (refer to section 7.4 for more guidance). The user will access and update the AEFI report, then resubmit for review. Click **Save.** 

Status:	
Review in progress	-
	Q
Review in progress	
Information required	
Consultation request	ed
Review complete foll	owup required
Review complete	
Disregard	
Does Not Meet Temp	oral Criteria

Update Adverse Event		Save	Expand All Reset - Additional Actions II III - ?
Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone,Truro Public Health Office	Ad e Pro	ditional ID Type / Additional ID: ovincial health service provider identifier / -
Adverse Event			× 👔
Adverse Event ID: 3 • Status: Review in progress • Health Region: Truro PHO	Unique Episode number:	 	IPACT LIN: Service Delivery Location: Iruro PHO, Truro, Nova Scotia

6. The MOH reviews the added information and continues with the review.

#### 7.5.2 Follow-up Required

Note: Panorama requires that when status is changed to **Review complete**, follow-up required" a recommendation of 'Active Follow-up for AEFI Recurrence After Next Vaccine' must exist.



1. In the case follow-up is required, the user will change status to **Review complete**, follow-up required. Click Save.

Jpdate Adverse Event		Save Ex	cpand All	Reset	<ul> <li>Additional Actions</li> </ul>	
Alerts						Active
Client ID: 42	Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health Card 009100000	d No: DO		Date of Birth / 2005 Feb 24 /	Age: 12 years 8 months
Phone Number: 1-(902)-667-5673(Primary home)	Additional Provincial	ID Type / Addition health service pro	nal ID: ovider identifi	er / -		
Adverse Event						
Adverse Event ID: 3						
Review complete follo •	Unique Episode number:	IMPACT LI	IN:			
		* Service	Delivery Location	1:		
* Health Region:						

2. Panorama will prompt the User to provide a **Comment**. Click **Save** again.

Confirm Save	×
* Comments:	
Investigation complete.	

3. Once follow-up is complete, the MOH selects **Follow-up Result** and clicks **Add** in the **Follow up Information Comments**.

Follow-up provided on behalf of Service Provider:	w-up provided on behalf of Service Provider:         Devided on behalf of Service Provider:         Devided on behalf of Service Provider:         w-up Result:         yyyy/mm/dd         Dow-up Information Comments         To create a new record click Add.	Follow Up Information for a Subsequent Dose of the S	Same Vaccine	*
Follow-up Result:  Follow-up Date:  yyyy/mm/dd  Follow-up Information Comments: To create a new record click Add	w-up Result: Follow-up Date: yyyy/mm/dd	Follow-up provided on behalf of Service Provider:		
Follow-up Information Comments. To create a new record click Add	low-up Information Comments To create a new record click Add.	Follow-up Result:	Follow-up Date: yyyy/mm/dd	

Other	
Vaccine administered with recurrence of AEFI	
Vaccine administered without AEFI	
Vaccine administered without information on AEFI	
Vaccine administered, other AEFI observed	
Vaccine not administered	

4. The additional information will be displayed in a summary table in the **Follow Up Information for a Subsequent Dose of the Same Vaccine** section. The comment will appear with an icon indicating that the comment will be added pending the record being saved.



Follow Up Information for a Subsequent Dose of the Same Vaccine					
Follow-up pr e.g. Provide	rovided on behalf of Service Provider: er Last Name, First Name				
Follow-up Re	esult:	Follow-up Date:			
Vaccine ad	ministered without AEFI	yyyy/mm/dd			
Follow-u	p Information Comments			Add	
Update	Delete				
B	Date	Comments	Recorded By		
Ð	2017 Nov 23 23:22:25 GMT	Follow-up complete.	ALL, parsoncm		
Total: 1				10 -	

5. Change the status to **Follow-up complete** and click **Save.** 

Update Adverse Event		Save	Expand All	Reset	<ul> <li>Additional Actions</li> </ul>	: 🔯 🖨 ?
Alerts						Active
Client ID: 42	Name(Last, First Middle)/Gender: Winter, Wanda / Female	Health 00910	h Card No: 000000		Date of Birth / 2005 Feb 24 /	Age: 12 years 8 months
Phone Number: 1-(902)-667-5673(Primary home)	Jurisdiction Info: Northern Zone, Truro Public Health Offi	Additi ce Provin	ional ID Type / Addition ncial health service p	onal ID: provider identifie	er / -	
Adverse Event						
Status:     Followup complete	Unique Episode number:	IMPA	ACT LIN:			
Truro PHO	<b>()</b> Q	* Ser Trur	rvice Delivery Location ro PHO, Truro, Nova	on: Scotia	<b>0</b> Q	

- 6. Panorama will prompt the User to provide a **Comment**. Click **Save** again.
- 7. Panorama will display a confirmation message, stating that the AEFI was successfully updated.



### 8 FREE ISSUE VACCINE APPROVAL AND TRACKING

For some medical and social reasons, e.g., High Risk Medical Conditions or circumstances where immunizations normally provided through the school immunization program are administered by a primary care provider vaccine is issued for a client outside the routine publicly funded immunization schedule. The trigger for this process is the receipt of a completed Free Issue Vaccine Form.

- 1. Follow the **Client Search** process to search for the client listed on the form.
- 2. Set the client in context. If required, update the client profile based on the information provided in the form.
- 3. On the Left-Hand Navigation menu, select Subject Summary.

🔗 Immunizations 🛛 🗸 🗸	
Immunization Profile	
Special Considerations	
Adverse Events (AEFI)	
Deferrals	
Mass Immunization Events	
TB Skin Test Summary	
Mass TB Event Summary	
Invalidate Vaccine	
Vaccine Wastage	
Schedule Reforecast	
Encounter Details	
Subject Summary	

4. The Subject Summary screen displays.

ubject Summa	ry			0 L
Alerts				ACTIVE
Client ID:	Name(Last, First Middle)/Gender:	Health Card No:	Date of Birth / Age:	
<u>42</u>	Winter, Wanda / Female	0091000000	2005 Feb 24 / 12 years 9 months	
Phone Number:	Jurisdiction Info:	Additional ID Type / Additional ID:		
1-(902)-667-5673(Primary home)	Northern Zone, Truro Public Health Office	Provincial health service provider identifier / -		

- 5. In the **Immunization Encounter Group** section, verify if an Encounter already exists for a free issue request for this particular vaccine.
  - a. If one exists, click on the corresponding Encounter Date to access the Encounter Details.
  - b. If one does not exist, click on Create Encounter.



Immunization Encounter Group	munization Encounter Group							
Unassociated Encounters (Non-Inv	🗙 Hide							
1 encounter(s) total Click Encounter Date for encounter detail								
Move Selected Encounter(s) To: Unassociated Non-Episode Encounters C Mo Non-Episode Encounters	Move Selected Encounter(s) To:     Image: Create Encounters       Unassociated Non-Episode Encounters     Image: Create Encounters       Non-Episode Encounters     Create Encounters							
Encounter Date Encounter Type	Encounter Reasons	Organization	Location					
2017 Nov 21     Administer Immunizations     -     Truro PHO     Truro PHO								
		·						

6. The Create Encounter Details screen displays.

Create Encount	er Details			(	? 且
Alerts					ACTIVE
Client ID:	Name(Last, First Middle)/Gender	Health Card No:	Date of Birth / Age:		
42	Winter, Wanda / Female	0091000000	2005 Feb 24 / 12 years 9 months		
Phone Number:	Jurisdiction Info:	Additional ID Type /			
1-(902)-667-5673(Primary home)	Northern Zone, Truro Public Health Office	Additional ID: Provincial health service provider identifier / -			
				Save	Clear
Encounter Details *Required field	_	_	_	\$ Hide E	ncounter
Encounter Group: Immuniza	ation				
* Encounter Date: 2017 yyyy	/ 12 / 05 🛄 mm dd				
Duration (minutes):					
* Encounter Type: 🗸					
Encounter Reason Adm	inister Immunizations erse Events Following Immunizatio	n			
Available Encounte Docu	ument Issue - High Risk	Selected	Encounter Reasons:		
Free	Issue - School				
Spec	cial Considerations	Add >			

- 7. Set the Encounter Date to the date indicated on the Free Issue Vaccine Form.
- 8. Set the Encounter Type to either "Free Issue" or "Free Issue School" as appropriate.
- 9. From the Available Encounter Reason, select the "Request" reason that matches the vaccine being requested on the Free Issue Vaccine Form, and click **Add**.



**NOTE**: To ensure proper tracking, if more than one vaccine is requested on the form, a separate Encounter should be created for each vaccine requested. This is necessary to ensure accurate statistics for reporting purposes, and is also the only way to properly document cases where some vaccines are approved and others denied from a single form containing multiple requests.

ncounter Deta	ils					ź	Hide Encount
Required field							
incounter Group:	Immunizatio	on					
Encounter Date:	2017 /	12	/ 05	III			
	уууу	mm	dd				
Juration (minutes	):						
Encounter Type:	Free Issu	e - High	Risk		0		
Encounter Reasor	s: Hold Ctrl	and the	n click to se	elect multiple	items.		
Available Encount	er Reasons	:				Selected Encounter Reasons:	
Free Issue Approv Free Issue Denied Request: DTaP-IP Request: HA Request: HB Request: Men-B	ed V-Hib				Add > < Remove	Request: Hib	
Responsible Org o specify an Organiz lick 'Close' to close.	ganization:	Truro Pu ck on the	blic Health	Office n. Then search	i, or type the name of the C	Drganization you wish to specify, select it and click on 'Sele	ect' button. Then
Organization: Pa	norama Clou blic Health (	ud > Pro <b>Office]</b>	vince of No	va Scotia > I	Department of Health an	d Wellness > Nova Scotia Health Authority > Northern	Find Q
Zone > [Iruro Pu							
Zone > [Iruro Pu							Close 🔀

- 10. Set the **Responsible Organization** to the Public Health Office in charge of evaluating the free issue request.
- 11. Set the Service Delivery Location to the location where the vaccine is expected to be delivered (if unknown, set to the primary SDL for the requestor).



	S S	tart typing the name of the ( elect the match with the key	Organization. Matches will begin to board or mouse.	appear below.	
Organization	Name:	Truro Public Health Office	9, -		Show Info
	C -	City, Province:	Hierarchy Type: Jurisdictional	Status: Active	
					Select
thority > North	y Location: Pano ern Zone > Truro	orama Cloud > Province o Public Health Office > [T	of Nova Scotia > Department of H ruro PHO]	lealth and Wellness > Nova S	cotia Health
ithority > North	y Location: Pano eern Zone > Truro earch Start typing the	rama Cloud > Province c Public Health Office > [T name of the Service Deliver	f Nova Scotia > Department of F ruro PHO] ry Location. Matches will begin to a	lealth and Wellness > Nova S	cotia Health Find C Close
ithority > North	y Location: Pano lern Zone > Truro sarch Start typing the Select the match	rama Cloud > Province o Public Health Office > [T name of the Service Deliver in with the keyboard or mous	f Nova Scotia > Department of F ruro PHO] ry Location. Matches will begin to a re.	lealth and Wellness > Nova S	cotia Health Find Close
Type Se	y Location: Pano lern Zone > Truro start typing the Select the match Truro PHO, T	rama Cloud > Province c Public Health Office > [T name of the Service Deliver h with the keyboard or mous	f Nova Scotia > Department of F <b>ruro PHO]</b> <i>ry Location. Matches will begin to a</i> <i>ie.</i>	lealth and Wellness > Nova S	Cotia Health Find Close
thority > North Type Se SDL Name:	start typing the Select the match Truro PHO, T City, Province	rama Cloud > Province o Public Health Office > [T name of the Service Deliver h with the keyboard or mous Truro, Nova Scotia	f Nova Scotia > Department of F ruro PHO] ry Location. Matches will begin to a re. Status:	lealth and Wellness > Nova S	Cotia Health Find Close

12. Click **Save**. A successful encounter message will display.

Encounter Detai	ils			? ≞
Alerts				ACTIVE
Client ID:	Name(Last, First Middle)/Gender:	Health Card No:	Date of Birth / Age:	
<u>42</u>	Winter, Wanda / Female	0091000000	2005 Feb 24 / 12 years 9 months	
Phone Number:	Jurisdiction Info:	Additional ID Type / Additional ID:		
1-(902)-667-5673(Primary home)	Northern Zone,Truro Public Health Office	Provincial health service provider identifier / -		
Encounter successfully saved.				
-				
Report:		Reason fo	or Deletion:	
	Caunch	Save Reset	C Delete	<u>UDF</u>

13. The Notes and Attached Document sections are now available.



- 14. Attach the **Free Issue Vaccine** Form. If it's in paper format, scan into a PDF document.
- 15. In the **Attached Document** section, click on **Manage Documents**. This will open the **Context Documents** screen.

Attached Documents	☆ Hide Attached Documents
0 Attached Documents Document Title Size (KB) Type Posted By Posted On	Click on Document Title to open or save attachment
	Save Reset Encounter UDF

16. In the Document List section, click Add New.

Document Li	ist				\$	Hide Document List
Row Actions:	Delete Select and Return					Add New
Docume	ent Title Size[KB]	▼   <u>Type</u>	Posted By	Posted On	Description	➡ Status
Total: 0	🛛 🗹 Page 1 of 1 🕨 🗎				Jump to	page:
						Cancel

#### 17. Click Browse.

Docum	ent Man	agement		0 🗏
Add New	Document			
* File name	Browse	No file selected.	Upload File	

- 18. Navigate to the desired file, select it and click **Open** to populate the screen with the file.
- 19. Click Upload File.

Add New Document	
X Upload file before submitting changes	
* File name: Browse Sample - requisition-publicly-funded-vaccine-free-issue-request-high-risk-patients-form.p	



20. In the Document Title field, type Free Issue Vaccine Form.

ocumen	t Mana	agemen	t				0	
dd New Doc	ument							
File name: E	Browse mple - requ	No file selecte	d. Uplo	ad File free-issue-request	-high-risk-patients-fi	form.pdf		
Selected Doc	ument:							
Free Issue \	litle: /accine Form	n						
* Effective	2017 /	12 / 05	<b>#</b>	Expiration	/	/		
Date:	уууу г	mm dd		Date:	уууу mm	dd		
Status: • a	ctive	~			Jse CTRL key for mu	ltiple selections.		
Enter			Add	Selected				
Keyword	:		Remove	Keywords:				
Description:								
Document Ac	ided by : A	LL, parsoncm	on: 2017 De	c 05				
						Submit	Cancel	

21. Click Submit.

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22. Click **Cancel** to go back to the Encounter screen. The Free Issue Vaccine Form is now listed in the **Attached Documents** section.

Docu	Document List Alide Document List									
Row	Row Actions: Delete Select and Return Add New									
	Document Title	<u>Size[KB]</u> 🔻	Туре 🔻	Posted By	Posted On	Description	Status			
	Free Issue Vaccine Form	378.69	PDF	ALL, parsoncm	2017 Dec 05		active			
Total	Total: 1 Page 1 of 1 D Jump to page:									
							Cancel			

- 23. Document your assessment of the free issue request in a note.
- 24. In the Notes section, click Author Note. This opens the Author Note screen.


Subject Line:       Status:       Image: Constraint of the state of the s	A Hide No																otes
Workgroup for Author:       Image: Second Seco		0	0							Status:							Subject Line:
Author: Transcriber: Note Type: Note Date: From: / / / IIII To: / / IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	0								up for ber:	Workgro Transcri	٢						Workgroup for Author:
Note Type: Note Date: From: / / / III To: / / III yyyy mm dd yyyy mm dd Disp									ber:	Transcri	٢						Author:
Note Date: From: / / / III III To: / / IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII											٥						Note Type:
yyyy mm dd yyyy mm dd Disp			E	1	1		1		To:			/		1		From:	Note Date:
Disp				dd		mm		уууу				dd	mm		уууу		
	ay Clear	Display															
lotes are associated with Encounter 2017 Dec 5, and no other related entities.										ies.	r related enti	nd no ot	Dec 5, a	2017	ncounter	ted with E	lotes are associat
results found. To view a Note below, click on its Note Date. The list reflects the records you	nave access	records you have	the recor	eflects th	st re	The lis	Date.	s Note	lick on it	ote below, o	To view a N						results found.

- 25. In the **Subject** field, type an appropriate subject for the note (e. g. "Free issue request PHN assessment and decision").
- 26. In the Note Type field, select Immunization.
- 27. Detail your assessment and your decision in the Note free text field.

**NOTE**: If you are waiting for more info to complete your assessment, you may click "Save as Draft", and come back to it later once you are ready to finalize.

28. Review your note, and once satisfied that it is complete, click **Note Complete**.



Author: ALL, parsoncm   Subject: Free issue request - PHN Assessment and Decision   Note Date: 2017 / 12 / 05	te ID: -	Status: -
Author:       ALL, parsoncm       Role: superuser         Subject:       Free issue request - PHN Assessment and Decision         Note Date:       2017 / 12 / 05 III + Note Time: 15 : 19 : AST yyyy mm dd         Note Type:       Immunization         Common Phrases:       Immunization         Note:       Immunization         The client is having a splenectomy and the family physician does not immunize. The client has been referred to Public Health by the surgeon. Hib has been requested.	Required Field	
Subject:       Free issue request - PHN Assessment and Decision         Note Date:       2017       12       05       Image: Note Time:       15       19       AST         Note Type:       Immunization	Author:	ALL, parsoncm Role: superuser
Note Date:       2017       12       05       Note Time:       15       19       :AST         Note Type:       Immunization $\bigcirc$ hh       mm         Common Phrases: $\bigcirc$ Add to Note         Note: $\bigcirc$ Add to Note         T       Normal $\bigcirc$ T         Arial $\bigcirc$ $pt$ $b$ $u$ $≡$ $≡$ T       Normal $\bigcirc$ T $arial$ $\bigcirc$ $pt$ $b$ $i$ $∎$ $≡$ $≡$ The client is having a splenectomy and the family physician does not immunize. The client has been referred to Public       Health by the surgeon. Hib has been requested.       The client has been referred to Public	Subject:	Free issue request – PHN Assessment and Decision
yyy mm dd       hh mm         Note Type:       Immunization         Common Phrases:       ②         Add to Note         Note:         T       Normal         T       Arial         ?       ?         D       i         u       i         i       i         I       i         I       i         i       i         u       i         i       i         I       i         I       i         I       i         I       i         I       i         I       i         I       i         I       I         I       I         I       I         I       I         I       I         I       I         I       I         I       I         I       I         I       I         I       I         I       I         I       I         I       I         I       I	Note Date:	2017 / 12 / 05 🔛 <b>Note Time:</b> 15 : 19 :AST
Note type:       Immunization       Immunization         Common Phrases:       Immunization       Immunization         Note:       Immunization       Immunization         Immunization       Immunization       Immunization         The client is having a splenectomy and the family physician does not immunize. The client has been referred to Public Health by the surgeon. Hib has been requested.	Note Trees	yyyy mm dd hh mm
Note:         T         Normal         T         Arial         O         The client is having a splenectomy and the family physician does not immunize. The client has been referred to Public Health by the surgeon. Hib has been requested.	Note Type:	
Note:         T       Normal       O       T       Image: Constraint of the state of the stat	Common Phrases	Add to Note
	Common Phrases: Note: T Normal C	O       Add to Note         T       Arial       O       7pt       O       b       i <u>u</u> <u>i</u>
	Common Phrases: Note: Normal © The client is having Health by the surge	<b>T</b> Arial <b>O</b> 7pt <b>O b</b> <i>i</i> <b>U E</b> $\equiv$ $\equiv$ $\equiv$ $\equiv$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$ $=$
	Common Phrases: Note: T Normal O The client is having Health by the surge	Add to Note         T       Arial       ○       7pt       ○       b       i       u       minipage       mi
	Common Phrases: Note: T Normal © The client is having Health by the surge	Contract       Contract <t< td=""></t<>

## 29. A confirmation message displays.

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The note was suc Note is ass	cessfully saved. ociated with Encounter 2017 I	Dec 5	
Note ID:	21	Status:	Complete
Author:	ALL, parsoncm	Note Date:	2017 Dec 5 15:19 AST
Role:	superuser	Completed Date:	2017 Dec 5
Note Type:	Immunization		
Subject:	Free issue request – PHN Assessment	and Decision	
The client is ha the surgeon. H	aving a splenectomy and the family ph lib has been requested.	ysician does not immunize. Th	e client has been referred to Public Health by
			Correct Note Close

30. Click **Close** to return to the Encounter screen. The note is now listed in the **Notes** section table.



resul	ts found.		То	view a Note below, click on its Note Date. The	list reflects the	records you h	nave access to
Row	Actions: View All No	otes in Table Updat	te Note View	v Note Corrections	Author M	Note Trans	scribe Note
	Created Date/Time	Note Date/Time	Note Type 🔻	Subject Line	Author	Status 🔻	Corrected
0	2017 Dec 5 15:24 AST	2017 Dec 5 15:19 AST	Immunization	Free issue request – PHN Assessment and Decision	ALL, parsoncm	Complete	

31. From the **Available Encounter Reason** drop-down menu, select either Free Issue Approved or Free Issue Denied as appropriate and click **Add**.

Encounter Reasons: Hold Ctrl and then click to select multiple ite	ems.		
Available Encounter Reasons:		Selected Encounter Reasons:	
Free Issue Denied Request: DTaP-IPV-Hib Request: HA Request: HB Request: Men-B Request: Men-C-ACYW-135	Add > < Remove	Free Issue Approved Request: Hib	

- 32. At the bottom of the screen, click Save.
- 33. If the request was approved, after the requisition has been filled for the vaccine, attach a PDF of the requisition to the encounter:
- 34. Ask your Biological Coordinator to email you a PDF print out of the requisition.
- 35. In the **Attached Document** section, click on **Manage Documents**. This will open the Context Documents screen.
- 36. In the **Document List** section, click **Add New**.
- 37. Click **Browse File**.
- 38. Navigate to the desired file, select it and click **Open**.
- 39. Click Upload File.
- 40. In the **Document Title** field, type **Product Requisition**.
- 41. Click Submit.
- 42. Click **Cancel** to go back to the Encounter screen. The Product Requisition is now listed in the **Attached Documents** section.



## 9 INVALIDATE VACCINE

Vaccines can be invalidated if the Lot number has been recalled or if the vaccine is stored at an unacceptable temperature prior to administration or for any other reasons. When a vaccine is invalidated, the user must search for the list of clients who were immunized with that specific lot number and then invalidate that specific dose. Invalid doses are displayed with an 'X' mark in the immunization date in the **Immunization History- Summary Grid** table as mentioned earlier.

## 9.1 Invalidate Vaccine Steps

Below are the steps to Invalidate a vaccine for a list of clients for a specific Lot number:

1. Select Invalidate Vaccine from the Left-Hand Navigation panel under Immunization.



2. Panorama displays the Invalidate Vaccine screen.



					0
nvalidate Doses					
Search Clients for Compromised Ad  * Immunizing Agent:	ministered Vaccina	ition			
* Lot Number:	🗹 Display Ex	pired and Recalled Lots			
	• Show All	O Publicly Funded	Non-Publicly Funded		
mmunization Date From Date:			Immunization Date To Date:	2017 11	23
	yyyy mm	dd		yyyy mm	dd
Birth Date From Date:			Birth Date To Date:	2017 11	23
	yyyy mm	dd		yyyy mm	dd
Provider: KRISTA PIEK					
Click Find to select a provider:					Clear
Provider: PIEK, KRISTA					Find Q

- 3. Enter all mandatory fields as below and then click on **Search**.
  - a. Immunizing Agent
  - b. Lot number

			? 🗉
dministered Vaccination			
HPV-4			
Display Expired and Recalled Lots	3		
Show All O Publicly Funded	Non-Publicly Funded		
select			
K026398 - Exp. 2017 May 14			
K021551 - Exp. 2017 May 14 K015305 - Exp. 2017 May 14			
	Immunization Date To Date:	2017 11 23	
yyyy mm dd		yyyy mm dd	
	Birth Date To Date:	2017 11 23	
yyyy mm dd		yyyy mm dd	
			Clear
			Find 🔍
		Searc	h Clear
	dministered Vaccination HPV-4 C Ø Display Expired and Recalled Lots Ø Show All Publicly Funded select M006158-RCL - Exp. 2018 Nov 03 K026398 - Exp. 2017 May 14 K0215305 - Exp. 2017 May 14 K015305 - Exp. 2017 May 14 W15305 -	dministered Vaccination   HPV-4   Image: Display Expired and Recalled Lots   Image: Displa	dministered Vaccination         HPV-4         © Display Expired and Recalled Lots         • Show All       Publicly Funded         -select         M006158-RCL - Exp. 2018 Nov 03         K026398 - Exp. 2017 May 14         K0215305 - Exp. 2017 May 14         K015305 - Exp. 2017 May 14         K016305 - Exp. 2017 May 14         K01705 - Exp. 2017

4. Select all the clients that need to be invalided for that specific vaccine dose in the **Search Results** section.



5. Select a **Reason for Invalidation** from the drop-down list and then click on **Invalidate**.

* Reason for Invalidation:	Vaccine lot recalled
Comments:	
Select All Invalidate	Cancel

6. Click on Invalidate in the Confirm Invalidate Doses page.

ou have sele	cted to invalidate	the following 6 l	mmunizations			
		3				
elected im	munizations f	or invalidatio	on			
Last Name <b>N</b>	▼ First Name ▼	DOB 🔻	Imm. Date 🔻	Immunizing Agent 🔻	Lot Number	Imm Profile
Smith	Samuel	2005 Nov 01	2017 Nov 14	HPV-4	M006158-RCL Exp. 2018 Nov 03	Imm Profile 48 /Immunization
Spring	Мау	2005 Nov 15	2017 Nov 13	HPV-4	M006158-RCL Exp. 2018 Nov 03	Imm Profile 41 /Immunization
Storm	Henry	2005 Mar 21	2017 Nov 13	HPV-4	M006158-RCL Exp. 2018 Nov 03	Imm Profile 46 /Immunization
Summer	Susan	2005 Jan 06	2017 Nov 13	HPV-4	M006158-RCL Exp. 2018 Nov 03	Imm Profile 40 /Immunization
Sunshine	Elissa	2005 Jun 10	2017 Nov 13	HPV-4	M006158-RCL Exp. 2018 Nov 03	Imm Profile 44 /Immunization
Vinter	Wanda	2005 Feb 24	2017 Nov 13	HPV-4	M006158-RCL Exp. 2018 Nov 03	Imm Profile 42 /Immunization

7. A confirmation message will be displayed once the selected doses for the selected clients have been invalidated.

Confirm Invalidate Doses	٢
Message:Selected doses have been invalidated	

Π

Would you like to continue:?

Invalidate Cancel