

## California H1N1 Vaccine Doses Administered Reporting Instructions

Your [2009 Influenza A \(H1N1\) Vaccine Provider Agreement](#) contains a vaccine usage reporting requirement. Each state has been asked by CDC to report aggregate doses administered by age group and by dose in series weekly. While weekly reporting presents an additional burden to vaccinators, it is anticipated that this reporting requirement will only last for the first month or two after vaccine becomes available.

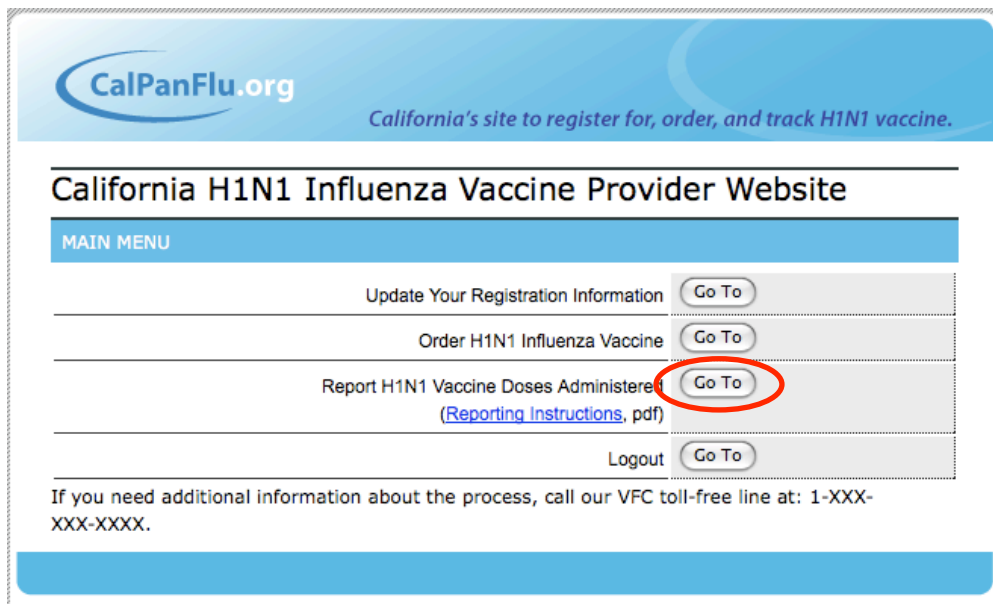
Recipients of H1N1 influenza vaccine have two options for reporting vaccine usage:

Option #1: Users of the California Immunization Registry (CAIR) ([www.cairweb.org](http://www.cairweb.org)) can enter patient H1N1 vaccination data directly into CAIR. Aggregate registry data will be exported and combined with data from Option #2 below for national reporting.

Option #2 (see step-by-step instructions below): H1N1 vaccinators not entering vaccinatedoses administered into the California Immunization Registry (CAIR) will be asked to report aggregate doses administered by logging on to the California H1N1 website at [www.CALPANFLU.org](http://www.CALPANFLU.org). **Reports are due by COB on the Tuesday of the week following the week of the report (Sun-Sat). Do not report if you have no doses administered to report.**

### Step-by-Step Instructions on reporting doses administered via the California H1N1 website

1. Go to [www.calpanflu.org](http://www.calpanflu.org) and sign on using your unique PIN number and Zip code.
2. When the *Main Menu* opens, click on the *Report H1N1 Vaccine Doses Administered* **Go To** button (circled).



3. When the *Doses Administered Weekly Report* page opens, review the *Practice Information* section to confirm that you are the provider listed.

## California H1N1 Vaccine Doses Administered Weekly Report

### Instructions:

- Choose the week for which you are reporting.
- Enter total number of doses by patient age and doses in series in the boxes below.
- Click the Submit report button at the bottom of the page to submit your report

PRACTICE INFORMATION/ SHIPPING ADDRESS	
Name of Physician's Office, Practice, Clinic, Etc.	ACME PEDS
PIN	090005
Today's Date	08/30/2009
Vaccine Delivery / Shipping Address (No P.O. Boxes)	1234 MAIN ST
Vaccine Delivery Address, Part 2	SUITE 100
City	RICHMOND CA
Zip	94801
County	ALAMEDA
Contact Person	JANE SMITH
Email Address	JANE.SMITH@GOGO.COM
Phone	(510) 555-1212

### DOSES OF H1N1 VACCINE ADMINISTERED THIS WEEK

Please enter the number H1N1 influenza vaccine doses you administered during the week of Sept. 27–Oct 3, 2009 to patients in each of the categories listed below. Enter '0' in the textbox if no doses were administered.

H1N1 Dose in Series	Age Group						
	6-23 mos	2-4 yrs	5-18 yrs	19-24 yrs	25-49 yrs	50-64 yrs	65+ yrs
Dose #1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dose #2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Unknown age or dose	<input type="text"/>						

### SUBMIT

When finished, click the **Submit Report** button to submit your weekly report.

- Next, in the *Doses of H1N1 Vaccine Administered This Week* section, choose the week that you are reporting doses administered for from the pull down menu (rectangle).
- Then in the fields corresponding to different patient Age Groups and Doses in Series, enter the number of H1N1 vaccine doses your practice/organization administered during that week. Enter '0' in fields where no doses were administered.
- When you are done, click the **Submit Report** button.