

Local Health Department (LHD) Guide Non-Medical Waiver Documentation in MCIR

A guide for local health departments to record, edit, manage, and print the non-medical school and childcare waivers directly in an LHD MCIR site.

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Record a Non-Medical Waiver Session in the MCIR

1. Search for the person by legal last, first name, date of birth using the **Add/Find** link in the Person section, (Figure 1).



The person's general information screen will appear, (Figure 2).

2. Select **Status**, (Figure 2).

The screenshot shows the MCIR home screen with a grid of menu categories. The 'Person' category is highlighted with a red box and contains links for 'Add/Find' and 'Roster'. Other categories include 'Reminder/Recall', 'School/Childcare', 'Vaccine Mgmt', 'VFC Program', 'My Site', 'Administration', 'Reports', and 'Other'.

Figure 1 – An LHD Site MCIR Home Screen

The screenshot shows the 'Person's General Information Screen' for 'zzzStudent, Test'. A black arrow points to the 'Status' link in the navigation bar. The screen displays personal details, high risk conditions, and immunizations.

Person Information : Edit				MCIR ID :			
Name:	zzzStudent, Test	Birthdate:	12/12/2009	Gender:	Female		
Age:	13 Years exactly	Jurisdiction:	No County Affiliation	Primary Phone:			
Resp. Party:	Student, Tester	Address:	123 Number 2 Pencil Lane Lansing, MI 48823	Secondary Phone:			
Country:	United States	County:	No County	Address Status:	Invalid		
				Address Updated:	12/12/2022		

High Risk Conditions						
<input type="checkbox"/>	Influenza Screening Notification			<input type="checkbox"/>	Potential Lead Exposure (Flint Water)	
Pregnancy: Add						

Immunizations					Other		
Series	Dose 1	Dose 2	Dose 3	Dose 4	Dose 5	Dose 6+	Status
DTaP/DTaP/	02/19/2010 DTaP-Hep B-	05/21/2010 DTaP-Hih-IPV	09/10/2010 DTaP-Hih-IPV	04/29/2011 DTaP	08/15/2014 DTaP-IPV	03/11/2021 Tdan	Up-To-Date

Figure 2 – Person's General Information Screen

- On the person's Immunization Status screen, navigate to the Non-Medical Waivers section near the bottom of the screen, (Figure 3).
- Click Add New Waiver, (Figure 3).

Immunization Status Person: zzzStudent, Test
Birth Date: 12/12/2009
Provider: **Overdue**

[Query](#) [Print Help](#)
[View](#) [Home](#) [Exit](#)

Person	Rem/Rcl	Sch/CC	VIM	VFC	My Site	Adm	Rpts	Oth
Add/Find	Roster	Add Imm	Information	Status	History			

Red indicates not approved for provider use. MCIR ID: 1

Personal Information/Status			
Name	zzzStudent, Test	DOB	12/12/2009
Patient ID		Age	13 Years exactly

Assessment indicates that vaccinations are overdue and should be administered today if not medically contraindicated.

Administered Vaccine	Can be given today	Dose #	Accelerated	Recommended	Overdue
Td		7	03/11/2031	03/11/2031	05/08/2031
Polio	Series Complete				
MMR	Series Complete				
Hepatitis B	Series Complete				
Varicella	YES	2	09/12/2014	09/12/2014	12/12/2014
HPV	YES	1	12/12/2018	12/12/2020	12/12/2021
Hepatitis A	Series Complete				
Seasonal Influenza	YES	1	09/01/2022	09/01/2022	10/01/2022
Meningococcal	YES	1	12/12/2020	12/12/2020	12/12/2021
COVID-19 (Pfizer, Mod, Nova)	YES	1	06/17/2022	06/17/2022	06/17/2022

Non-Administrations/Titers	Date	Reason	Entered By
No non-administrations/titers found			

Non-Medical Waivers												
Report Year	DTaP	Polio	MMR	Hib	HepB	Var	PCV	Mening	Tdap	Td	Last Modified	Modified By
Add New Waiver												
No Waivers Found												

[Add to Roster](#)
[Unlock Person](#)
[Reassess Person](#)



Figure 3 – Person's Immunization Status Screen and the Add New Waiver Link highlighted

- From the Non-Medical Waiver Education screen, Select the vaccine series to be waived and leave the other vaccines as N/A, (Figure 4).

N/A automatically defaults when opening this screen.

Leave selection as N/A if waiver changes are not needed for the vaccine series.

Non-Medical Waiver Education

Person: zzz
Birth Date: '
Provider: Overdue

[Print Help](#)
[Home](#) [Exit](#)

[View](#)

Person

Rem/Rcl

Sch/CC

VIM

VFC

My Site

Adm

Rpts

Oth

[Add/Find](#) [Roster](#) [Add Imm](#) [Information](#) [Status](#) [History](#)

Person Information

MCIR ID :

Name: zzzl	Birthdate:	Sex: Male
	Age: 11 Years 8 Months	
Resp. Party: zzzl	Jurisdiction: Wayne (82) County	Primary Phone:
Address:		Secondary Phone:
		Address Status: Valid
Country: United States	County: Wayne	Address Updated: 09/12/2017

Home Contact Information

Street*

City* State* Postal Code*

Primary Phone () -

Email

Waiver Information

Vaccine Series	Reason For Waiver
DTaP (Diphtheria, Tetanus, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Polio	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Hepatitis B	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
MMR (Measles, Mumps, Rubella)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
H.Influenza type b (Hib)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
PCV13 (Pneumococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Varicella (Chickenpox)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
MenACWY (Meningococcal Conjugate)	<input type="radio"/> Religious <input checked="" type="radio"/> Other <input type="radio"/> N/A
Tdap (Tetanus, Diphtheria, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Td (Tetanus, Diphtheria)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A

Reason

Administration

Waiver Date *

Parent/Guardian Signature *

Nurse/Administrator *

Submit

Delete

Cancel

Figure 4 – Person’s Non-Medical Waiver Education Screen.

6. **Select the vaccine** series to be waived, (resulting from the LHD waiver education session).
7. **Choose and select the reason** for waiver and click on the bubble/radio button that matches the waived vaccine series, (Figure 5).
8. When selecting **Other**, (as a reason for vaccine waiver), a blank field will appear at the bottom of the Waiver Information Section under Reason.
9. Reason: Type and enter the reason in this field.

The Waiver Date is defaulted to the date the LHD MCIR user/waiver educator opens the Non-Medical Waiver Education Screen.

10. **Enter the Parent/Guardian signature** in the Parent/Guardian signature field, (Figure 5).
11. **Enter the Nurse/Administrator signature** in the nurse/administrator field, (Figure 5).
12. Click Submit

Waiver Information	
Vaccine Series	Reason For Waiver
DTaP (Diphtheria, Tetanus, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Polio	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Hepatitis B	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
MMR (Measles, Mumps, Rubella)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
H.Influenza type b (Hib)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
PCV13 (Pneumococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Varicella (Chickenpox)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
MenACWY (Meningococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Tdap (Tetanus, Diphtheria, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Td (Tetanus, Diphtheria)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A

Reason

Please enter reason

Administration

Waiver Date * 07/21/2023

Parent/Guardian Signature *

Nurse/Administrator *

Submit Delete Cancel

Figure 5 – Waiver information screen displaying the default waiver date and report year entries.

Verify or Check the Entered Waiver on a Person's MCIR Record in the MCIR

1. From the LHD MCIR Home screen, search for the person by legal first and last name, and date of birth using the **Add/Find** link in the Person section, (Figure 1, [Page 1](#)).
2. On the person's general immunization record screen, select **Status**.



The Immunization Status screen appears, (Figure 6).

3. Non-Administrations are highlighted horizontally in a **PINK** -ish color under the Non-Administrations/Titers section with date, reason, and the LHD site that entered a waiver on this person's record, (Figure 6).

Immunization Status Person: Birth Date: 12/12/2009 Provider: **Overdue** [Query View](#) [Print Help Home Exit](#)

Person Rem/Rcl Sch/CC VIM VFC My Site Adm Rpts Oth
[Add/Find](#) [Roster](#) [Add Imm](#) [Information](#) [Status](#) [History](#)

Red indicates not approved for provider use. MCIR ID: :

Personal Information/Status

Name	DOB	12/12/2009	Assessment indicates that vaccinations are overdue and should be administered today if not medically contraindicated.		
Patient ID	Age	13 Years 2 Months			

Administered Vaccine	Can be given today	Dose #	Accelerated	Recommended	Overdue
Tdap	YES	6	12/12/2020	12/12/2020	12/12/2021
Polio	Series Complete				
MMR	Series Complete				
Hepatitis B	Series Complete				
Varicella	Series Complete				
HPV	YES	1	12/12/2018	12/12/2020	12/12/2021
Hepatitis A	Series Complete				
Seasonal Influenza	YES	1	09/01/2022	09/01/2022	10/01/2022
Meningococcal	YES	1	12/12/2020	12/12/2020	12/12/2021
COVID-19 (Pfizer, Mod, Nova)	YES	1	06/17/2022	06/17/2022	06/17/2022

Non-Administrations/Titers	Date	Reason	Entered By
Meningococcal Conjugate	02/22/2023	Other	Test LHD Provider Site

Non-Medical Waivers

Report Year	DTaP	Polio	MMR	Hib	HepB	Var	PCV	Mening	Tdap	Td	Last Modified	Modified By
2023 Washtenaw								O			02/22/2023	PDF

[Add to Roster](#) [Unlock Person](#) [Reassess Person](#)

Figure 6 - Immunization Status screen displaying Red highlighted non-Administrations documented as waived, with date and reason.

Edit a Non-Medical Waiver from the LHD Waiver Roster in the MCIR

1. From the LHD MCIR Home screen, Select **My Waivers**, (Figure 7).

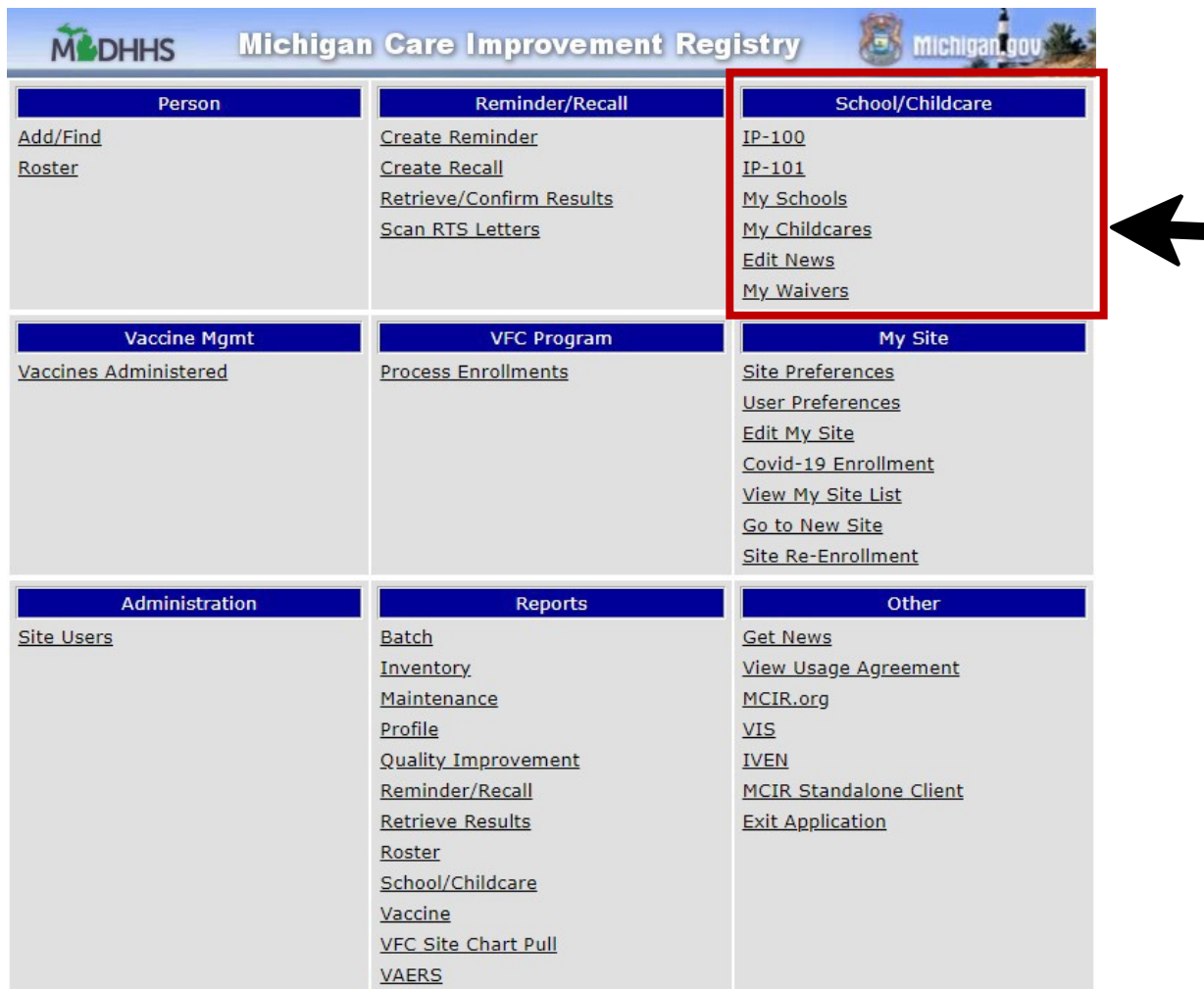


Figure 7 – LHD MCIR Home Screen

2. The My Waivers screen and waiver roster displays with a list of all counties in the Local Health Department’s jurisdiction, (Figure 8).
3. Specific County, and IP Type, (School/Childcare) can all be sorted from the dropdown fields, (Figure 8).
4. Select the County, and/or IP Type to view applicable waivers.
5. Select the waiver to edit, and Click **EDIT**, (Figure 8).

LHD MCIR users can only edit a waiver entered by that Local Health Department county/jurisdiction where the original waiver was entered.

This figure, (for training purposes only), displays waivers in Washtenaw County entered by the local health department MCIR site in Washtenaw County.

**This is only a training example and not representative of waivers for this county.*

My Waivers [Print Help](#)
[Home](#) [Exit](#)

Person Rem/Rcl Sch/CC VIM VFC My Site Adm Rpts Oth
IP-100 IP-101 My Schools My Childcares Edit News My Waivers

County IP Type Show Deleted Get Waivers


Name	Birth Date	MCIR ID	Gr	Year	DTaP	Polio	MMR	Hib	HepB	Var	PCV	Mening	Tdap	Td
Washtenaw (81) County														
	09/23/2005 :		10	2023	O	O	O		O	O		O	O	PDF
	01/15/2007 :		10	2023	O	O	O			O		O	O	PDF
	03/31/2012 :		05	2023						O				PDF
	11/30/2011 :		06	2023	O							O	O	PDF
	08/22/2008 :		08	2023	R	R	R		R	R		R	R	PDF
	10/06/2008 :		08	2023	O	O	O		O	O		O	O	PDF
	01/02/2016 :		01	2022	R	R	R			R			R	Edit PDF
	03/05/2009 :		08	2023			O	O		O				PDF
	09/04/2011 :		05	2023						R				Edit PDF
	08/17/2010 :		06	2023	O	O			O	O	O	O	O	PDF
	11/01/2011 :		09	2023								O		Edit PDF

Figure 8-An LHD site displaying waivers entered by their jurisdiction for their jurisdiction. Above data is blocked and does not represent the county.

Edit and complete on the Non-Medical Education screen:

The Non-Medical Waiver Education screen appears, ([Figure 9](#), page 9).

- Edit the Reason for Waiver section by selecting the bubble/radio button.
- The waiver date populates to the date the waiver is opened to edit.
- Enter the parent/guardian signature, ([Figure 9](#)).
- Edit the Nurse/Administrator field if necessary.

6. Click 



When editing a waiver, NOTE all information previously entered will display including the waived vaccine series, the reason, (if applicable), and the previous Nurse/Administrator signature.

- **The Waiver Date** will default to the date the waiver education editing screen is opened to edit.
- **The Parent/Guardian signature** must be re-entered in the MCIR Parent/Guardian signature field.
- **The Nurse/Administrator field** can be edited to reflect a change in a Nurse/Administrator when editing the waiver, Figure 9.

Non-Medical Waiver Education

 Person:
 Birth Date: 09/04/2011
 [Print Help](#)
 Provider: Overdue
[View](#)
[Home](#)
[Exit](#)

Person
Rem/Rcl
Sch/CC
VIM
VFC
My Site
Adm
Rpts
Oth

[Add/Find](#)
[Roster](#)
[Add Imm](#)
[Information](#)
[Status](#)
[History](#)

Person Information
MCIR ID :

Name: zzzl Birthdate: Sex: Female
 Age: 11 Years 10 Months
 Resp. Party: zzzl Jurisdiction: No County Affiliation Primary Phone:
 Address: Secondary Phone:
 Address Status: Valid
 Country: United States County: Wayne Address Updated: 08/22/2017

Home Contact Information

Street*

 City* State* Postal Code*
 Primary Phone () -
 Email

Waiver Information

Vaccine Series	Reason For Waiver
DTaP (Diphtheria, Tetanus, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Polio	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Hepatitis B	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
MMR (Measles, Mumps, Rubella)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
H.Influenza type b (Hib)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
PCV13 (Pneumococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Varicella (Chickenpox)	<input checked="" type="radio"/> Religious <input type="radio"/> Other <input type="radio"/> N/A
MenACWY (Meningococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Tdap (Tetanus, Diphtheria, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Td (Tetanus, Diphtheria)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A

Reason

Administration

Waiver Date *
 Parent/Guardian Signature *
 Nurse/Administrator *



Figure 9 -Non-Medical Waiver Education Editing Screen displaying the date defaults to the day you are opening the editing screen and another Parent/Guardian signature is needed and the Nurse/Administrator field is editable if a change is needed.

Edit a Non-Medical Waiver from an Immunization Record Status Tab in the MCIR

1. From the LHD MCIR Home screen, search for the person by legal first and last name, date of birth using the **Add/Find** link in the Person section, (Figure 1, [Page 1](#)).
2. From the person’s immunization record, Select **Status**.
3. Scroll down to the Non-Medical Waivers Section, select to the reported waiver you would like to edit, (Figure 10).

Edit and complete on the Non-Medical Education screen:

- In this example, Click [2023 Washtenaw](#) (Figure 10).

The Non-Medical Waiver Education screen appears, ([Figure 12](#), page 12)

- Edit the Reason for Waiver section by selecting the bubble/radio button.
- Enter the new waiver date, ([Figure 12](#)).
- Enter the parent/guardian signature, ([Figure 12](#)).

4. Click Submit

Immunization Status Person: Birth Date: 12/12/2009 Provider: **Overdue** [Query View](#) [Print Help Home Exit](#)

Person Rem/Rcl Sch/CC VIM VFC My Site Adm Rpts Oth
[Add/Find](#) [Roster](#) [Add Imm](#) [Information](#) [Status](#) [History](#)

Red indicates not approved for provider use. MCIR ID: :

Personal Information/Status

Name	DOB	12/12/2009	Assessment indicates that vaccinations are overdue and should be administered today if not medically contraindicated.		
Patient ID	Age	13 Years 2 Months			

Administered Vaccine	Can be given today	Dose #	Accelerated	Recommended	Overdue
Tdap	YES	6	12/12/2020	12/12/2020	12/12/2021
Polio	Series Complete				
MMR	Series Complete				
Hepatitis B	Series Complete				
Varicella	Series Complete				
HPV	YES	1	12/12/2018	12/12/2020	12/12/2021
Hepatitis A	Series Complete				
Seasonal Influenza	YES	1	09/01/2022	09/01/2022	10/01/2022
Meningococcal	YES	1	12/12/2020	12/12/2020	12/12/2021
COVID-19 (Pfizer, Mod, Nova)	YES	1	06/17/2022	06/17/2022	06/17/2022

Non-Administrations/Titers

Non-Administrations/Titers	Date	Reason	Entered By
Meningococcal Conjugate	02/22/2023	Other	Test LHD Provider Site

Non-Medical Waivers

Report Year	DTaP	Polio	MMR	Hib	HepB	Var	PCV	Mening	Tdap	Td	Last Modified	Modified By
2023 Washtenaw								O			02/22/2023	

[Add to Roster](#) [Unlock Person](#) [Reassess Person](#) [PDF](#)

Figure 10 -Person’s Immunization Status page displaying non-administrations/waivers previously entered.





Defining the Question Mark Icon on an Immunization Status page

Below is an Immunization Status page preview of an individual with multiple Reporting Year waivers, (Figure 11).

Hoovering over the QUESTION MARK will include text stating:

This 2022 Immunization Waiver issued in January 2023 is a valid waiver for school reporting.

Immunization Status Person: zzzDemonstration, Waiver Birth Date: 02/18/2009 Provider: **Overdue** [Query](#) [Print Help](#)
[View](#) [Home](#) [Exit](#)

Person	Rem/Rcl	Sch/CC	VIM	VFC	My Site	Adm	Rpts	Oth
Add/Find	Roster	Add Imm	Information	Status	History			

Red indicates not approved for provider use. MCIR ID:

Personal Information/Status			
Name	zzzDemonstration, Waiver	DOB	02/18/2009
Patient ID		Age	14 Years

Assessment indicates that vaccinations are overdue and should be administered today if not medically contraindicated.

Administered Vaccine	Can be given today	Dose #	Accelerated	Recommended	Overdue
Td		7	04/09/2031	04/09/2031	06/07/2031
Polio	Series Complete				
MMR	Series Complete				
Hepatitis B	Series Complete				
Varicella	YES	1	10/10/2013	10/10/2013	10/10/2013
HPV	Series Complete				
Hepatitis A	Series Complete				
Seasonal Influenza	Season Complete				
Meningococcal	YES	1	02/18/2020	02/18/2020	02/18/2021
COVID-19 (Pfizer, Mod, Nova)	YES	1	06/17/2022	06/17/2022	06/17/2022

Non-Administrations/Titers	Date	Reason	Entered By
Varicella	01/24/2023	Other	MDHHS LHD ADMIN
Meningococcal Conjugate	01/24/2023	Other	MDHHS LHD ADMIN
Varicella	01/24/2023	Other	MDHHS LHD ADMIN
Meningococcal Conjugate	01/24/2023	Other	MDHHS LHD ADMIN

Non-Medical Waivers												
Report Year	DTaP	Polio	MMR	Hib	HepB	Var	PCV	Mening	Tdap	Td	Last Modified	Modified By
Add New Waiver												
2023 No County Affiliation						0	0			01/24/2023		PDF
2022 No County Affiliation						0	0			01/24/2023		PDF

This 2022 Immunization Waiver issued in January 2023 is a valid waiver for school reporting. Person

Figure 11: When hovering over the question mark bubble displaying the defined text.



When editing a waiver, NOTE all information previously entered will display, including the waived vaccine series, the reason, and the Nurse/Administrator Signature.

The date and the Parent/Guardian signature must be re-entered in the MCIR whenever a Non-Medical Waiver Education LHD Edit occurs, (Figure 12).

Non-Medical Waiver Education Person: Birth Date: 09/04/2011 [Print Help](#)
Provider: **Overdue** [View](#) [Home](#) [Exit](#)

[Add/Find](#)
[Roster](#)
[Add Imm](#)
[Information](#)
[Status](#)
[History](#)

Person Information MCIR ID :

Name: zzzl Birthdate: Sex: Female
 Age: 11 Years 10 Months
 Resp. Party: zzzl Jurisdiction: No County Affiliation Primary Phone:
 Address: Secondary Phone:
 Country: United States County: Wayne Address Status: Valid
 Address Updated: 08/22/2017

Home Contact Information

Street*
 City* State* Postal Code*
 Primary Phone () -
 Email

Waiver Information

Vaccine Series	Reason For Waiver
DTaP (Diphtheria, Tetanus, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Polio	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Hepatitis B	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
MMR (Measles, Mumps, Rubella)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
H.Influenza type b (Hib)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
PCV13 (Pneumococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Varicella (Chickenpox)	<input checked="" type="radio"/> Religious <input type="radio"/> Other <input type="radio"/> N/A
MenACWY (Meningococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Tdap (Tetanus, Diphtheria, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Td (Tetanus, Diphtheria)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A

Reason

Administration

Waiver Date *
 Parent/Guardian Signature *
 Nurse/Administrator *

Figure 12: Non-Medical Waiver Education Edition Screen displaying need for new date and Parent/Guardian signature.



Delete a Non-Medical Documented Waiver from the Immunization Record

1. From the Non-Medical Waiver Education screen of the person, Go to the **Status** Tab
2. To delete a waiver in the current report year, click on the hyperlinked waiver, **2023 Washtenaw**, in this example, (Figure 13).

Immunization Status Person: zzz
Birth Date: 09/04/2011
Provider: **Overdue** [Print Help](#)
[Home](#) [Exit](#)

[View](#)

Person [Rem/Rcl](#) [Sch/CC](#) [VIM](#) [VFC](#) [My Site](#) [Adm](#) [Rpts](#) [Oth](#)

[Add/Find](#) [Roster](#) [Add Imm](#) [Information](#) [Status](#) [History](#)

Red indicates not approved for provider use. MCIR ID:

Personal Information/Status			
Name	zzz	DOB	09/04/2011
Patient ID		Age	11 Years 10 Months

Assessment indicates that vaccinations are overdue and should be administered today if not medically contraindicated.

Administered Vaccine	Can be given today	Dose #	Accelerated	Recommended	Overdue
Tdap	YES	1	09/04/2018	09/04/2018	09/04/2018
Polio	YES	1	10/16/2011	11/04/2011	12/04/2011
MMR	YES	1	09/04/2012	09/04/2012	12/02/2012
Hepatitis B	YES	1	09/04/2011	09/04/2011	10/04/2011
Varicella	YES	1	09/04/2012	09/04/2012	12/02/2012
HPV	YES	1	09/04/2020	09/04/2022	09/04/2023
Hepatitis A	YES	1	09/04/2012	09/04/2012	03/04/2013
Seasonal Influenza	YES	1	09/01/2023	09/01/2023	10/01/2023
Meningococcal	YES	1	09/04/2022	09/04/2022	09/04/2023
Pfizer/Moderna Bivalent	YES	1	04/19/2023	04/19/2023	04/19/2023

Non-Administrations/Titers	Date	Reason	Entered By
Varicella	07/21/2023	Religious	Test LHD Provider Site
Meningococcal Conjugate	07/21/2023	Religious	Test LHD Provider Site

Non-Medical Waivers												
Report Year	DTaP	Polio	MMR	Hib	HepB	Var	PCV	Mening	Tdap	Td	Last Modified	Modified By
2023 Washtenaw						R		R			07/21/2023	scottk23 PDF

[Add to Roster](#) [Unlock Person](#) [Reassess Person](#)

Figure 13

3. From the Non-Medical Waiver Education screen, select **Delete**, (Figure 14).

Non-Medical Waiver Education Person: [Print Help](#)
Birth Date: 09/04/2011 [Home](#) [Exit](#)
Provider: Overdue [View](#)

Person | **Rem/Rcl** | **Sch/CC** | **VIM** | **VFC** | **My Site** | **Adm** | **Rpts** | **Oth**

[Add/Find](#) | [Roster](#) | [Add Imm](#) | [Information](#) | [Status](#) | [History](#)

Person Information **MCIR ID :**

Name: zzzl	Birthdate:	Sex: Female
Resp. Party: zzzl	Age: 11 Years 10 Months	
Address:	Jurisdiction: No County Affiliation	Primary Phone:
		Secondary Phone:
Country: United States	County: Wayne	Address Status: Valid
		Address Updated: 08/22/2017

Home Contact Information

Street*

City* **State*** **Postal Code***

Primary Phone () -

Email

Waiver Information

Vaccine Series	Reason For Waiver
DTaP (Diphtheria, Tetanus, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Polio	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Hepatitis B	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
MMR (Measles, Mumps, Rubella)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
H.Influenza type b (Hib)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
PCV13 (Pneumococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Varicella (Chickenpox)	<input checked="" type="radio"/> Religious <input type="radio"/> Other <input type="radio"/> N/A
MenACWY (Meningococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Tdap (Tetanus, Diphtheria, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Td (Tetanus, Diphtheria)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A

Reason

Administration

Waiver Date *

Parent/Guardian Signature *

Nurse/Administrator *



Figure 14

- After you select Delete, you will see a pop up asking if you are sure you would like to delete this waiver, (Figure 15).

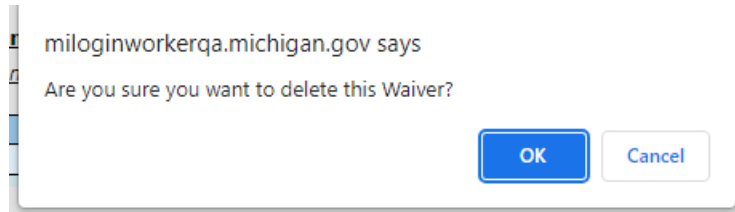


Figure 15

- Select OK
- Next the screen displays the individual’s Status screen and it displays the waiver was deleted and no longer on the person’s record, (Figure 16).

Immunization Status

Person: [Redacted] Birth Date: 0 Provider: **Overdue** [View](#) [Print Help](#) [Home](#) [Exit](#)

Person Rem/Rcl Sch/CC VIM VFC My Site Adm Rpts Oth

Add/Find Roster Add Imm Information Status History

Red indicates not approved for provider use. MCIR ID: 1

Personal Information/Status

Name: [Redacted] DOB: 09/04/2011
 Patient ID: [Redacted] Age: 11 Years 10 Months

Assessment indicates that vaccinations are overdue and should be administered today if not medically contraindicated.

Administered Vaccine	Can be given today	Dose #	Accelerated	Recommended	Overdue
Tdap	YES	1	09/04/2018	09/04/2018	09/04/2018
Polio	YES	1	10/16/2011	11/04/2011	12/04/2011
MMR	YES	1	09/04/2012	09/04/2012	12/02/2012
Hepatitis B	YES	1	09/04/2011	09/04/2011	10/04/2011
Varicella	YES	1	09/04/2012	09/04/2012	12/02/2012
HPV	YES	1	09/04/2020	09/04/2022	09/04/2023
Hepatitis A	YES	1	09/04/2012	09/04/2012	03/04/2013
Seasonal Influenza	YES	1	09/01/2023	09/01/2023	10/01/2023
Meningococcal	YES	1	09/04/2022	09/04/2022	09/04/2023
Pfizer/Moderna Bivalent	YES	1	04/19/2023	04/19/2023	04/19/2023

Non-Administrations/Titers

Date	Reason	Entered By
No non-administrations/titers found		

Non-Medical Waivers

Report Year	DTaP	Polio	MMR	Hib	HepB	Var	PCV	Mening	Tdap	Td	Last Modified	Modified By
No Waivers Found												

Add to Roster Unlock Person Reassess Person

Figure 16

View Deleted Non-Medical Waivers from the My Waivers Screen

1. From the LHD MCIR Home Screen select My Waivers.
2. Select the applicable County for targeted searching in the County drop down.
3. Select **Show Deleted**, (Figure 17).

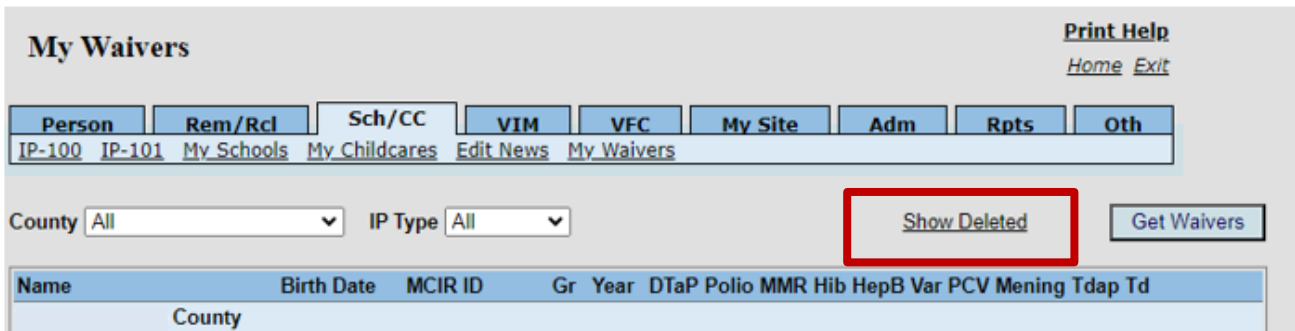


Figure 17

4. All deleted waivers will display with a red pink highlight and **Restore** on the right hand side of the table, (Figure 18).

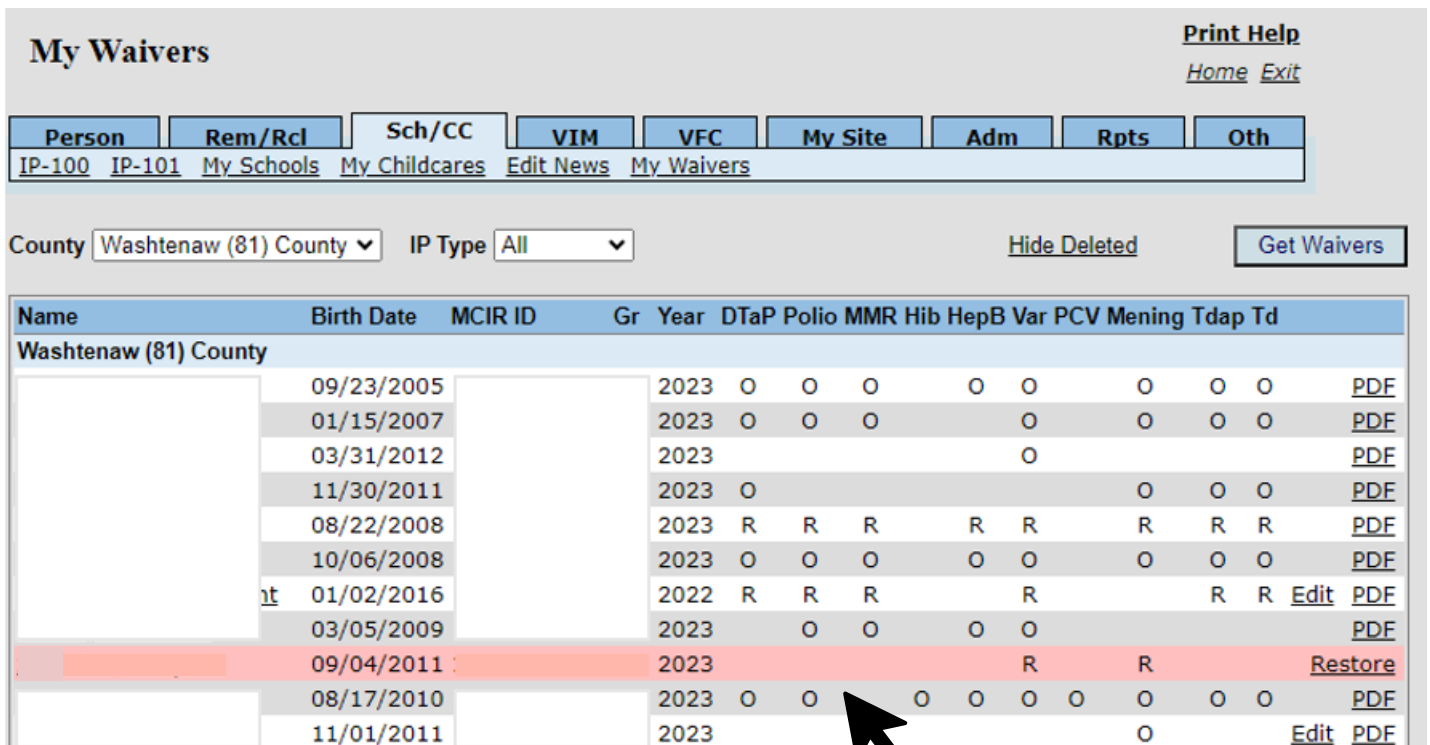


Figure 18

Restore a Deleted Non- Medical Waiver previously recorded in the MCIR

1. If you wish to Restore a previously deleted waiver, click on the **Restore** hyperlink regarding the applicable waiver highlighted in a pinkish red available to you to restore, (Figure 18).
2. A pop up box will display, (Figure 19).
3. **Select Restore.**
4. This will restore the original waiver as it was previously recorded.
5. To verify, check the individual's record to view the restored waiver.

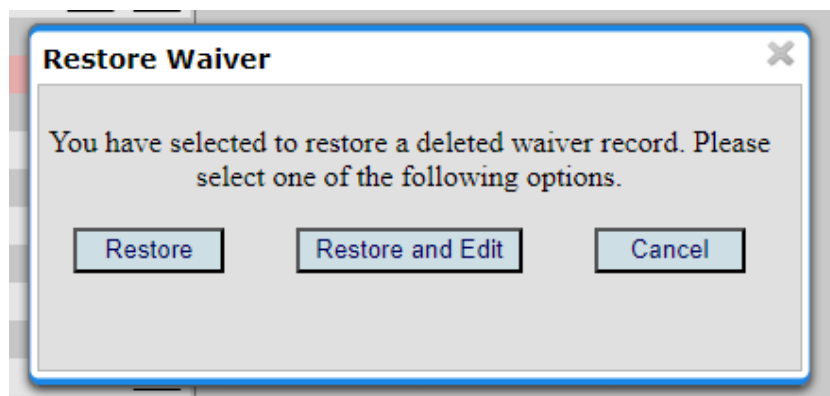


Figure 19

Restore and Edit a Deleted Waiver

1. If you wish to **Restore and Edit** a previously deleted waiver, click on the **Restore** hyperlink regarding the applicable waiver highlighted in a pinkish red available to you to restore, (Figure 18).
2. A pop up box will display, (Figure 19).
3. **Select Restore and Edit.**
4. The Non-Medical Waiver Education screen will display allowing the user to restore and then edit the waiver previously entered, (Figure 20).
5. The date field will default to the date the waiver is opened to restore and edit. The parent/guardian signature field will be blank and need to be re-entered. The nurse/administrator field is an editable field.
6. Edit the waiver as needed and select **Submit**, (Figure 20).

Person: zzzBaker, Maryann
 Birth Date: 09/04/2011
 Provider: Overdue

[Print Help](#)
[Home](#) [Exit](#)

[View](#)

Non-Medical Waiver Education

Person	Rem/Rcl	Sch/CC	VIM	VFC	My Site	Adm	Rpts	Oth
Add/Find	Roster	Add Imm	Information	Status	History			

Person Information **MCIR ID : 17001958029**

Name: zzzBaker, Maryann	Birthdate: 09/04/2011	Sex: Female
	Age: 11 Years 10 Months	
Resp. Party: zzzBaker,	Jurisdiction: No County Affiliation	Primary Phone:
Address: 16218 Blue Skies Dr, Livonia, MI 48154		Secondary Phone:
		Address Status: Valid
Country: United States	County: Wayne	Address Updated: 08/22/2017

Home Contact Information

Street*

City* **State*** **Postal Code***

Primary Phone () -

Email

Waiver Information

Vaccine Series	Reason For Waiver
DTaP (Diphtheria, Tetanus, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Polio	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Hepatitis B	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
MMR (Measles, Mumps, Rubella)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
H.Influenza type b (Hib)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
PCV13 (Pneumococcal Conjugate)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Varicella (Chickenpox)	<input checked="" type="radio"/> Religious <input type="radio"/> Other <input type="radio"/> N/A
MenACWY (Meningococcal Conjugate)	<input checked="" type="radio"/> Religious <input type="radio"/> Other <input type="radio"/> N/A
Tdap (Tetanus, Diphtheria, Pertussis)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A
Td (Tetanus, Diphtheria)	<input type="radio"/> Religious <input type="radio"/> Other <input checked="" type="radio"/> N/A

Reason

Administration

Waiver Date *

Parent/Guardian Signature *

Nurse/Administrator *

Figure 20

Print a Non-Medical Documented Waiver from the LHD Waiver Roster

1. After selecting the County, and IP Type locate the waiver record you wish to print and select **PDF**, (Figure 13).

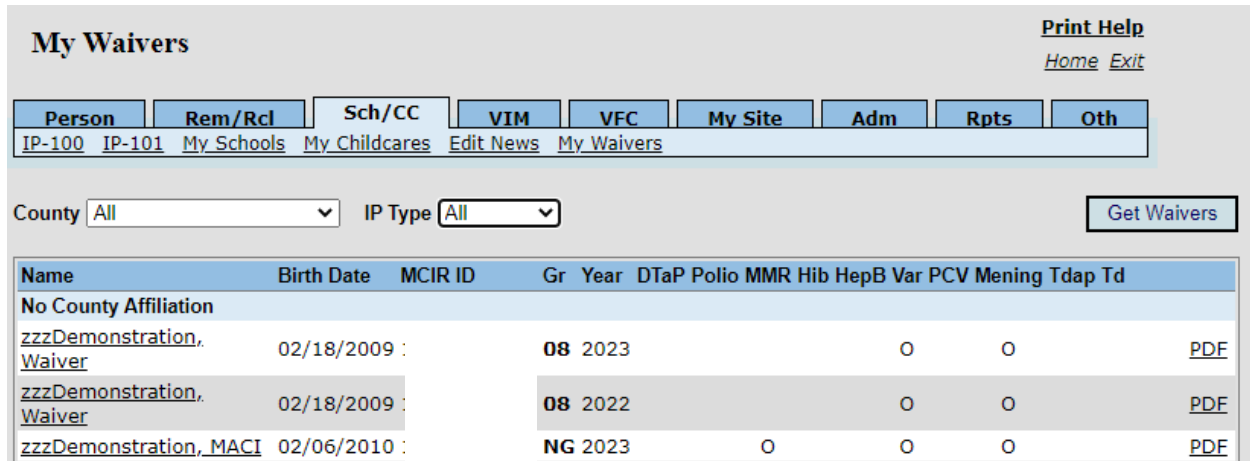


Figure 13 – My Waiver LHD Jurisdiction Roster screen displaying where to click to print a waiver as a PDF.

2. The completed waiver form will appear in a pop-up window on your screen as a PDF to print, (Figure 14).

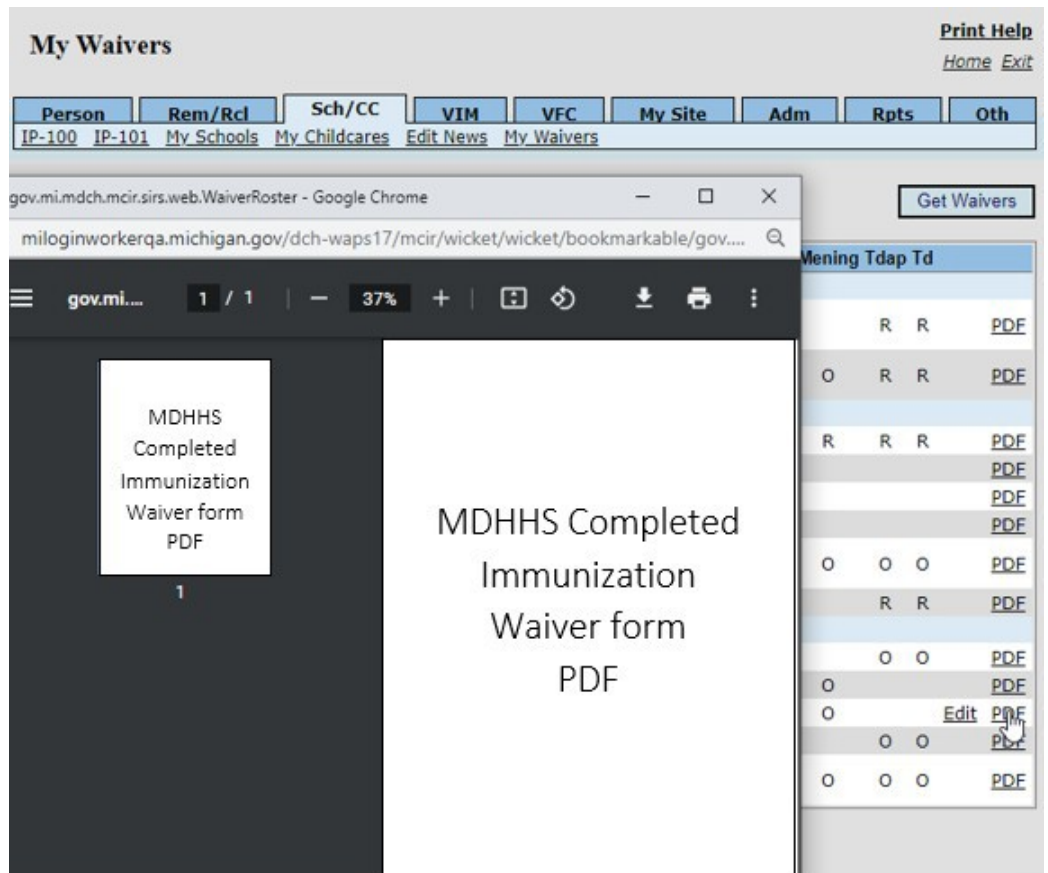


Figure 14 -An example of a PDF waiver displaying as a pop up. Actual waiver will show here. This placeholder is an example of how the waiver appears on screen.

3. Print the waiver as a PDF using the device/computer printing function, (Figure 15).

***For security purposes the waiver example is not displayed in full detail.**

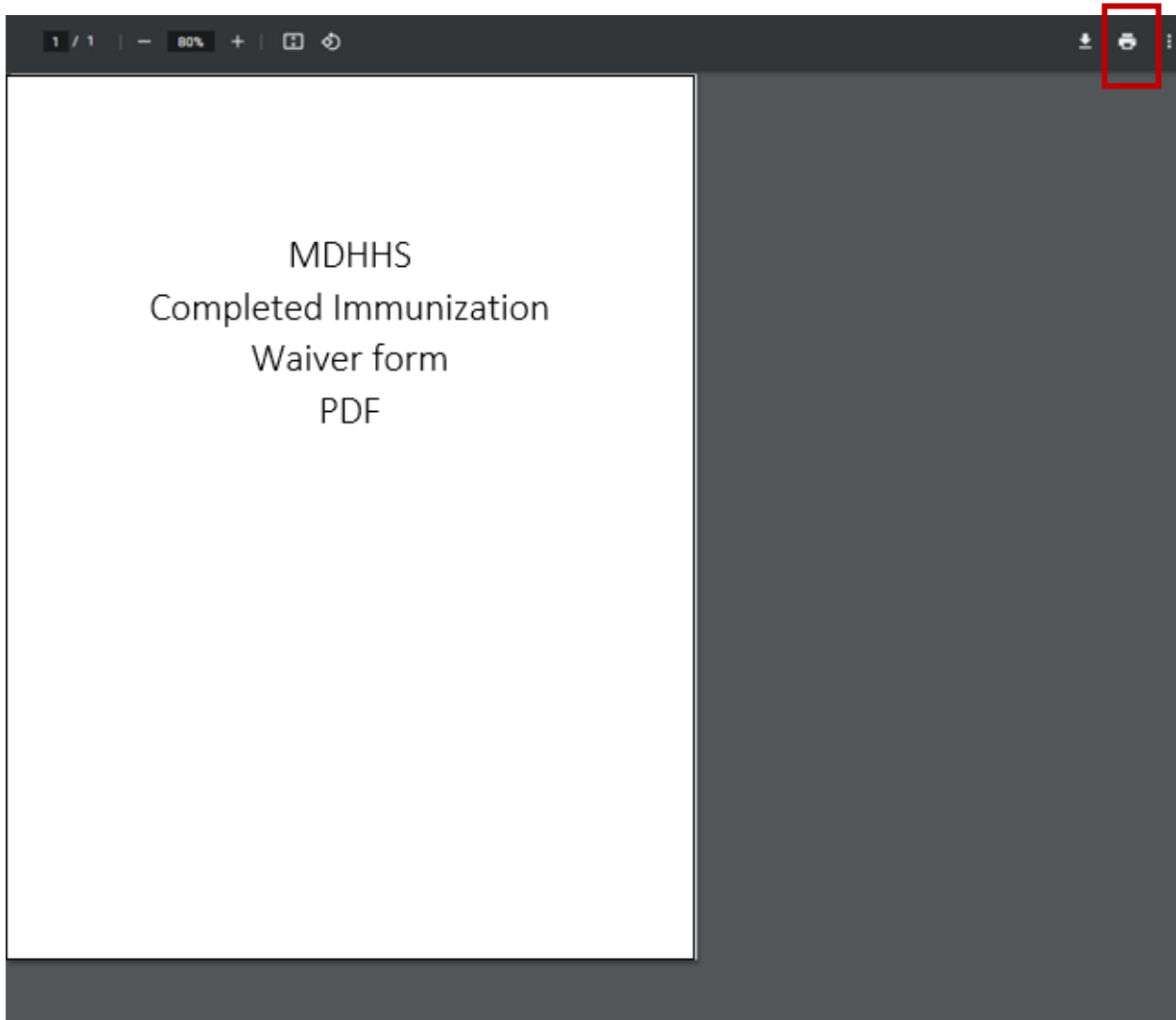


Figure 15 – Example of Waiver displaying as a PDF on the screen

Print a Non-Medical Documented Waiver from Immunization Record Status Tab

1. Search for the person by legal first and last name, date of birth using the **Add/Find** link in the Person section, ([Figure 1](#), page 1).
2. The person’s general information screen will appear, click **Status**.
3. On the person’s Immunization Status screen click **PDF** to print the waiver, (Figure 16).

Immunization Status Person: zzzStudent, Test Birth Date: 12/12/2009 Provider: **Overdue** [Query View](#) [Print Help](#) [Home](#) [Exit](#)

Person **Rem/Rcl** **Sch/CC** **VIM** **VFC** **My Site** **Adm** **Rpts** **Oth**

[Add/Find](#) [Roster](#) [Add Imm](#) [Information](#) [Status](#) [History](#)

Red indicates not approved for provider use. MCIR ID:

Personal Information/Status

Name zzzStudent, Test DOB 12/12/2009
 Patient ID Age 13 Years

Assessment indicates that vaccinations are overdue and should be administered today if not medically contraindicated.

Administered Vaccine	Can be given today	Dose #	Accelerated	Recommended	Overdue
Td		7	03/11/2031	03/11/2031	05/08/2031
Polio	Series Complete				
MMR	Series Complete				
Hepatitis B	Series Complete				
Varicella	YES	2	09/12/2014	09/12/2014	12/12/2014
HPV	YES	1	12/12/2018	12/12/2020	12/12/2021
Hepatitis A	Series Complete				
Seasonal Influenza	YES	1	09/01/2022	09/01/2022	10/01/2022
Meningococcal	YES	1	12/12/2020	12/12/2020	12/12/2021
COVID-19 (Pfizer, Mod, Nova)	YES	1	06/17/2022	06/17/2022	06/17/2022

Non-Administrations/Titers	Date	Reason	Entered By
Varicella	12/12/2022	Other	Test LHD Provider Site
Meningococcal Conjugate	12/12/2022	Other	Test LHD Provider Site

Non-Medical Waivers

Report Year	DTaP	Polio	MMR	Hib	HepB	Var	PCV	Mening	Tdap	Td	Last Modified	Modified By
Add New Waiver												
2022 Washtenaw						O		O			12/12/2022	PDF

[Add to Roster](#) [Unlock Person](#) [Reassess Person](#)

Figure 16 – Person’s immunization status screen displaying Non-Medical Waivers and where to click to print the PDF

- The completed waiver form will appear in a pop-up window on the screen as a PDF to print, (Figure 17).
- Print the waiver as a PDF using the device/computer printing function, (Figure 17).

***For security purposes the waiver example is not displayed in full detail.**

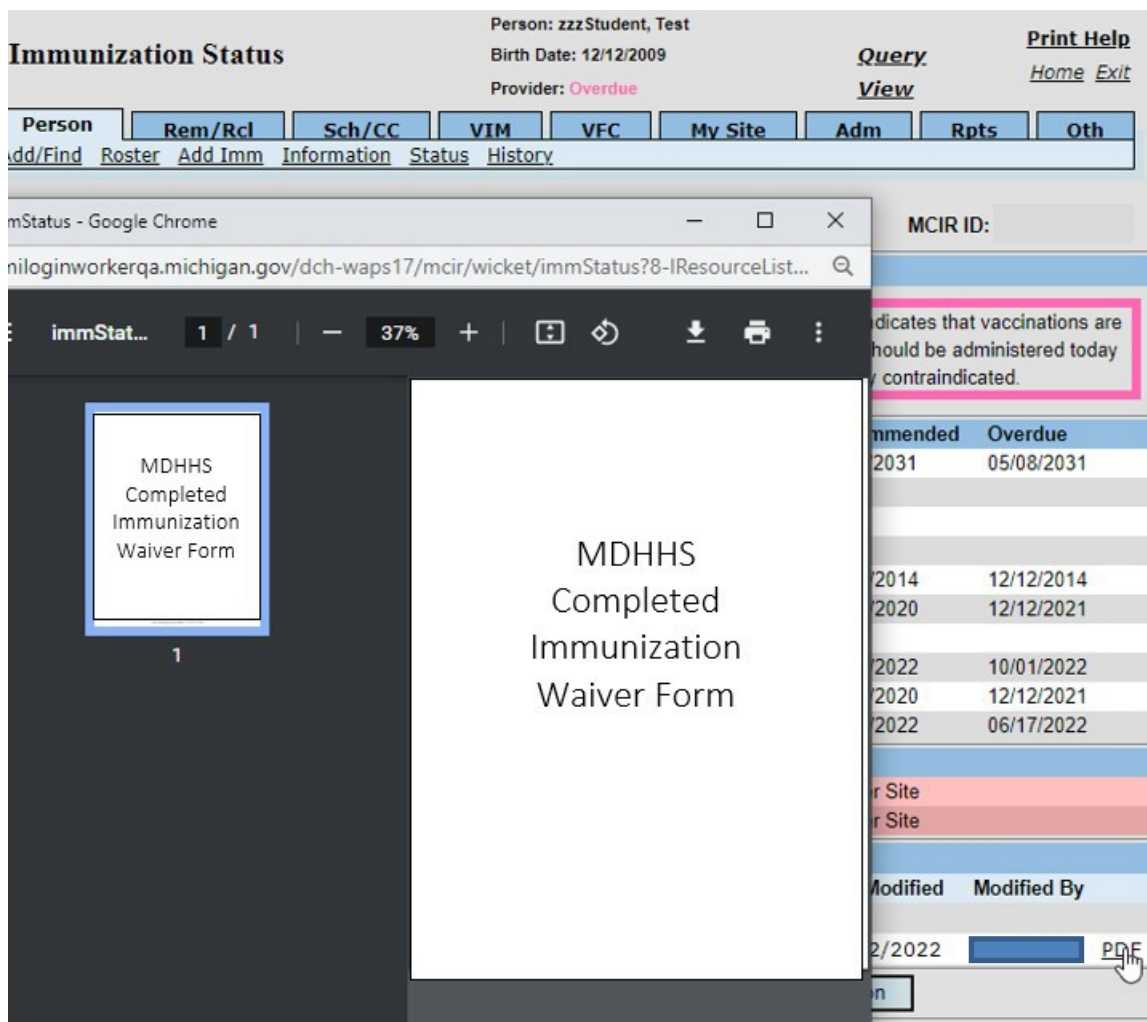


Figure 17 – Displaying the how the waiver form may pop up on your screen after selecting PDF

Please note all screen shots are for training purposes only depicting instructional steps, and may not reflect a specific individual, specific immunization record, specific vaccine series or consistent date of birth or specific site or MCIR ID.*

END.