How to Document a Dose of COVID-19 Vaccine in the MCIR

Contact your <u>Regional MCIR Office</u> for additional assistance.



Are You Logged into MCIR?

Log in to the Michigan Care Improvement Registry, MCIR via <u>MILogin.</u>



MCIR Home Screen

After successful log in to MILogin, your MCIR Home Screen displays, *image*.

Click <u>Add/Find</u> in the Person section

MDHHS Michig	an Care Impro	ovement Reg	istry 💩 Mich	Igandou
Person	Remind	er/Recall	Vaccine Mgn	nt
Add/Find	Create Reminder		Manage Inventory	
Roster	Create Recall		Return/Waste Reporting	1
	Retrieve/Confirm	Results	Search Return/Waste Re	eports
	Scan RTS Letters		View Inventory History	
			Vaccines Administered	
тпрогу слроге	My	Site	Administratio	on
Submit File	Site Preferences		Site Users	
Retrieve Results	User Preferences			
	Edit My Site			
	Enroll in VFC Proc	<u>jram</u>		
	View My Site List			
	Go to New Site			
Reports			Other	
Batch		Get News		
Inventory		<u>View Usage Agree</u>	<u>ment</u>	
Maintenance		MCIR.org		
Profile		VIS		
Quality Improvement		IVEN		
Reminder/Recall		Exit Application		
Retrieve Results				
Roster				
Vaccine				
VAERS				

Search Patient

Enter Last Name, First Name, and Birth Date.

Click the **Submit** button.

Find Pers	on						<u>Print Help</u> <u>Home Exit</u>
Person	Rem/Rcl	VIM	Imp/Exp	VFC	My Site	Rpts	Oth
Add/Find Ros	ter						

Before adding a person, please make several attempts to locate the person in the system.

An '*' may be used as a wildcard. Also, use a birth date, or any ID, if available.

This information identifies the person presenting for medical treatment											
Last Name	Zzztestpatient	First Name	Adult								
Birth Date	08/20/1954	Gender	🗌 Male 🗌 Female								
Mother's Maiden Name											
Patient ID		Medicaid ID									
WIC ID]									
Information identify	ring the responsible pai	ty for appointments (par	ent/guardian)								
Last Name		First Name									
Phone ()										
	Submit	Clear Cancel									



For detailed guidance such as Adding a Person to MCIR, Wildcard searching, Editing a Person's Address and more, visit the MCIR Basics resource page or contact your <u>Regional MCIR Office</u>.

Patient General Information Displays

Confirm the correct patient is displayed.

Click **Add Imm** link from the Person tab.

General	Information			Person: 2 Birth Dat		Print Help Home Exit		
				Provider		View		
Person	Rem/RCI	<u>v</u>	IM In	np/Exp	VFC	My Site	Rpts	Oth
Add/Find	ste <u>Add Imm</u>	nformati	ion Status H	listory				2000 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 - 1009 -
Person In	formation : <u>Edi</u>	t				МСІ	R ID :	
Name:	777TestPatient A		Birthdate:	08/20/1	954	Gender:		Female
			A.g.o.:	CC Verse 2 Months			remaie	
			Age.	oo real	s 5 Monuns			
Resp. Party:	Test, Adult		Jurisdiction:	Oaklan	d (63) County	Primary P	hone:	
Address:	1234 LIFELONG	LN				Secondary	Phone:	
						10 10 10 10 10 10 10 10 10 10 10 10 10 1		10.000
	, MI					Address S	status:	Invalid

Add Immunizations Page Displays

Click **Type** and select **Outbreak**.

Outbreak is only accessible to sites enrolled in the COVID-19 Vaccination Program.

Add	d Imm	uniza	tions			Birt	h Date: 08/2	20/1954				Print F	lel
Aut	. min	aniza	cions.			Pro	vider: Over	due		1	<u>/iew</u>	<u>Home</u>	<u>Ex</u>
Per	rson	Rom		VIM	Imp	/Evn	VEC	My Site		Adm	Pote		h
Add/F	ind Rost	er Ad	d Imm	Informatio	n <u>Status</u>	History				Adm	i i i co co		
Recon	ds per pa	ne	3 🗸		Sut	mit		Add More	1	C	ancel		
Neccon	us per pu	90	<u> </u>						1		incor		
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_	Historica												
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			Mfr.			✓ Lot				Vol.		ml	
			Site		~	Rout	e 📃	~				_	
				-									_
Imm	unizatio	on Inf	ormat	ion								<u>Clear</u> E	ve
Туре	No Inver	tory 🔨	Date			Vacc	ine		~	Elig.		_	
			Mfr.			✓ Lot				Vol.		ml	
			Site		~	Rout	e	~					
				Submit		Add Mo	re	Can	cel				

Derson: 777TestDetient Adul

Enter Date COVID Vaccine is Administered

Add	Imm	uniz	ation	s				Person: 2 Birth Dat	ZZZTestP: e: 08/20/1	atient, Adult 1954					<u>Pri</u>	nt Help
Aut		umz	ation					Provider	Overdue)			<u>Vie</u>	<u>v</u>	<u>Hoi</u>	<u>ne</u> <u>Exit</u>
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Add/Fi	nd Ros	ster <u>A</u>	dd Imn	<u>n Info</u>	rmatio	n <u>Sta</u>	tus <u>H</u>	story								
				-												
Record	ls per pa	age	3 🗸	J			Submit	1	Ad	ld More			Cance	el		
<u>Use 20</u>) Barco	de														
Imm	ınizati	on In	fe ma	tion											Clea	r Event
Type	Outbrea	ik i	Da	te				Agent			~	Fund.		-	0100	~
1.11-0				[~	Lot				~
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Type	20	21	22	23	24	25	26	Agent			~	Fund.		-	0100	~
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								Route		•						
				Suba	ait	1		dd Moro	1	Cana	ol					
				Subh	int		A	uu wore]	Cano	ei					

Select Agent Administered

For this example, we are selecting COVID-19 PFR 195 CTN ...

Add Immuniz: Person Ren Add/Find Roster Ad	ations n/Rcl VIM Imp/Exp dd Imm Information Status His	Person: ZZZTestPatient, Adult Birth Date: 08/20/1954 Provider: Overdue VFC My Site	Print HelpViewHome ExitAdmRptsOth
Records per page	3 V Submit	Add More	Cancel
Immunization In	formation		<u>Clear Event</u>
Type Outbreak	✓ Date 12/11/2020	Agent 🗸	Fu d. 🚬 🗸
	Event v	Trgt COVID-19 PFR 195 CTN	
	Site V	COVID-19 PFR 25 CTN COVID-19 MOD 10 CTN	
Immunization In	formation		Clear Event
Type Outbreak	✓ Date	Agent 🗸 🗸	Fund.
	Event V	Trgt 🗸 🗸	Lot 🗸
	Site 🗸	Route 🗸	
Immunization In	formation		<u>Clear Event</u>
Type Outbreak	✓ Date	Agent 🗸	Fund.
	Event V	Trgt	Lot 🗸
	Site 🗸	Route	
	Submit Ad	d More Cancel	

Select Fund

Select **Federal.** This is the only option displayed.

The **Event** field will populate automatically to COVID-19 Outbreak.

Add Immunizat	ions	Person: ZZZTestPatient, Adult Birth Date: 08/20/1954 Provider: Overdue	<u>View</u>
Person Rem/	Rcl VIM Imp/Ex	p VFC My Site	Adm Rpts Oth
Add/Find Roster Add	Imm Information Status Hi	story	
Records per page	3 🗸 Submit	Add More	Cancel
Immunization Info	rmation		<u>Clear Event</u>
Type Outbreak 🗸	Date 12/11/2020	Agent COVID-19 PFR 195 🗸	Fund.
	Event COVID-19 Outbreak	rat 🗸 🗸	Lot
	Site	Route V	Federal
	5110		
Immunization Info	rmation		<u>Clear Event</u>
Type Outbreak 🗸	Date	Agent 🗸	Fund.
	Event N	Trat	Lot 💙
	Site V	Route V	
	JIC	Noute	
Immunization Info	rmation		<u>Clear Event</u>
Type Outbreak 🗸	Date	Agent 🗸	Fund.
	Event	Trat	Lot 🗸
	Site	Route	
	JIC		
	Submit	dd More Cancel	

Select Target

Choose the one option **Target** displayed.

Add Immuniza	tions		Person: 2 Birth Date Provider:	ZZZTestPatient, e: 08/20/1954 Overdue	Adult		<u>View</u>	<u>Print Help</u> Home <u>Exit</u>
Person Ren	n/Rcl VIM	tion Status Hist		C My	Site	Adm	Rpts	Oth
Add/Tind Roster Ad								
Records per page	3 🗸	Submit		Add Mo	re	С	ancel	
Use 2D Barcode								
Immunization Inf	ormation							<u>Clear Event</u>
Type Outbreak	✓ Date 12/11/2	2020 💻	Agent	COVID-19 P	FR 195 🗸	Fund	Federal	~
	Event COVID)-19 Outbreak 🗸	Trgt [~	Lot		~
	Site	~	Route	COV 19-UN		19-Not re	corded	
				001_13-011	K - COVID-		conded	•
Immunization Inf	ormation							<u>Clear Event</u>
Type Outbreak	✓ Date		Agent		~	Fund.		~
	Event	~	Trgt [~	Lot [~
	Site	~	Route		~			
Immunization Inf	ormation							<u>Clear Event</u>
Type Outbreak	✓ Date		Agent		~	Fund.		~
	Event	~	Trgt		~	Lot		~
	Site	~	Route		~			
		_				_		
	Submit	Ado	More		Cancel			

Select Lot

Add Immunizations	Person: ZZZTestPatient, A Birth Date: 08/20/1954 Provider: Overdue	Adult <u>Print Help</u> <u>View</u> <u>Home</u> <u>Exit</u>
Person Rem/Rcl VIM	Imp/Exp VFC My S Status History	Site Adm Rpts Oth
Records per page 3 ▼ Use 2D Barcode	Submit Add More	e Cancel
Immunization Information		<u>Clear Event</u>
Type Outbreak ✔ Date 12/11/2020	Agent COVID-19 PFI	R 195 Y Fund Federal Y
Event COVID-19	Outbreak 🕶 Trgt COV_19-UNK	Lot 🗸
Site	✓ Route	✓
		C564C5A (Expires: 06/12/202
Immunization Information		<u>Clear Event</u>
Type Outbreak 🗸 Date	Agent	✓ Fund. ✓
Event	✓ Trgt	✓ Lot ✓
Site	✓ Route	▼
Immunization Information		<u>Clear Event</u>
Type Outbreak 🗸 Date	Agent	✓ Fund. ✓
Event	✓ Trgt	✓ Lot ✓
Site	Route	▼
Submit	Add More	Cancel

Select Site

Add Immuniz	ations		Person: ZZZTe Birth Date: 08/	stPatient, Adult 20/1954		I	Print Help
			Provider: Over	due	<u>Vi</u>	<u>ew</u> !	<u>Home</u> <u>Exit</u>
Person Ren	n/Rcl	VIM Imp/Exp	VFC	My Site	Adm	Rpts	Oth
Add/Find Roster Ac	<u>ld Imm</u> <u>Info</u>	rmation <u>Status</u> Histo	ory				
Records per page	3 🗸	Submit		Add More	Can	cel	
Use 2D Parcede							
Ose 2D Barcode							
Immunization Inf	ormation					<u>C</u>	ear Even
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	Event C	OVID-19 Outbreak ➤	Trgt COV	/_19-UNK - CO\ ✔	Lot C	564C3A (E)	kpires: 0 ∨
	Site	~	Route	~			
Immunization Inf	rmatio Le	eft Thiah				<u>C</u>	ear Even
Type Outbreak	Date Ri	ight Arm	Agent	~	Fund.		~
	Event Di	ight Naris	Trgt	~	Lot		~
	Site Le	eft Naris	Route				
	Bo	oth Nares					
Immunization Inf	ormation					C	ear Even
Type Outbreak	✓ Date		Agent	~	Fund.		~
	Event	`	Trat		Lot		~
	Site		Route				
	Subn	nit Add	More	Cancel	1		
	Cabi	Add	more	Ouncer			

For this example, we are selecting Left Arm.

Select Route

Add Immunizations		Person: Birth Da Provider	ZZZTestPatient, Adult te: 08/20/1954 : Overdue		<u>View</u>	<u>Print Help</u> <u>Home</u> <u>Exit</u>
Person Rem/Rcl	VIM Imp/Ex	xp V	FC My Site	Adm	Rpts	Oth
Add/Find Roster Add Imm	<u>Information</u> <u>Status</u> <u>H</u>	istory				
Records per page 3 Use 2D Barcode	Submi	it	Add More		Cancel	
Immunization Informatio	on					<u>Clear Event</u>
Type Outbreak 🗸 Date	12/11/2020	Agent	COVID-19 PFR 19	95 v Fund.	Federal	~
Event	COVID-19 Outbreak	✓ Trat	COV 19-UNK - CO	o\∨ Lot	C564C3A (Expires: 0 🗸
Site	Left Arm 🗸	Route	~			
Immunization Informatio	on		Subcutaneous			<u>Clear Event</u>
Type Outbreak V Date		Agent	Oral	Fund.		~
Event		Trgt	Intradermai	✓ Lot		~
Site	~	Route	Intravenous			
			Percutaneous IV Piggyback			
Immunization Informatio	on					<u>Clear Event</u>
Type Outbreak V Date		Agent		➤ Fund.		~
Event		✓ Trgt		✓ Lot		~
Site	~	Route	~			
S	ubmit A	Add More	Cano	cel		

For this example, we are selecting Intramuscular.

Click Submit

When all fields are completed with provider administration information, click **Submit.**

Add Immuniz	ations	Pe Bi Pr	erson: ZZZTestPa irth Date: 08/20/19 rovider: Overdue	tient, Adult 954	<u>View</u>	<u>Print Help</u> <u>Home</u> <u>Exit</u>
Person Re	m/Rcl VIM	Imp/Exp Status History	VFC	My Site	Adm R	pts Oth
Records per page	3 •	Submit	Ad	d More	Cancel	
Immunization I	formation					<u>Clear Event</u>
Type Outbreak	✓ Date 12/11/202		gent COVID-	19 PFR 195 🗙	Fund. Feder	al 🗸
	Event COVID-19	Outbreak 🖌 Tr	rgt COV_19	-UNK - CO\ ❤	Lot C564	C3A (Expires: 0 🗸
	Site Left Arm	✓ R	oute Intramus	scular 🗸		
Immunization In	formation					<u>Clear Even</u>
Type Outbreak	✓ Date		gent	~	Fund.	~
	Event	✓ Tr	rgt	~	Lot	~
	Site	✓ R	oute	~		
Immunization In	formation					<u>Clear Event</u>
Type Outbreak	✓ Date		gent	~	Fund.	~
	Event	✓ Tr	rgt	~	Lot	~
	Site	✓ R	oute	~		
	Submit	Add Mo	ore	Cancel		

Success! Immunization History Screen Displays

The COVID-19 immunization appears in the patient's Immunization History.

Immunizati	on History		Person: ZZZTestPat Birth Date: 08/20/19 Provider: Overdue	tient, Adult 54 <u>Vie</u>	<u>Print Help</u> <u>Home</u> <u>Exit</u>			
Person	Rem/Rcl	VIM	Imp/Exp VFC	My Site R	pts Oth			
Add/Find Roster	Add Imm Informa	tion <u>Status</u>	History					
				MCI	R ID:			
History Format								
Vaccine Series Oate Administered Vaccine/Date Summary								
Vaccine	# Age	Date	Entered By	Manufacturer	Lot #			
SARS-CoV-2								
COVID-19 (Pfizer)	1 66 Years 3 Months	12/11/202	Provider Name Here	Pfizer	C564C3A Delete			
Non-Administratio	ons/Titers	Date	Reason	Entered By				
No non-administrations/titers found								
		Add to R	oster Unlock F	Person				

The End.

