

Guide for Electronic Reporters to Submit Monthly Inventory and Place a VFC Vaccine Order in ASIIS

June 18, 2015



If you don't have any wasted or expired doses to correct on the Reconcile Inventory page, simply enter the number listed in the **'Quantity on Hand'** column into the **'Physical Inventory'** column.

You will be able to document the actual Physical Inventory on the Order Screen.

Organization (IRMS): ARIZONA IMMUNIZATION PROGRAM (60098)

Date: June 16, 2015

Reconcile Inventory

| Vaccine | Lot Number | Exp Date | Quantity on Hand | Physical Inventory | Adjustment (+/-) | Category | Reason | Public | Inactive | Add Row |
|-------------------------|------------|------------|------------------|--------------------|------------------|------------------------|------------------------|--------|--------------------------|---------|
| HPV, quadrivalent | J003727 | 11/07/2015 | 30 | | 0.0 | --No Category Requirec | --No Reason Required-- | N | <input type="checkbox"/> | + |
| HPV, quadrivalent | J006236 | 09/25/2016 | 17 | | 0.0 | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| Hep A 2 dose - Ped/Adol | J005080 | 09/20/2015 | 20 | | 0.0 | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| IPV | J15611 | 10/12/2015 | 11 | | 0.0 | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| MMR/Varicella | K002038 | 08/10/2015 | 8 | | 0.0 | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| Tdap | U4668AA | 01/24/2016 | 15 | | 0.0 | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| Tdap | U4688BA | 02/24/2016 | 23 | | 0.0 | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |

Print Reset Save
Submit Monthly Inventory

Inventory Last Submitted: N/A



Click the Submit Monthly Inventory Button once all of the quantities have been entered.

Organization (IRMS): ARIZONA IMMUNIZATION PROGRAM (60098)

Date: June 16, 2015

Reconcile Inventory

| Vaccine | Lot Number | Exp Date | Quantity on Hand | Physical Inventory | Adjustment (+/-) | Category | Reason | Public | Inactive | Add Row |
|-------------------------|------------|------------|------------------|---------------------------------|----------------------------------|------------------------|------------------------|--------|--------------------------|---------|
| HPV, quadrivalent | J003727 | 11/07/2015 | 30 | <input type="text" value="30"/> | <input type="text" value="0.0"/> | --No Category Requirec | --No Reason Required-- | N | <input type="checkbox"/> | + |
| HPV, quadrivalent | J006236 | 09/25/2016 | 17 | <input type="text" value="17"/> | <input type="text" value="0.0"/> | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| Hep A 2 dose - Ped/Adol | J005080 | 09/20/2015 | 20 | <input type="text" value="20"/> | <input type="text" value="0.0"/> | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| IPV | J15611 | 10/12/2015 | 11 | <input type="text" value="11"/> | <input type="text" value="0.0"/> | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| MMR/Varicella | K002038 | 08/10/2015 | 8 | <input type="text" value="8"/> | <input type="text" value="0.0"/> | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| Tdap | U4668AA | 01/24/2016 | 15 | <input type="text" value="15"/> | <input type="text" value="0.0"/> | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |
| Tdap | U4688BA | 02/24/2016 | 23 | <input type="text" value="23"/> | <input type="text" value="0.0"/> | --No Category Requirec | --No Reason Required-- | Y | <input type="checkbox"/> | + |

Print ~~Reset~~ Save

Submit Monthly Inventory

Inventory Last Submitted: N/A



This will submit your inventory, update the “Inventory Last Submitted” and allow you to place an order. Click on Create/View Orders to begin placing an order.

Logged in: KELSEY PISTOTNIK VFC
 Organization (IRMS): ARIZONA IMMUNIZATION PROGRAM (60098)

Date: June 16, 2015

• Changes were saved successfully

- ▶ Main
- ▶ Message
- ▶ Favorites
- ▶ Patient
- ▶ Vaccinations
- ▶ Exec. Dashboard
- ▶ Organization (IRMS)
- ▶ Facilities
- ▶ Physicians & Vaccinators
- ▶ Lot Numbers
 - Reconciliation
 - Search/Add
 - Search Results
 - Detail
- ▶ Orders/Transfers
 - Alerts
 - ▶ Create/View Orders
 - Search History
 - Modify Order Set
 - Cold Storage

| Reconcile Inventory | | | | | | | | | | | |
|-------------------------|------------|------------|------------------|----------------------|------------------|------------------------|------------------------|--------|--------------------------|---------|--|
| Vaccine | Lot Number | Exp Date | Quantity on Hand | Physical Inventory | Adjustment (+/-) | Category | Reason | Public | Inactive | Add Row | |
| HPV, quadrivalent | J003727 | 11/07/2015 | 30 | <input type="text"/> | 0.0 | --No Category Required | --No Reason Required-- | N | <input type="checkbox"/> | + | |
| HPV, quadrivalent | J006236 | 09/25/2016 | 17 | <input type="text"/> | 0.0 | --No Category Required | --No Reason Required-- | Y | <input type="checkbox"/> | + | |
| Hep A 2 dose - Ped/Adol | J005080 | 09/20/2015 | 20 | <input type="text"/> | 0.0 | --No Category Required | --No Reason Required-- | Y | <input type="checkbox"/> | + | |
| IPV | J15611 | 10/12/2015 | 11 | <input type="text"/> | 0.0 | --No Category Required | --No Reason Required-- | Y | <input type="checkbox"/> | + | |
| MMR/Varicella | K002038 | 08/10/2015 | 8 | <input type="text"/> | 0.0 | --No Category Required | --No Reason Required-- | Y | <input type="checkbox"/> | + | |
| Tdap | U4668AA | 01/24/2016 | 15 | <input type="text"/> | 0.0 | --No Category Required | --No Reason Required-- | Y | <input type="checkbox"/> | + | |
| Tdap | U4688BA | 02/24/2016 | 23 | <input type="text"/> | 0.0 | --No Category Required | --No Reason Required-- | Y | <input type="checkbox"/> | + | |

Inventory Last Submitted: 06/16/2015

Print Reset Save

Submit Monthly Inventory



On the Current Order/Transfer List screen, click on the Create Order button.

Organization (IRMS): ARIZONA IMMUNIZATION PROGRAM (60098) Date: June 16, 2015

Current Order/Transfer List

Inbound Orders

| Select | Order Number | PIN | Submit Date | Approval Date | Status |
|--------|--------------|-----|-------------|---------------|--------|
|--------|--------------|-----|-------------|---------------|--------|

Backordered Orders

| Select | Order Number | PIN | Submit Date | Backorder Date |
|--------|--------------|-----|-------------|----------------|
|--------|--------------|-----|-------------|----------------|

Denied Orders

| Select | Order Number | PIN | Submit Date | Denial Date |
|---------------------------------------|--------------|--------|-------------|-------------|
| <input type="button" value="-->"/> | 104541 | 000001 | 07/26/2013 | 07/29/2013 |

Inbound Transfers

| Select | Transfer Number | PIN | Submit Date | Sending Organization (IRMS)/Facility |
|--------|-----------------|-----|-------------|--------------------------------------|
|--------|-----------------|-----|-------------|--------------------------------------|

Outbound Transfers

| Select | Transfer Number | PIN | Submit Date | Receiving Organization (IRMS)/Facility |
|--------|-----------------|-----|-------------|--|
|--------|-----------------|-----|-------------|--|

Rejected Transfers

| Select | Transfer Number | PIN | Submit Date | Receiving Organization (IRMS)/Facility | Reject Date | Rejected By | Status |
|--------|-----------------|-----|-------------|--|-------------|-------------|--------|
|--------|-----------------|-----|-------------|--|-------------|-------------|--------|

On the Create Order screen, review the contact information and hours listed to make sure the information is current. If you need to make a change, contact the Arizona Vaccine Center 602-364-3642.

Organization (IRMS): ARIZONA IMMUNIZATION PROGRAM (60098) Date: June 16, 2015

Create Order

| | |
|--|---|
| Organization (IRMS): ARIZONA IMMUNIZATION PROGRAM Facility: Phone Number: (602)364-3644 Phone Extension: Email: | First Name: LISA Middle Name: Last Name: UNDERHILL Address: 150 N 18TH AVE, SUITE 120 City: PHOENIX State: AZ Zip: 85007 |
|--|---|

| | |
|---|--|
| Monday: <input checked="" type="checkbox"/> 09:00 - 17:00 | Tuesday: <input checked="" type="checkbox"/> 09:00 - 17:00 |
| Wednesday: <input checked="" type="checkbox"/> 09:00 - 17:00 | Thursday: <input checked="" type="checkbox"/> 09:00 - 17:00 |
| Friday: <input checked="" type="checkbox"/> 09:00 - 17:00 | |

PIN: 000001 **Instructions:**
Order Date: 06/16/2015 **Order Status:** In Progress
Submitter: KELSEY PISTOTNIK VFC (KELSEY)

Comments:

Inventory Last Submitted: 06/16/2015
 Last Order Submitted: 07/26/2013 04:37:02 PM

Order Set: VFC PROVIDERS - NON COUNTY / Distributor

Order Frequency: Monthly **Order Timing:**

Order Schedule:

| Order Details | | | | | | | |
|---------------|-------------|----------------------|--------------------|----------------|--------|-----------------|----------|
| Vaccine | Description | Dose Used Last Month | Physical Inventory | Order Quantity | Urgent | Priority Reason | Comments |
| | | | | | | | |



Enter the order quantity for the vaccines you would like to order and enter a comment when the vaccine quantities differ between the Physical Inventory and the ASIIS Inventory.

For example, ASIIS has 20 doses of Hep A, but in your Cold Storage unit you have 17 doses. Enter “17 doses on hand” in the comments field. This will inform the Arizona Vaccine Center of your true inventory. Repeat this step for all doses of the doses in your inventory and click Submit Order.

| Order Details | | | | | | | |
|-------------------------|---|----------------------|--------------------|---------------------------------|--------------------------|-----------------|------------------|
| Vaccine | Description | Dose Used Last Month | Physical Inventory | Order Quantity | Urgent | Priority Reason | Comments |
| Hep A 2 dose - Ped/Adol | VAQTA 10PK 1 DOSE SYRINGES 0000-4095-02 | 0 | 20 | <input type="text" value="10"/> | <input type="checkbox"/> | --select-- | 17 doses on hand |
| HPV, quadrivalent | GARDASIL 10PK 1 DOSE VIALS 00006-4045-41 | 0 | 17 | <input type="text" value="10"/> | <input type="checkbox"/> | --select-- | 10 doses on hand |
| IPV | POLIO 10 DOSE VIAL 49281-0860-10 | 6 | 11 | <input type="text" value="10"/> | <input type="checkbox"/> | --select-- | 5 doses on hand |
| Tdap | BOOSTRIX 10PK 1 DOSE SYRINGES 58160-0842-52 | 0 | 15 | <input type="text" value="10"/> | <input type="checkbox"/> | --select-- | 8 doses on hand |
| Tdap | BOOSTRIX 10PK 1 DOSE VIALS 58160-0842-11 | 0 | 23 | <input type="text" value="0"/> | <input type="checkbox"/> | --select-- | 21 doses on hand |
| MMR/Varicella | PROQUAD 10PK 1 DOSE VIALS 00006-4999-00 | 0 | 8 | <input type="text" value="10"/> | <input type="checkbox"/> | --select-- | 4 doses on hand |
| Varicella | VARIVAX 10PK 1 DOSE VIALS 00006-4827-00 | 0 | 0 | <input type="text" value="0"/> | <input type="checkbox"/> | --select-- | |

****This is a condensed version of the Order Details section on the order screen to show the whole process on one screen. Only the vaccines in the example inventory are listed.**

If you have any questions, please
contact the ASIIS Help Desk.

602-364-3899

1-877-491-5741

ASIISHelpDesk@azdhs.gov

