





	Name of Activity - Recordin Role Performing Activity:	g Historical Imm Authorized Pano	rama User	OVID-19 Vaccines
Panorama – Immunization	Location: COVID-19 Immuniz	zation Manual	Departmen Population	t: Health Branch
WORK STANDARD	Document Owner: Ministry of Health			
	Date Prepared: December 2020-	Last Revision: December 202	4	Date Approved: January 2021

Purpose: To ensure that the client immunization records are accurate, up-to-date, and as complete as possible, to ensure patient safety. Information sources include hard copy records (including client held copies) and notification forms/records (credible written documentation).

NOTE: If the client's documented immunization record **does not** specify the COVID-19 vaccine agent (i.e., strain type as noted in section 4): 1) direct them to get that information from the vaccine provider to enable back entry. 2) If this information is unavailable, documentation for this immunization event **is not required**.

				Essent	iai i asks:		
Ensure you	ur "Immuniz	ation Defaults"	' for "Ap	oply Defa	ults to Historical	Immuniz	ations" are set to "No".
		a a	-				
		Apply d	efaults to His	storical Immuni	izations:		
katchewan		🕒 🔍 💮 Yes	: 💿 No				
lealth Service, Regi	na, Saskatchewa 🚺	9 Q					
		Holding	Point Locati	on:			
<u> </u>	1.6						
Search for	the client u	sing the approp	oriate Ci	ient Sear	ch variables and s	set client	into context. (See work standard:
Client sear	ch and regis	tration).					
Click " Clie	nt Imms Pro	ofile" tab					
Preview	Undate	Set In Context	Create	Cohort	Client Imms Profile]	
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	Client ID 💠	Health Card Num	ber ᅌ	Last Nam	e First Name	Gender	
<u></u>			1222	*	^		
 O 	7550	460205374		GREEDU	S HEATHER	Female	
In client's '	"Update Imr	nunization Pro	file" pa	ge, click o	n Add Single Imm	nunizatio	on and select Add Historical to
enable doo	cumentation	l.					
Immunization	History - Detailed Da	ita Table					
					Add Single Imm		Add One of More
Update	View Delete				Add Histo	or Depended	
n n	Agent 🔺	Date Administered Ag	e at	. Status	Add Non-Pi Ovid	el Recolueu e Name 👽	Body Site 🗘
Note: vac	cines record	ed as 'Historica	l' will n	ot decren	nent inventory.		
	Ensure you	Ensure your "Immuniz (atchewan ieath Service, Regina, Saskatchewa Search for the client u Client search and regis Click " Client Imms Pro Preview Update Client ID Client ID To client's "Update Immenable documentation Immunization History - Detailed Data Update View Delete Ragent Note: vaccines record	Ensure your "Immunization Defaults" apply d (atchewan	Ensure your "Immunization Defaults" for "Age apply defaults to His (atchewan (atchewa	Ensure your "Immunization Defaults" for "Apply Defa Apply defaults to Historical Immunicatchewan (atchewan	Ensure your "Immunization Defaults" for "Apply Defaults to Historical	Essential rasks. Ensure your "Immunization Defaults" for "Apply Defaults to Historical Immunizations: Apply defaults to Historical Immunizations: (acchewan) () () () () () () () () () () () () (

4		Add Immunization						Record	Consent	Apply	Reset	Cancel	
	Γ	Immunization Type: Historical											
		* Agent:	* Date Admi	nistered:				Age at Adr	ninistration	:			
		COVID-19 Pfizer-BioNTech m 💌	2020/12/24		hh:mm	CDT Estimate	ed	29					
								years	months	days			
		Consent Readiness:											
		Missing		0									
		Reason for Immunization:	Information	Source:		•							
		Dravidary				forification Statuc							
		Provider. Registered Nurse . Registered Nurse		6	Q								
						Not Requested							
						Completed							
		Organization:				Service Delivery Loo	cation:						
		Regina Qu'Appelle RHA, Regina, Saskatchewan		0	Q	Regina General Hostp	oital - Emp	loyee Health	Service, Reg	jina, Saskato	hew U	Q	
	D	ocument the <u>required</u> information f	or COVID)-19 va	accin	es (refer to th	he NO)TE in tl	he Work	Standa	ard Sum	nmary s	ection
	al	pove):											
	•	Vaccine Agent (e.g.COVID-19 Mod	erna mRl	NA 12 [.]	73, C	OVID-19 Pfiz	er-Bio	oNTech	mRNA	BNT16	o2,)		
	•	Date administered											
	•	Provider – If the provider name is	not in Pa	noran	na – s	see below for	r opti	ons					
	•	Organization – former RHA or First	t Nation J	Jurisdi	ictior	ר (FNJ)	•						
	•	Service Delivery Location – the ph	vsical loc	ation	of w	here immuni	izatio	n took i	olace				
	•	Lot number - by selecting it from t	he drop (down	(only	if the vaccin	ne is p	ublicly	funded)			
	•	Dosage – pre-populated once you	nick vou	r lot n	umbi	er		,		,			
	•	Dosage Unit of measurement (UO	M) = nro		lator	l once the lot	tnum	hor is r	hickod				
		Site	in pre	popu	natet		t num	1001 13 1	JICKCU				
		Bouto proponulated once the let	numbor	ic nick	vod								
_		Route - prepopulated once the lot	iumber	is pick	leu								
5	If	the Provider name is not in Panoram	na docum	ent th	ne Pr	ovider type i	n the	drop-d	lown lis ⁻	t by usi	ng the I	type ah	ead
	te	ature in the provider field:											
	Ту	vpe in "Provider" and the following lis	st will be	displa	ayed	to select fron	n						
	Г				- NI								
	H	Provider, Licensed Practical Nurse, Li	censed P	ractica	ai nu	rse							
	Ľ	Provider, Other, Other											
		Provider , Pharmacist, Pharmacist											
		Provider, PHC Paramedic, Other											
		Provider, PHC Registered Nurse, Regi	stered N	urse									
		Provider, PHC Respiratory Therapist,	Other										
		Provider, Physician, Physician											
	Γ	Provider, Public Health Nurse, Public	Health N	lurse									
	Π	Provider, Registered Nurse, Registere	ed Nurse										
		Provider, Registered Nurse Practition	er. Regis	tered	Nurs	e							
		Practitioner	,			-							
	H	Provider Registered Psychiatric Nurs	e Regist	ered P	Svrh	iatric							
		Nurse	C, 105130	cicui	Sych								
	Ľ	Turbe											
	lf	the Provider type is not listed in the	drop-dov	wn list	oris	s unknown, u	use Pr	ovider	Other,	Other			

Add Comment Apply *Comment Text:		
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	Active	

8 Document Risk factor

- Go to the Left Hand Navigation (LHN), and click on the main heading "client" to expand the selections.
- Select "Risk Factors"
- Category: Select IMMUNIZATIONS

Imms History Interpretation	Risk Factors	≵ Hie
Upload Clients	*Category:	All
Cohort		
Immunizations	*Risk Factor:	All
▶ Lab	*Additional Information:	Exposure
Upload Data		
Notes	*Response:	Immunizations
Document Management	Start Date:	Medical History
Communication Templates		
Reporting & Analysis		Risk Behaviour
Notifications		Sexual Behaviour
Communications Log	Reported By:	
Workgroups		Social Determinants of Health
Administration	Specify:	Special Population
		Substance Use
		Travel
	Row Actions: Undate	

For Health Care Workers:

- **Risk Factor:** Select Occupation-Health care worker- Eligible for Publicly Funded Vaccines+ from Drop down menu.
- Response: Select "YES"
- Start Date: Enter date the vaccine was provided.
- Reported date: Will automatically populate to the current date
- Click the Add button and then click Save at the bottom of the screen

*Category:	Immunizations							
*Risk Factor:	Occupation - He	alth Care Worker - Eli <u>c</u>	ible for Publicly Fund	ed Vaccines+				
*Additional Information	1:							
*Response:	Yes		✓ Freque	ency:				
Start Date:	2020 / 12	2 / 24	🗉 🛛 End Da	ite:	00/	/] /	
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Reported By:			✓ *Repo	orted Date: 2	:020	/ 12	/ 24	
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Risk Factors				A Hide Risk Factors
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* Response:	Yes 🗸	Frequency:		~
Start Date:	2021 / 1 / 4 🔠	End Date:	yyyy mm dd	
		End Date Reason:		\checkmark
Reported By:	~	* Reported Date:	2021 / 01 / 06 yyyy mm dd	
Specify:				
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Risk Factors		☆ Hide Risk Factors
* Category: * Risk Factor: * Additional Information:	Special Population Special Population – LTC - Staff	▼▼
* Response: Start Date:	Yes Frequency: 2021 / 01 / 06 End Date: / / yyyy mm dd yyyy mm dd	~
Reported By:	End Date Reason: * Reported Date: 2021 / 01 / 06 yyyy mm dd	~
Specify:		Add Clear

For PCH Residents

- Category: Select "Special Population"
- Risk Factor: Select "Special Population Personal Care Home Resident"
- **Response**: Select "Yes"
- **Start Date:** Enter date the vaccine was provided.
- **Reported date:** Will automatically populate to the current date
- Click the Add button and then click Save at the bottom of the screen

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* Category:	Special Population				~
* Risk Factor:	Special Population - Personal Care Home - Res	dent			~
* Additional Information:					
* Response:	Yes	Frequency:			~
Start Date:	2021 / 01 / 06	End Date:		1	
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