

## What is the Citywide Immunization Registry (CIR)?

The CIR is a computerized filing system that since 1996 has been keeping immunization records of people vaccinated in New York City (NYC). The CIR can help ensure that NYC residents receive all required immunizations and are protected from vaccine-preventable diseases. The CIR makes immunization records available to individuals, parents, legal guardians and custodians, health care providers, health plans, the Women, Infants, and Children (WIC) program, schools, and other agencies concerned with health.

The CIR contains immunization records for children 18 years of age and under. The CIR also stores immunization reports for people 19 years of age and over with consent from the patient. In partnership with the **NYC Healthy Homes Program**, using the CIR's Online Registry, providers may view lead test histories, report lead test results, and refer children with asthma living with pests for a home inspection.

## How can the CIR help you?

### Online Access for authorized read-only users:

- Quickly look up patients in the Web-based Online Registry to see which immunizations were given in the past and which immunizations are due now. This helps to reduce "missed opportunities" to immunize and avoid unnecessary immunizations.
- Generate an official, printed immunization record to give to a patient or parent to give to their provider for review. You can print out a Child & Adolescent Health Examination Form (CH205), early Intervention or WIC Medical Referral Form with immunizations already pre-completed.
- Create Reminder/Recall lists of patients due for immunizations.

"It's simple and  
easy to do!"

### To set up an Online Registry account:

- (1) First, **register** your facility with CIR to receive a **facility code** or look-up your code if you have forgotten it. Programs with multiple locations or sites need to register separately.
- (2) Next, complete the attached **Site Security Administrator Designation (Read-Only Access) Form** and **Security Administrator Confidentiality Statement**. **Fax both completed forms** to **(347) 396-2559**. You will receive Online Registry account set-up instructions by email. Additional users must sign a **User Confidentiality Statement**.
- (3) Review the attached **Online Registry Quickguide** for log-in instructions and record searching.
- (4) Call the CIR at **(347) 396-2400** if you are unable to find a record in the Online Registry.



### Immunization Record Access:

Individuals, parents, legal guardians, or custodians may get a free copy of their own or their child's immunization record from the NYC Department of Health and Mental Hygiene by calling the CIR at **(347) 396-2400**, completing a short application, and presenting a valid photo ID. This application is available online at [www.nyc.gov/health/cir](http://www.nyc.gov/health/cir) in the parent/guardian section.

The CIR record is an official immunization record that may be:

- (1) presented to a health care provider;
- (2) used for school, day care or camp entry, or WIC screening; or,
- (3) given to an employer for documentation of immunization history.

Links to online documents:

1. **Register with CIR:** <https://a816-healthpsi.nyc.gov/OnlineRegistration/dohmh/>
2. **Read-Only Access SSA forms, guide:** <http://www.nyc.gov/html/doh/downloads/pdf/cir/cir-read-only-access-forms-guide.pdf>
3. **User Confidentiality Statement:** <http://www.nyc.gov/html/doh/downloads/pdf/cir/user-confidentiality.pdf>

*In accordance with New York State Public Health Law 2168 and the NYC Health Code 11.11(d), information in the CIR is kept confidential and may not be disclosed except to protect the health of the individual or the health of others.*

## Site Security Administrator Designation Form (Read-Only Access)

To access the Online Registry, each health care facility or private practice needs to designate a **Site Security Administrator (User Manager)**. The CIR assigns a username to the Security Administrator, who can then set up additional user accounts for staff members at this site. If the Security Administrator is not the supervising physician, he/she needs to register under the license number of a supervising physician, physician assistant, or nurse practitioner. Steps for completing the form below:

1. Assign a Designated Security Administrator:
  - a. Print name and title of the designated Security Administrator.
  - b. Print name of facility and your facility code, which is the code you were given for reporting purposes. (If you do not have a code or if you have forgotten your code please visit [www.nyc.gov/health/cir](http://www.nyc.gov/health/cir) and click on the link "Register." Or go to: <<https://a816-healthpsi.nyc.gov/OnlineRegistration>>. You may also contact us by email at [cir@health.nyc.gov](mailto:cir@health.nyc.gov), or call **(347) 396-2400** for instructions.)
  - c. Print your facility address. Print your phone number, fax and email address. All items are required.
2. Print the name and title of the person in charge of the facility, such as Director, CEO, or physician in charge, who is authorizing the Site Security Administrator. The signature and license number of a supervising physician, physician's assistant, or nurse practitioner is required.
3. Once you have completed this form, mail or fax **both** this form, along with the attached signed **Security Administrator Confidentiality Statement for Online Access** to the CIR at the address below. Attach a copy of your facility letterhead. Letterhead is required to process your request.
4. Upon receipt of these forms, the CIR will contact the site by email to provide the Security Administrator with a username and a time-sensitive link to password set-up instructions.

**PLEASE PRINT:**

I hereby designate (Name) \_\_\_\_\_

(Title) \_\_\_\_\_ as Security Administrator for the following facility:

Facility Name \_\_\_\_\_ Facility Code \_\_\_\_\_

Address \_\_\_\_\_

Number and Street Name

Borough

State

ZIP

Phone (\_\_\_\_) \_\_\_\_\_ ext. \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

**Name and title of person authorizing Security Administrator:**

(Name) \_\_\_\_\_ (Title) \_\_\_\_\_

**Signature of person authorizing Security Administrator** \_\_\_\_\_

**Signature of Security Administrator Designee** \_\_\_\_\_

Supervising Physician's Name \_\_\_\_\_ License Number \_\_\_\_\_

**Supervising Physician's Signature** \_\_\_\_\_

**FOR OFFICIAL USE:**

Security Administrator

User ID \_\_\_\_\_

Password \_\_\_\_\_

## Site Security Administrator Confidentiality Statement for Access to the Online Registry

Please read this statement carefully. Make sure that you ask your Department of Health and Mental Hygiene Immunization Registry Security Administrator for clarification about anything you don't understand, then sign the Agreement. Refusal to sign the Agreement will result in immediate denial of access to Department of Health and Mental Hygiene records.

Everyone who has access to Department medical and personal records is required by law to safeguard the confidentiality of personal health and other information contained in these records (the "Confidential Information"). Unauthorized disclosure of Confidential Information is a violation of New York City Health Code Section 11.11 and state law, subject to civil and/or criminal prosecution, penalties, forfeitures and legal action. See Section 558(e) of the City Charter and Section 3.11 of the New York City Health Code. Former employees of the facility or of the health care provider must continue to comply with confidentiality requirements after leaving employment.

In the course of accessing an immunization or lead test record, or adding an immunization to the Online Registry, an authorized user **MAY NOT**:

1. Examine or read any document or computer record from the Online Registry containing confidential information, except on a "Need to Know" basis; that is, if required to do so in the course of official duties.
2. Remove from a job site or copy any document or computer record containing confidential information unless authorized to do so, and if required in the course of official duties.
3. Discuss the content of documents containing confidential information examined with any person unless both persons have authorization to do so.
4. Discriminate, abuse or take any adverse action with respect to a person to whom the confidential information pertains.
5. Create and distribute usernames and passwords for unauthorized users.
6. Reveal or share individual personal computer access identification or passwords with other persons, even if such persons are also authorized to have computer access.
7. Compile any aggregate data or statistics from the program database except as authorized by the director of the Immunization Registry and/or Lead Poisoning Prevention Program.
8. Contact a person who is the subject of any Department record except on official business, in the course of official duties.

**The above restrictions apply to both screen displays and printed data. Any printed patient record shall be treated as confidential medical data.**

### Agreement

I have read and understand the above statement and the attached protocol. I agree to keep strictly confidential all Confidential Information I receive from the records of the Department of Health and Mental Hygiene Online Registry in the course of my employment at \_\_\_\_\_. I understand fully the consequences to me if I disclose Confidential Information without necessary authorization. I have discussed, and will continue to discuss, with the Department of Health and Mental Hygiene Online Registry Security Administrator any questions I have about what is confidential or to whom I may reveal Confidential Information.

DATED: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**Mail or Fax to:**

Citywide Immunization Registry  
42-09 28<sup>th</sup> Street, 5<sup>th</sup> Fl., CN 21  
Long Island City, NY 11101-4132  
Phone (347) 396-2400/ Fax (347) 396-2559

PRINT NAME: \_\_\_\_\_

FACILITY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE (ext.): \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

## ONLINE REGISTRY ACCEPTABLE USE PROTOCOL

This Acceptable Use Protocol (AUP) is for use of the Online Registry (OR).

Access to the OR is provided by the Immunization Registry solely for the purpose of obtaining immunization information, obtaining lead test information, and adding immunization records to the Registry. The Registry should not be used in connection with any personal or non-Registry matters.

All users of the OR have the responsibility of using their access in a professional manner. Compliance with this AUP is mandatory.

Use of the OR for activities that are unacceptable under this AUP will result in removal of the user's access to the OR. The Citywide Immunization Registry and/or Lead Poisoning Prevention Program reserve the right to review violations on a case-by-case basis.

### **System Security Measures to be followed by all Security Administrators of the OR:**

- 1. The security of the Online Registry is of the highest priority. System security is essential for the effective and efficient operation of the system. It is the responsibility of the Security Administrator (and authorized users) to maintain the highest possible degree of system security. If a security problem is discovered, it should be reported by telephone to the Department of Health and Mental Hygiene Online Registry Security Administrator immediately.**
- 2. Passwords:**  
**Choose passwords that are not easy to guess or to find using a password decoding program. A combination of 8 or more characters, with at least one number and one upper case letter, should be selected.**
- 3. Keep the password confidential; do not write it down.**
- 4. Change passwords regularly (every 90 days is suggested).**
- 5. If a password has been lost, stolen, or has been otherwise obtained by another person, or if a user has any reason to believe that someone has obtained unauthorized access to the OR, it is the responsibility of the Security Administrator to immediately notify the Department of Health and Mental Hygiene Online Registry Security Administrator.**



# Online Registry QuickGuide

Phone: (347) 396-2400

[www.nyc.gov/health/cir](http://www.nyc.gov/health/cir)

Fax: (347) 396-2559

## Getting Connected

- **Register** with the Citywide Immunization Registry (CIR ) to obtain a **facility code** or retrieve your facility code if you have forgotten it at: <https://a816-healthpsi.nyc.gov/OnlineRegistration>.
- **Account set-up:** Complete the attached Online Registry Access forms and provide a valid email address. You will receive an email from [cir-reset@health.nyc.gov](mailto:cir-reset@health.nyc.gov) with your username and a time-sensitive link to password set-up instructions.
- **Log-in:** Go to [www.nyc.gov/health/cir](http://www.nyc.gov/health/cir) (Hint: For quick and easy access, bookmark this as a favorite.) Click on the Online Registry button (shown above left). Enter your **User Name** and **Password** in the Log On screen. Click on to get started. Follow the instructions marked with , and tips, marked with .
- Look for the navigation bar, shown below. Look at the available tabs on each screen.



**Search** allows you to search the CIR for an individual's immunization record. If you cannot find an individual, and believe the individual was born in NYC after 1995, please call the CIR for assistance, at **(347)396-2400**.

- **Search:** Fill in all four fields (first name, last name, date of birth and gender). Click "Continue." If you are unable to find an individual's record with this option, use the Advanced Search option.
- **Advanced Search:** To improve your chances of finding an individual's record, use the advanced search combinations in the Tip box. Type the requested additional information. Click "Continue."
- If you are still unable to find the individual's record, call the CIR at **(347)396-2400**.



**MyList** contains every record your facility has looked up and found. Click on an individual's name to quickly and easily find the record.

- **Search MyList:**
  - Type in the first few letters of the person's name to Search within **MyList**.
- **View MyList:**

You may choose the number of patients to view per page; jump to the Last Name by alphabet. **MyList** can be sorted by First Name, Last Name, Gender, Date of Birth (DOB), Date Last Accessed, and color-coded Status (green = up-to-date; red = past due; orange = due soon) by clicking on the small arrows under each column heading.

  - **To remove patients**, check the boxes next to the names, and click at the top or bottom of the column. (This will remove the individuals only from your view in **MyList**, not from the CIR.)



## Reports

**View Record** When a search is successful, the individual's immunization record and lead test history are displayed. Vaccine series are located in the left column. Vaccines administered are listed from left to right, and organized by date. The **Next Due** column to the right tells you if a series is complete or indicates the date the next vaccine in the series is due. Orange bubbles indicate that the reported dose is invalid. Click on the orange bubble for additional details. Clear bubbles indicate a note; they do not indicate that the dose is invalid.

(Reports continued on next page.)



- Click on the printer-friendly format icon: to print out a copy of the record in the “grid” format.
- **Printing Reports:**
  - **Provider Reports** You may choose the filtered report to print only valid immunizations or the unfiltered report for all immunizations reported with recommendations and comments. The Lead Test History is automatically printed unless unchecked.
  - **Public Report** This official report may be given to parents and legal guardians or custodians for school, the Women, Infants, and Children (WIC) program, camp, or day care. Only valid shots will be displayed. Recommendations and comments will not be displayed.
  - **Request Fax** Fill in the name and fax number (NYC area only) of the person to whom you are faxing the report, and click “Submit.” The person will receive the report in about 10 minutes.
  - **Pre-Completed Forms** Click on a form. The patient’s immunizations and basic identifying information, will be automatically filled in. Forms may be given to the parent/guardian to give to their provider to review.
    - **Forms currently available:**
      - Child & Adolescent Health Examination Form (CH205)
      - WIC Medical Referral Form for Infants and Children
      - Early Intervention Program Referral Form (EIP-16)



**Tools** contain materials and features useful for your practice.

- Immunization Schedule
- Lead References



**Recall/Reminder** allows you to identify patients on your **MyList** who may be due immunizations. This feature allows you to print letters and address labels, or a list of addresses and phone numbers. You may produce a recall/reminder list based on **MyList** or customized options.

View the online [Coverage/Reminder/Recall Guide](#) for details.



**Set-Up** contains set-up features useful for the user or the practice.

- **Default Settings** You may choose settings to always start with a Simple or Advanced Search. Choose settings for **MyList** to view between 10 and “all” patients. You may choose how you want your list sorted, such as by Last Name.

**Change Password**

➤ **How to request to Reset your Password**

- If you forget your password and/or are locked out, please contact your Site Security Administrator (SSA). Your SSA will be able to view your account and send you a link via email to reset your password. **You must provide a valid email address.** The reset email will come from [cir-reset@health.nyc.gov](mailto:cir-reset@health.nyc.gov) and will expire after **4 days**.
- Site Security Administrators need to contact the DOHMH Security Administrator at: [cir-reset@health.nyc.gov](mailto:cir-reset@health.nyc.gov).

Passwords must be at least 8 characters long, contain at least one number, and have at least one upper-case letter:

1. Uppercase alphabet characters (A-Z)
  2. Lowercase alphabet characters (a-z)
  3. Arabic numerals (0-9).
- Example: reG1stry*

(Set-Up continued on next page.)



- **Manage Users** Available to Security Administrators only. Use this function to create, modify and inactivate user accounts and reset passwords for each user at your site. **A valid email address is required to complete the account set-up.** Detailed instructions are located on the SSA's **Manage Users** screen.
- **Passwords must not be shared!** *Each individual in a facility is required to have a separate password. Before assigning an ID to a new user, make sure he or she completes and signs a [User Confidentiality Statement](#), which you must keep on file. Do not send a copy to the CIR. (Go to [www.nyc.gov/health/cir](http://www.nyc.gov/health/cir), click "For Providers," then click "Online Registry Access & Reporting" for a copy of this statement.)*
- **Change My Contact Info** Notify CIR by phone, **(347) 396-2400**, or email [cir@health.nyc.gov](mailto:cir@health.nyc.gov).



**Help** is designed to assist you in using the Online Registry. Please refer to it if you have any questions, or call **(347) 396-2400**, Monday through Friday, 9 am to 5 pm to request additional support.

## **LogOut**

- ➔ Click on the LogOut button when you are not using the system. For security reasons, the system will automatically log you out if idle for more than 30 minutes.

Visit Us Online! [nyc.gov/health/cir](http://nyc.gov/health/cir)



**The Citywide Immunization Registry**

42-09 28<sup>th</sup> Street, 5<sup>th</sup> Fl., CN 21, L.I.C, NY 11101-4132

Phone (347) 396-2400 Fax (347) 396-2559

Email: [cir@health.nyc.gov](mailto:cir@health.nyc.gov)