
The Adult Inpatient COVID-19 Vaccine Immunization Screening Form is designed to guide staff through the screening process of patients and the decision support to order a COVID-19 Vaccine. The form will be updated periodically per State and regulatory guidelines.

Documenting in the Adult Inpatient Screening COVID-19 Vaccine Immunization Screening Form

As part of the patient intake process the **COVID-19 Vaccine Immunization Screening Form** is included within some intake forms that are used to document upon patient arrival. The workflow begins with the intake form open for documentation.

Complete the form as guided.

➤ Patient Type

- **NLH Employee, SHARE with HR/WH:** Used for NLH Employees who agree to share vaccine record with NLH Human Resources/Work Health. If selected, enter the **Employee #** in the box indicated.
 - Ensure patient (who in this case is an NLH employee) intends for their information to be sent to HR/WH
- **NLH Employee, Do NOT Share with HR/WH:** Used for NLH Employed who decline sharing of vaccination with NLH Human Resources/Work Health.
- **Not NLH Employee. Patient, Hospital:** Used for patients in Hospital.
- **Not NLH Employee. Patient, Physician Office/WIC/outpatient:** Used for patients in Mass Vaccination, Physician Office/WIC/Outpatient.

➤ Vaccine Acceptance

- Indicate if the patient accepts, declines, or unable to screen.

➤ Patient Attestation-Risk Factors for severe Covid-19 Disease

- Yes or No option. Selecting Yes allows screening to continue, No stops further steps.

➤ Patient Age

- If patient is age greater than 18 years, the **Age 18 years or older** option should be selected to open options for next documentation steps.

Select age range:	24 years
	<input checked="" type="radio"/> Age 18 years or older

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➤ Has the patient received a (current year) updated COVID-19 vaccine this season?

- COVID-19 vaccine season matches Influenza: September 1 – April 30. This is indicated on the top of the form.

Ask patient who is NLH employee for consent to share with NLH HR/Work Health. Indicate SHARE or Do NOT Share.
Selecting SHARE transmits vaccine record to Work Health.

For patients who are unable to be screened now, document 'Unable to Screen' to set reminder alert in 24 hr

Select age range: 14 years
 Age 18 years or older

NLH Employee, SHARE with HR/A/H
 NLH Employee, Do NOT Share with HR/A/H
 Not NLH Employee, Patient, Hospital
 Not NLH Employee, Patient, Physician Office/WIC/Outpatient

Vaccine accepted Unable to screen
 Vaccine declined Vaccine not available

Reason unable to screen:

Employee #

Check IMMUNIZATION record and with patient for history. COVID vaccine administrations charted within Cerner.
Last Charted Covid-19 Vaccination
No history of Covid-19 vaccination found.

NOTE: Refer to check IMMUNIZATION record and with patient for history. COVID vaccine administration charted within Cerner.

➤ Select any precautions or contraindications that apply.

- Select any precautions/conditions that apply.
 - If **None** is selected, the form continues to next section.
 - If any other choices are selected, **COVID-19 vaccination must be ordered by Provider.**

NOTE: Provider can assess dosing recommendations through the [Bug-Drug Guide](#).

➤ Immunocompromise Status

- Select the appropriate checkbox to indicate **Immunocompromise Status**.

NOTE: Based on documentation of last dose, timing of last dose given and immunocompromise status the Patient Vaccine Eligibility will show, and the Vaccine for the appropriate age will be selected.

➤ Patient Vaccine Eligibility

- Indicates if patient is eligible for the vaccine.
 - **Vaccine not due at this time**, this will stop the screening process and the form can be signed by clicking the green checkmark in the top left of the form.
 - **May offer the COVID vaccine**, the form continues to next section.
 - **Request Provider to assess history and order if indicated**, this will stop the screening process and the form can be signed by clicking the green checkmark in the top left of the form.

Vaccine not due at this time
 May offer covid vaccine
 Request Provider to assess history/order if indicated

➤ **COVID Vaccine dosing**

- COVID Vaccine auto-selects based on age if eligibility options are met: **May offer COVID vaccine** will appear selected.

➤ **Vaccination Information Statement (VIS)**

- Select VIS offered to the patient.

➤ **VIS Publication Date**

- Select appropriate option.

NOTE: The vaccine order will be placed automatically by a rule when the form is signed.

Additional automation associated with updated COVID-19 Inpatient screening

- Open chart alert: linked to screening form.
- After order is placed from form: a **CareCompass** alert reminds nursing staff to administer: 1 hour after ordered.
- If there is no current season COVID-19 vaccine found, **CareCompass** alert to screen.