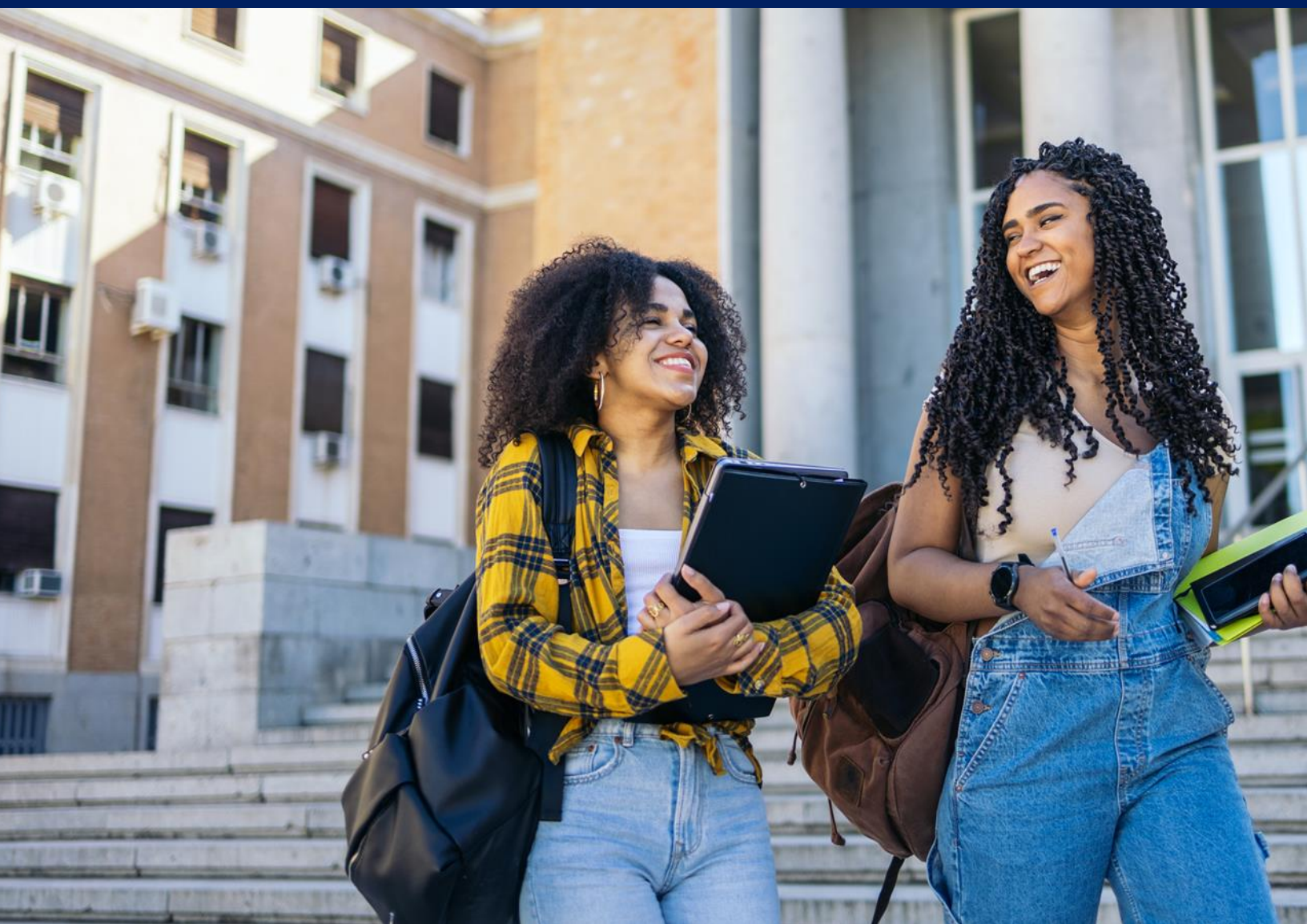




TEXAS
Health and Human
Services

Texas Department of State
Health Services

College Readiness Toolkit



Overview

Through the Adult Safety Net (ASN) Program, the Department of State Health Services (DSHS) has developed an immunization toolkit to aid universities and colleges in encouraging vaccines beyond mandatory college enrollment requirements.

This toolkit contains custom resources for Institutions to effectively promote vaccines among college students, including:

- A Letter Template
- Immunization print materials





Immunization Print Materials

DSHS offers a variety of free immunization materials such as posters, brochures, and activity books at immunizetexasorderform.com. Below is a list of suggested audience specific materials. Shipping is free unless universities request expedited shipping.

To Create an account and order materials, please follow the directions outlined in the **[How to Order Print Materials sheet](#)**.

- Stock # 11-13708 - A Lifetime Registry for Everyone Texas Immunization Registry (ImmTrac2) Brochure (English)
- Stock # 11-13708A - A Lifetime Registry for Everyone Texas Immunization Registry (ImmTrac2) Brochure (Spanish)
- Stock # 11-14202 - Adults Need Vaccine Too! Adult Safety Net (ASN) Program Brochure (English)
- Stock # 11-14202P - ASN Program Patient Poster (Bilingual)
- Stock # 11-16658 - Adult Safety Net (ASN) - Available Vaccines (English)
- Stock # F11-13366 - Texas Immunization Registry (ImmTrac2) Adult Consent Form (Bilingual)



Contact Information

If you have any questions or concerns, please contact the immunization program at immunizations.info@dshs.texas.gov

College Readiness Starts with Your Health: Take Charge Now!

DESCRIPTION

ASN has developed a customizable template letter designed to reach college-aged students eligible for the ASN Program vaccine. We recommend that institutions use this letter on their official letterhead to ensure it aligns with your branding. This versatile template is ideal for inclusion in new student packets, orientation materials, and other campus events or initiatives that communicate important information to students. It can also be adapted for email campaigns or blog posts. The headings and content provided are suggested frameworks. Feel free to edit or modify the language to best resonate with your audience and meet your specific needs.

LETTER TITLE OR EMAIL SUBJECT LINE:

College Readiness Starts with Your Health: Take Charge Now!

CONTENT

College is an incredible adventure packed with new opportunities, friendships, and unforgettable experiences. But before you dive in, it's crucial to gear up for success — and that includes your health! Now is the perfect time to take charge, make smart choices, and get prepared to stay strong throughout your college journey.

Did you know that germs love to spread in close quarters like dorms and classrooms? But don't worry — vaccines are your secret weapon! They provide powerful protection against preventable diseases, keeping you and your community safe and healthy. Investing in your health now not only helps you excel during college but also sets the foundation for responsible decision-making that lasts a lifetime.

You can help fight vaccine preventable diseases before they attack. Discover the essential vaccines recommended for those aged 19 and older:

<https://www.cdc.gov/vaccines/imz-schedules/adult-easyread.html>

Staying on top of your immunizations is an ongoing effort. Talk to your family or doctor about your immunization record and check if you have one with the Immunization Registry (ImmTrac2). If you're between 18 and 26, you'll need to re-consent to ImmTrac2 to keep your records current — otherwise, your childhood vaccinations could be removed from the registry. Keeping your immunization info updated not only protects you but also contributes to the health of your entire community.

Get Ready! Take charge now — visit immtrac.com for more info on ImmTrac2 and make sure you're ready to thrive in college and beyond!

Free Immunization Resources

What is the DSHS Immunization Publication Order Form?

DSHS Immunization has created materials to help educate the public on the importance of vaccines.

These materials are available for free using the publication order form on our online portal.

What is Available in the Order Form?

- Brochures
- Flyers
- Posters
- Vaccine Information Statements (VIS)
- Immunization Schedules
- Children and Teen Activity Books
- Refrigerator Magnets

How to Access the Order Form

1. Go to immunizetexasorderform.com.
2. Create an account by clicking “click here to register.”
3. After registering, your email becomes your username.
4. You can browse by page or use keywords to look for specific materials in the search field in the top-right corner, next to the cart icon.

How to Place an Order

Once you find the items you want to order, add them to your cart and proceed to checkout. DSHS will ship the materials free to the address provided unless you request expedited shipping.

Please note: Products have a limit on the amount you can order at one time. Please contact PIET@dshs.texas.org for orders that exceed the online limits. Submitting multiple orders to bypass the maximum limit will delay your order.



Having issues?

If you receive an error message, please provide the error ID number and a screenshot of the error along with a brief description. We will work with our vendor to fix your cart.

If you have issues ordering, please contact PIET@dshs.texas.gov and someone will help you.



Texas Department of State
Health Services

Texas Department of State Health Services
Immunizations Section
Stock # 11-16791 Rev. 09/2024

Adults Need Vaccines Too



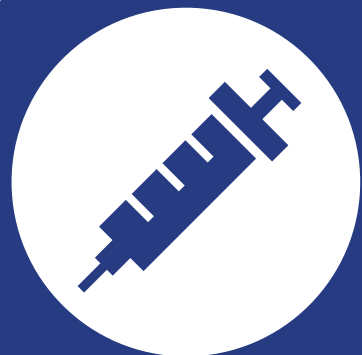
What is the ASN program?

The Adult Safety Net (ASN) program immunizes uninsured adults against vaccine-preventable diseases.



Who qualifies for the ASN program?

Individuals 19 years of age and older who do not have health insurance.



What vaccines are available?

Hepatitis A
Hepatitis B
Combination hepatitis A-hepatitis B
Measles, mumps, and rubella (MMR)
Meningococcal
Tetanus, diphtheria, and pertussis (Tdap)
Tetanus-diphtheria (Td)



Is there a cost for vaccines?

An administration fee of up to \$25.00 per vaccine may be charged.

What if I can't afford the administration fee?

You will not be denied vaccination if unable to pay.



How do I find an ASN Provider?

Scan this QR code to find providers near you.



Los adultos, también necesitan vacunas



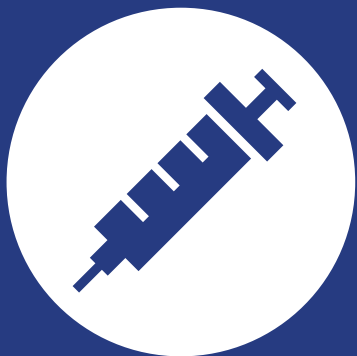
¿Que significa el programa ASN?

Es el programa red de seguridad para adultos (ASN por sus siglas en inglés) es un programa que ofrece vacunas para prevenir enfermedades prevenibles por medio de vacunas para adultos que no tienen seguro médico.



¿Quienes califican para ASN?

Personas mayores de 19 años que no tienen seguro médico.



¿Que vacunas están disponibles?

Hepatitis A
Hepatitis B
Hepatitis A-hepatitis B combinadas
Sarampión, paperas, y rubeola (MMR)
Meningococo
Tétanos, difteria, y tos ferina (Tdap)
Tétanos, difteria (Td)



¿Las vacunas tienen algun costo?

Hay un costo administrativo de \$25.00 por vacuna que se puede cobrar.

¿Que pasa si no puedo pagar el costo administrativo?

A nadie le serán negadas las vacunas si no puede pagar.



¿Cómo puedo encontrar un proveedor ASN?

Escanea el código QR para poder encontrar un proveedor cerca de tí.



What is the Texas Immunization Registry?

The Texas Immunization registry is a free service for Texans which stores immunization records in a secure and confidential centralized system (ImmTrac2).

Why should I enroll in the Registry?

Having accessible immunization records assists you in every stage of your life. You may need your immunization records for:

- Travel
- College entrance requirements
- Living abroad
- Military enlistment
- Employment, mainly health and safety fields
- When changing doctors
- Verifying which vaccines you have received and what vaccines are due

Texas Immunization Registry (ImmTrac2)

Contact Us:



800-252-9152



immtrac.com



ImmTrac2@dshs.texas.gov



Texas Department of
State Health Services
Immunizations Section
MC-1946, P.O. Box 149347
Austin, TX 78714



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Texas Department of State Health Services
Immunizations Section

Stock No 11-13708
Rev. 11/2024



A Lifetime Registry

TAKE CHARGE OF
YOUR RECORDS

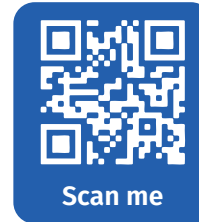
What are benefits of the Registry?

- Vaccine records are stored in one place
- Records are only accessible by authorized health care providers and yourself
- Schools and universities can verify your vaccine records
- It is a free, secure and confidential service



How do I sign up for the Registry?

Scan the QR code or visit dshs.texas.gov/public/forms. Send the completed and signed form to your authorized Public Health Region, Local Health Department, or the Texas Immunization Registry.



If your records were stored in the registry as a child you must complete the ImmTrac2 Adult Consent form (F11-13366) between 18 and 26 years of age to keep childhood vaccinations in the registry. If this form is not completed before you turn 26, your childhood records will be deleted.

How do I request a copy of my official immunization history?

To request a copy of your official immunization record:

- Scan the QR code, complete the ImmTrac2 Authorization to Release Official Immunization History form (F11-11406).
- Send your completed and signed authorization to your local Public Health Region, Local Health Department, or email to the Texas Immunization Registry at immtrac2@dshs.texas.gov
- You can also mail completed forms to:
Immunization Section,
Department of State Health Services
ImmTrac2 (MC 1946)
P.O. Box 149347
Austin, TX 78714



Un registro de por vida para todos

Texas Immunization Registry (ImmTrac2)

Texas Immunization Registry (ImmTrac2)

Comunícate con nosotros:
Por Correo: Texas Department
of State Health Services
Immunizations
MC-1946, P.O. Box 149347
Austin, TX 78714-9347

Sitio web en inglés:
www.ImmTrac.com
Correo electrónico:
ImmTrac2@dshs.texas.gov
Teléfono: (800) 252-9152



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Texas Department of State
Health Services

Stock No. 11-13708A
Rev. 07/2021



¿Qué es el Texas Immunization Registry?

El Departamento Estatal de Servicios de Salud (DSHS) de Texas administra el Texas Immunization Registry, un servicio gratuito que permite a todos los texanos guardar su historial de inmunizaciones en un sistema centralizado confidencial, llamado ImmTrac2.

¿Qué debo saber acerca del registro?

- ◆ Todos los registros de tus vacunas se guardan en un solo lugar.
- ◆ Los registros solo son accesibles para los proveedores de atención médica autorizados y para ti mismo (no para tus padres).
- ◆ Las escuelas y universidades podrán verificar tu historial de vacunación.
- ◆ Es un servicio gratuito, seguro y confidencial.



¿Por qué me conviene inscribirme en el registro?

Es posible que necesites tus registros de vacunación para:

- ◆ Viajar
- ◆ Cumplir los requisitos de ingreso a la universidad
- ◆ Vivir en el extranjero
- ◆ Enrolarte en el ejército
- ◆ Obtener empleo en los campos de la salud y la seguridad
- ◆ Cambiar de médico

Tener a mano tus registros de vacunación te ayudará siempre, ya que las vacunas se recomiendan a lo largo de la vida.

¿Cómo me inscribo en el registro?

Las leyes estatales de Texas requieren de tu consentimiento por escrito para poder guardar tu información en el registro. El formulario de consentimiento es fácil y rápido de llenar; tienes que hacerlo tú, no tus padres.

- ◆ Visita www.ImmTrac.com para descargar y llenar el consentimiento ImmTrac2 Consentimiento para Adultos (F11-13366, ImmTrac2 Adult Consent Form en inglés).
- ◆ Envía el consentimiento llenado y firmado a la región de salud pública autorizada, al departamento de salud local o al registro de inmunizaciones de Texas.

Si tu historial de vacunación se guardó en el registro cuando eras niño, tienes que llenar el consentimiento ImmTrac2 Consentimiento para Adultos (F11-13366, ImmTrac2 Adult Consent Form en inglés) cuando tengas entre 18 y 26 años de edad para que se conserven en el registro. Si no llenas el formulario antes de cumplir 26 años, tus registros infantiles se borrarán del sistema.



¿Cómo solicito una copia de mi historial de vacunación oficial?

Para solicitar una copia de tu historial de vacunación oficial:

- ◆ Visita www.ImmTrac.com para descargar y llenar el formulario ImmAutorización para dar a conocer el Historial Oficial de las Vacunas (F11-11406, Authorization to Release Official Immunization History en inglés).
- ◆ Envía este formulario llenado y firmado a la región de salud pública autorizada, al departamento de salud local o al registro de inmunizaciones de Texas.

Para más información, visita
ImmTrac.com



ADULT SAFETY NET

Adults Need Vaccines Too

Texas Department of State Health Services

Immunizations Section

800-252-9152

ASNinfo@dshs.texas.gov



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**Texas Department of State
Health Services**

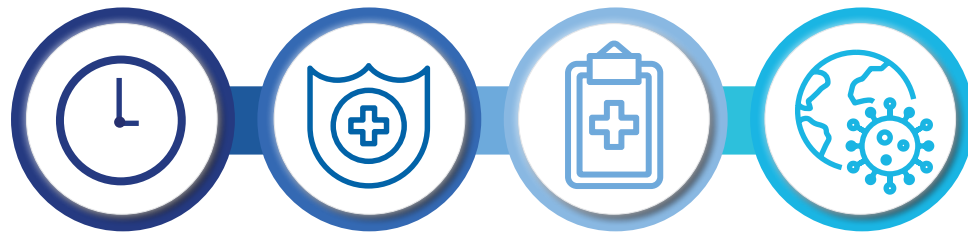
Texas Department of State Health Services
Immunizations Section
Stock # 11-14202 Rev. 11/2024

What is the Adult Safety Net (ASN) program?

Texas Department of State Health Service (DSHS) Immunization Section created the ASN program to help uninsured adults access vaccination services in Texas. Increases in immunization coverage levels have improved the health of Texans.

The ASN program supplies publicly purchased vaccines to enrolled providers to vaccinate uninsured adults 19 years and older. The ASN program also allows adults to receive vaccines on time in their medical homes.

Why do adults need vaccines?



Immunity
fades over
time

Adults are
more at-risk
of serious
disease caused
by infections
as they age

Adults need
vaccines to
stay healthy

Vaccinating
helps stop
vaccine-
preventable
diseases

Who can get an ASN vaccine?

- Adults aged 19 years and older who are uninsured.

What vaccines are offered in the ASN program?

The ASN program offers the following vaccines:

- Hepatitis A (Hep A)
- Hepatitis B (Hep B)
- Hepatitis A and Hepatitis B (Hep A – Hep B) combination
- Measles, mumps, and rubella (MMR)
- Meningococcal
- Tetanus, diphtheria, and pertussis (Tdap)
- Tetanus-diphtheria (Td)

* ASN program vaccines change based on recommendations by the Advisory Committee on Immunization Practices (ACIP) and the DSHS Immunization Section.

Visit dshs.texas.gov/immunizations/providers for more information.





Adult Safety Net (ASN) - Available Vaccines

Adult Vaccines				
Vaccine	Brand Name	Presentation	NDC	Pack Size
COVID-19	Moderna	SYR	80777-0110-93	10 pack
	Pfizer	SYR	00069-2432-10	10 pack
	Novavax	SYR	80631-0107-10	10 pack
Hep A Adult	Vaqta	SYR	00006-4096-02	10 pack
	Havrix	SYR	58160-0826-52	10 pack
Hep A/B Adult	Twinrix	SYR	58160-0815-52	10 pack
Hep B Adult	Engerix-B	SDV	58160-0821-11	10 pack
		SYR	58160-0821-52	10 pack
	Recombivax HB	SYR	00006-4094-02	10 pack
MMR Adult	MMR II	SDV	00006-4681-00	10 pack
	Priorix	SYR	58160-0824-15	10 pack
MCV4 Adult	Menveo	SDV	58160-0827-30	10 pack
	MenQuadfi	SDV	49281-0590-10	10 pack
Td Adult	TD Grifols	SDV	13533-0131-01	10 pack
	Tenivac	SDV	49281-0215-10	10 pack
		SYR	49281-0215-15	10 pack
Tdap Adult	Adacel	SDV	49281-0400-10	10 pack
		SYR	49281-0400-20	5 pack
	Boostrix	SYR	58160-0842-52	10 pack

SDV: Single Dose Vial

SYR: Pre-filled Syringe

MDV: Multi Dose Vial



Texas Department of State
Health Services

Texas Immunization Registry (ImmTrac2)

Adult Consent Form



First Name _____ Middle Name _____ Last Name _____
Date of Birth (mm/dd/yyyy) _____ Gender: ☐ Male ☐ Female Telephone _____ Email address _____

Address _____ Apartment # / Building # _____

City _____ State _____ Zip Code _____ County _____

Mother's First Name _____ Mother's Maiden Name _____

Race (select all that apply)			Ethnicity (select only one)
<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Asian	<input type="checkbox"/> Black or African-American	<input type="checkbox"/> Hispanic or Latino
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	<input type="checkbox"/> White	<input type="checkbox"/> Other Race	<input type="checkbox"/> Not Hispanic or Latino
<input type="checkbox"/> Recipient Refused			<input type="checkbox"/> Other

The Texas Immunization Registry (ImmTrac2) is a free service of the Texas Department of State Health Services (DSHS). The Texas Immunization Registry is a secure and confidential service that consolidates and stores your immunization records. With your consent, your immunization information will be included in the Texas Immunization Registry. Doctors, public health departments, schools, and other authorized professionals can access your immunization history to ensure that important vaccines are not missed. Visit Texas Health and Safety Code Sec. 161.007 (d) at statutes.capitol.texas.gov/Docs/HS/htm/HS.161.htm#161.007 for more information.

Consent for Registration and Release of Immunization Records to Authorized Persons / Entities

I understand that, by granting the consent below, I am authorizing release of my immunization information to DSHS and I further understand that DSHS will include this information in the Texas Immunization Registry. Once in the Texas Immunization Registry, my immunization information may be accessed by: a Texas physician, or other health care provider legally authorized to administer vaccines, for treatment of the individual as a patient; a Texas school in which the individual is enrolled; a Texas public health district or local health department, for public health purposes within their areas of jurisdiction; a state agency having legal custody of the individual; a payor, currently authorized by the Texas Department of Insurance to operate in Texas for immunization records relating to the specific individual covered under the payor's policy. I understand that I may withdraw this consent at any time by submitting a completed Withdrawal of Consent Form in writing to the Texas Department of State Health Services, Texas Immunization Registry.

State law permits the inclusion of immunization records for First Responders and their immediate family members in the Texas Immunization Registry. A "First Responder" is defined as a public safety employee or volunteer whose duties include responding rapidly to an emergency. An "immediate family member" is defined as a parent, spouse, child, or sibling who resides in the same household as the First Responder. Visit Texas Health and Safety Code Sec. 161.00705 at statutes.capitol.texas.gov/Docs/HS/htm/HS.161.htm#161.00705 for more information.

Please mark the appropriate box to indicate whether you are a **First Responder** or an **Immediate Family Member**.

☐ I am a **FIRST RESPONDER**. ☐ I am an **IMMEDIATE FAMILY MEMBER (older than 18 years of age) of a First Responder**.

By my signature below, I GRANT consent for registration. I wish to INCLUDE my information in the Texas Immunization Registry.
Individual (or individual's legally authorized representative):

Printed Name _____ Signature _____ Date _____

Privacy Notification: With few exceptions, you have the right to request and be informed about information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. Visit dshs.state.tx.us/sites/default/files/hipaa/docs/DSHS-NPP-English-5-1-2022.pdf for more information on Privacy Notification. (Reference: Government Code, Section 552.021, 552.023, 559.003, and 559.004)

PROVIDERS REGISTERED WITH the Texas Immunization Registry: Please enter client information in the Texas Immunization Registry and affirm that consent has been granted. **DO NOT** fax to the Texas Immunization Registry. **Retain this form in your client's record.**

Questions? Tel: 800-252-9152 • Fax: 512-776-7790 • dshs.texas.gov/immunizations
Texas Department of State Health Services • Immunization Section • Texas Immunization Registry – MC 1946 • P. O. Box 149347 • Austin, TX 78714-9347



Texas Department of State
Health Services

Registro de Inmunización de Texas (ImmTrac2) Consentimiento para Adultos



Primer nombre _____ Segundo nombre _____ Apellido _____
_____/_____/_____
Fecha de nacimiento (mm/dd/aaaa) Sexo: ☐ Masculino ☐ Femenino Teléfono _____ Correo electrónico _____

Dirección _____ Núm. de apartamento o edificio _____
Ciudad _____ Estado _____ Código postal _____ Condado _____

Nombre de la madre _____ Apellido de soltera _____

Raza (seleccione todos los que correspondan):			Grupo étnico (seleccione solo una):
<input type="checkbox"/> Indio americano o nativo de Alaska	<input type="checkbox"/> Asiático	<input type="checkbox"/> Negro o afroamericano	<input type="checkbox"/> Hispanico o latino
<input type="checkbox"/> Nativo de Hawái o de otra isla del Pacífico	<input type="checkbox"/> Blanco	<input type="checkbox"/> Otro	<input type="checkbox"/> No hispano o latino
<input type="checkbox"/> Se negó a contestar			<input type="checkbox"/> Otro

El Registro de Inmunización de Texas (ImmTrac2) es un servicio gratuito del Departamento Estatal de Servicios de Salud (DSHS) de Texas. Se trata de un servicio seguro y confidencial que consolida los registros de vacunación. Al darnos usted su consentimiento, los datos sobre sus vacunas se incluirán en el Registro de Inmunización de Texas. Médicos, departamentos de salud pública, escuelas y otros profesionales autorizados pueden tener acceso al historial de vacunación de su para verificar que no falten vacunas importantes. Consulte la sección 161.007 (d) del Código de Salud y Seguridad de Texas en statutes.capitol.texas.gov/Docs/HS/htm/HS.161.htm#161.007 para más información.

Consentimiento para el registro y para divulgar los registros de inmunización a las personas o entidades autorizadas
Entiendo que, al dar aquí mi consentimiento, autorizo la divulgación de mis datos de vacunación al DSHS, y entiendo además que el DSHS incluirá esta información en el Registro de Inmunización de Texas. Una vez que la información sobre mis vacunas esté en el Registro de Inmunización de Texas, las siguientes entidades tendrán, por ley, acceso a ella: un médico u otro proveedor de salud de Texas legalmente autorizado para administrar vacunas, como parte del tratamiento que yo reciba como paciente; cualquier escuela de Texas en la que yo esté inscrito; un distrito de salud pública o departamento de salud local de Texas, por razones de salud pública, dentro de sus zonas de jurisdicción; cualquier entidad estatal que tenga custodia sobre mí; cualquier pagador autorizado por el Departamento de Seguros de Texas para operar en Texas lo relacionado con mi cobertura con una póliza de dicho pagador. Entiendo que puedo retirar este consentimiento en cualquier momento, llenando y enviando el formulario Withdrawal of Consent al Texas Immunization Registry, Texas Department of State Health Services.

La ley estatal permite la inclusión de los registros de vacunación de los socorristas y sus familiares directos. Se define como “socorrista” al empleado de la seguridad pública o voluntario entre cuyas funciones está responder rápidamente a una emergencia. Se define como “familiar directo” a los padres, cónyuges, hijos o hermanos que viven en el mismo hogar que el socorrista. Consulte la sección 161.00705 del Código de Salud y Seguridad de Texas en statutes.capitol.texas.gov/Docs/HS/htm/HS.161.htm#161.00705 para más información.

Marque la casilla correspondiente para indicar si es usted es un socorrista o un familiar directo de un socorrista.
☐ Soy un SOCORRISTA. ☐ Soy un FAMILIAR DIRECTO (mayor de 18 años) de un socorrista.

Con mi firma a continuación, DOY mi consentimiento para el registro. Deseo INCLUIR mis datos en el Registro de Inmunización de Texas.
La persona (o su representante legalmente autorizado): _____
Nombre escrito a mano
Fecha _____ Firma _____

Aviso de confidencialidad. Con ciertas excepciones, usted tiene derecho a pedir y a ser informado sobre los datos que el estado de Texas recaba sobre usted. Usted tiene derecho a recibir y revisar la información si así lo pide. También tiene derecho a pedir que la dependencia estatal corrija cualquier información que se determine que es incorrecta. Consulte el sitio dshs.texas.gov/sites/default/files/hipaa/docs/DSHS-NPP-Spanish-5-1-2022.pdf para más información sobre el aviso de confidencialidad. (Fuente: Código gubernamental, secciones 552.021, 552.023, 559.003 y 559.004)

PROVIDERS REGISTERED WITH the Texas Immunization Registry: Please enter client information in the Texas Immunization Registry and affirm that consent has been granted. **DO NOT** fax to the Texas Immunization Registry. **Retain this form in your client's record.**

Questions? Tel: 800-252-9152 • Fax: 512-776-7790 • dshs.texas.gov/immunizations
Texas Department of State Health Services • Immunization Section • Texas Immunization Registry – MC 1946 • P. O. Box 149347 • Austin, TX 78714-9347

Texas Department of State Health Services
Immunization Section
Stock No. F11-13366
Revised 09/2024