

TEXAS Health and Human Services



Texas Department of State Health Services

Reminder/Recall Report

Texas Department of State Health Services Immunization Section

Introduction



Training Objectives

- Discuss access levels in ImmTrac2 for school nurses,
- Demonstrate how to use filters and generate a Reminder/Recall report.
- Demonstrate how to generate a custom Reminder/Recall letter.



Agenda

- Special Notice for School Nurses
- Overview
- Using Filters to Select Clients for the Report
- Selecting an Output Option
- Creating Custom Reminder/Recall Letters



Special Notice for School Nurses



Generated Reports in ImmTrac2 Require "Full Access Provider" Privileges







Registered Nurses and Licensed Vocational Nurses: You Can Apply to be a Full-Access Provider

 If you are a "View Only Non-Provider" (see below) and an APRN, RN, or LVN at your school, you can apply to upgrade your access to Full-Access Provider.



TEXAS Health and Human Services

Here's How You Can Apply to be a Full-Access Provider!

- Email <u>ImmTrac2@dshs.texas.gov</u> with the subject line of SCHOOL NURSE and the name of your school.
- In the body of the email include your:
 - First and Last Name,
 - ImmTrac2 Org Code and Username,
 - Texas Nurses License Number, and
 - Email address
- You will receive an email response when your request has been processed.



Nurse Licenses

- Your Texas Nurse License can be an:
 - Advanced Practice Nurse (APRN),
 - Registered Nurse (RN), or
 - Licensed Vocational Nurse (LVN)
- Your license must be current and registered in Texas, which we will verify.



Full-Access Providers Can

- Search for clients (students) in your organization,
- Add/Edit client records,
- Add immunization records,
- Run many more reports, and
- Create school lists



Overview



Overview of the Reminder/Recall Report

- 1. Filters in the report are used to select clients
- 2. Output can be:
 - Preformatted reminder letters,
 - Reminder postcards,
 - Mailing labels,
 - A client list,
 - A spreadsheet, or
 - A custom letter



Using Filters to Select Clients for the Report



Before You Begin

- For clients to be included in the report, in their Organization Information tab:
 - Their client status must be set to "Active".
 - Their "Allow Reminder and Recall Contact" flag must be "Yes".
 - Note "Last Notice" field for last Reminder/Recall sent to client.

Organization In	formation 🔺			
[back to top]				
Status	ACTIVE	~	Date of Death	
Provider- PCP		~	Allow Reminder and Recall Contact?	Yes 🗸
* Tracking Schedule	ACIP 🗸		Last Notice	
Client Identifiers				
Remove Identifier		Client Identifier	r	Primary
No Client Identifiers	have been added for this client.			
Add Client Identifie	er			
Client	t Identifier		Add Cl	ient Identifier



Good Address Required

- "No viable address" box in Address tab of client record must not be checked.
- The client must have a complete address.
- Not on this screen clients must have an immunization by this organization.





To Begin, (1) Select Generate Report (2) Reminder/Recall Report

Reports generate report scrieduled report Maintenance manage clinicians	<u>Clients and Immunization Count by</u> Organization	Clients and Immunization Count by Organization report displays the number of unique clients that received a dose and total number of doses administered by an organization in a specified time period.	<u>Status</u>
manage schools Admin Support manufacturer listing trade name listing	CoCASA Extract	The CoCASA Extract will allow users to create an extract for their provider organization that can be used for CoCASA reporting. This extract will be a tab delimited text file that can be imported into the CoCASA application.	<u>Status</u>
vaccine group listing vaccine listing vaccine relationships Manage My Account edit my user account	Immunization Coverage Rate Report.	The Immunization Coverage Rate Report provides an analysis of an organization's immunization coverage rates. The coverage rate is defined as the percent of provider's clients whose recommended vaccine series are completed.	<u>Status</u>
change my password	Immunization History Report	The Immunization History Report allows users to compile the immunization history for a group of selected clients.	<u>Status</u>
	<u>Manage Ad hoc Template</u>	The Manage Ad hoc Template allows the capability to generate, run, and save ad-hoc user reports to a user profile.	<u>Status</u>
	Reminder/Recall Custom Letters	The Reminder/Recall Custom Letters allow ImmTrac2 users to create and store up to three custom letters to be used for reminder and recall notices.	
	Reminder/Recall Report 2	The Reminder/Recall Report generates reminder and recall notices, which include letters, mailing labels, and client listings.	<u>Status</u>

Create and Save a Criteria List

- Enter the Request Criteria Name if you want to save your selections, or
- Select a previous criteria list you have saved, or
- Just leave this option blank

Texas Department of State

Health Services

Create New List			
Enter new Reminder Recall Request Criteria			List Name
Use a previous Reminder Recall Request Criteria	Please select an option	×	

18

Indicate the Tracking Schedule

- Use tracking schedule associated with each client, or
- Use the tracking schedule selected for ALL clients (ACIP)

	Indicate the Tracking Schedule
--	--------------------------------

Use Tracking Schedule Associated with Each Client

Use Tracking Schedule Selected for All Clients

ACIP	
------	--

V



Select Vaccine Groups to Filter

- Select which vaccines to <u>filter</u> on, or filter on all vaccines.
- Example: DTaP, Polio, MMR, HiB, HepB, Varicella, & Pneumococcal. The report returns all patients missing at least one dose from the vaccine groups you selected.
- Select to filter by vaccines due now, past due, or both.

 Use Vaccine Groups Selected Pertussis Plague PneumoPoly 23 Rabies Regeneron-DosePk Regeneron-IgG1 Relenza Remdesivir Rotavirus Rubella Molio MMR Hib HepB Varicella PneumoConjugate 			
O Marriana Dua Nava	Use Vaccine Groups Selected	Pertussis Plague PneumoPoly 23 Rabies Regeneron-DosePk Regeneron-IgG1 Relenza Remdesivir Rotavirus Rubella	e
O vaccines Due Now	Vaccines Due Now		



Choice to Use Subpotent Vaccinations

- If checked, subpotent vaccinations count as vaccinations
- Examples of subpotent vaccinations:
 - The full volume of the dose was not administered, or
 - The vaccine experienced a cold chain break, or
 - The vaccine was recalled by the manufacturer





Schools Can Be a Filter

Use the drop-down box to filter by a school if desired.

-Select the Sch	ool & Primary Care Provider			
School		v	Provider (PCP)	•



1. Select "Manage Schools" in Menu Bar

The "manage schools" link is under Maintenance.



Texas Department of State Health Services

Schools manage list find student check school report Reports generate report scheduled report Maintenance manage clinicians manage schools

2. Then Create a School

• Enter school name and select Save.

|--|

School Name Pick a School	List All
Add School	
* School Name Pauls Pediatric Practice	Save
Street Address	Cancel
Other Address P.O. Box]
City State TX V]
Email]
Telephone () - Ext	24



3. Link the Client to a School

• Set in the Client Information tab of the client record.

Client Information

[back to top]

—* Race (select all that apply)-

American Indian or Alaska Native

🗆 Asian

Native Hawaiian or Other Pacific Islander

Black or African-American

White

Other Race

Recipient Refused

* Ethnicity Not Hispanic or Latino





4. In Reminder/Recall Report Select the School

• This will limit the report to clients who are associated with a particular school.

- Select the School & Primary Ca	re Provider	
School	Provider (PCP)	V



In Summary, to Use "School" as a Filter

- 1. First go to the Menu Bar on the Main ImmTrac2 page and select Manage Schools.
- 2. Add (create) a school.
- 3. In the Client Information tab of the client's record, select the school from a drop-down list. This links the client to the school.



Texas Department of State Health Services 4. In the Reminder/Recall report, select the school from the drop-down list of schools.

Selecting a Primary Care Provider





Set the Primary Care Provider in the Client Record

• The "**Provider**" is set in the Organization Information tab of the client record. This links the client to a provider for the report.





Additional Demographic Criteria

• Filter by city, zip code, county, language, vaccine eligibility, occupation, or High Risk/Exemptions

Enter Additional Demog	raphic Criteria	
City	Zip Code County V	
Language	✓ Vaccine Eligibility	~
Occupation	×	
High Risk/ Exemptions		~

rvices

and Human

Zip Code, City, and County

• Set in the Address Information tab of the client record.

Address Inform	ation 🔺				
[back to top]					
View Client Address	<u>s History</u>				
Last Updated 01/2	7/2022				
No Viable Address					
* Street Address	1000 Main Street		Phone I	Number -	
Other Address			Ex	tension	
P.O. BOX				E-Mail	
* Zip	78704 +4				
* City	AUSTIN	State TX 🗸	Country	UNITED STATES	~
* County	TRAVIS 🗸				31



High Risk/Exemptions

• Set in the Client Comment field at bottom of the client record.





Date Criteria

- Entering a Target Date Range includes clients with vaccines that are due, past due, or both within the target date range you select. If no target date is selected, current date is used.
- AND you have a choice of
 - Not entering any other date criteria, or
 - Further restriction by entering a Date of Birth Range, or
 - Further restriction by entering an Age Range of clients.

- Enter the Date Criteria					
	NOTE: If Target Date is blank, today's date will be used.				
Target Date Range	From	То			
Date of Birth Range	From	То			
○ Age Range					



Example of Date Criteria

1. Clients 24 to 35 months old AND

EXAS

ervices

Health Services

Due or past due on one or more specified imms 2. between 1/1/2019 and 1/1/2020 will be included.



Select Which Vaccine Groups to Display

- Use all vaccine groups, or
- Select specific vaccine groups to display.

 Use All Vaccine Groups 					
Use Vaccine Groups Selected				DTP/aP	
	Adeno			Polio	
	Amantadine			MMR	
	Anthrax			Hib	
	Bamlanivimab		Add	HepB	
	Baricitinib		Remove	Varicella	
	BCG			PneumoConjugate	
	Cholera				
	Dengue Fever				
	Diphtheria	-			



Select a Sorting Option

- You can choose how you want the report sorted.
- The default is to sort by last name.

Specify How to Sort the Report Data									
Sort 1 st By	Last Name	~	Ascending 🗸	Sort 3 rd By	~	×			
Sort 2 nd By	First Name	~	Ascending 🗸	Sort 4 th By	~	•			


Save and Generate

- Click "Generate" if the filter criteria doesn't need to be saved.
- Click "Save and Generate" to generate the report and save the filter criteria.
- Click "Cancel" to go back to the filter criteria.





Selecting an Output Option



Reminder Request Status

• To check if the data is ready to be reported, click the "Refresh" button until the status is 100%.





Report is Ready

• When the Status is 100%, the "Started" date/time becomes a hyperlink to the Process Summary and Output Options.



Texas Department of State Health Services

ervices

FEXAS Health and Human

Reminder Request Process Summary

 Client selection criteria are displayed. This is helpful in diagnosing any errors in the criteria.

organizatior	• user • role F Providers no/DE	ull Access
Reminde	r Request Process Summary	
Reminder	Request Criteria	
Step	Criteria Evaluated at this Step	Clients
1	Clients associated with	13742
2	Clients immunized by	13732
3	Clients that are active within and allow Reminder & Recall Contact. Additional criteria includes: Additional criteria includes: Client Age Range 24 Month to 35 Month; School is not specified; Provider is not specified;.	64
4	Clients that have a Valid Address. Additional criteria includes: • City is not specified; • Zip Code is not specified.	61
5	 Clients that meet the following criteria regarding vaccination status: Clients that are Due Now or Past Due for one or more vaccinations between 01/01/2019 to 01/01/2020; Use all vaccine groups; Use tracking schedule associated with each client. 	30
	Total Number of Clients Eligible for Reminder	30



Selection Criteria Display Example

Step	Criteria Evaluated at this Step	Clients
1	Clients associated with	13742
2	Clients immunized by	13732
3	Clients that are active within and allow Reminder & Recall Contact. Additional criteria includes: Client Age Range 24 Month to 35 Month;	64
	 Provider is not specified;. 	
4	Clients that have a Valid Address. Additional criteria includes: • City is not specified; • Zip Code is not specified.	61
5	Clients that meet the following criteria regarding vaccination status: Clients that are Due Now or Past Due for one or more vaccinations between 01/01/2019 to 01/01/2020;	30
	 Use tracking schedule associated with each client. 	
	Total Number of Clients Eligible for Reminde	42 30

TEXAS Health and Human Services

Preview Clients

• At the bottom of the page, you can click the Preview Clients button to preview the clients selected.

Last Notice Date Options

Preview Clients that will display on the Reminder Recall Report.	Preview Clients
Increment last notice date for all clients eligible for this reminder.	Increment Eligible
Increment last notice date for all clients immunized by Community Health Center Of Lubbock - Lubbock 2.	Increment Immunized
Return to the previous screen.	Cancel



Return to Reminder/Recall

XAS

rvices

Health Services

- The clients name, birth date, address, city, and zip are displayed.
- Click the "Return to Reminder Recall" button to return to the report.



Output Options

• Options: Letter, Card, Mailing Labels, Client Query Listing, Client Reminder/Recall Spreadsheet, and Custom Letter.

Reminder Request Output Options

Output	Description	Additional Input
Reminder Letter	Standard Reminder Letter.	Duplex Printing
		Report Name
		Free Text
		Please call us with any questions.
		1.
		Phone # 512-123-4567
Reminder Card	Standard Reminder Card (4x5).	Report Name
		Free Text
		1
		Phone #
Mailing Labels	Avery 5160 Mailing Labels.	Report Name
Client Query Listing	A list of clients based on the report criteria.	Report Name
Extract Client Data	Extract client data in XML format.	Report Name
Client Reminder/Recall Spreadsheet	Client demographics and vaccine due dates in spreadsheet format	Report Name
Pauls Custom Letter	Custom Letter.	Duplex Printing
	•	Report Name



Reminder Letters

 Use this option to send a form letter to clients eligible for the reminder, including their immunization history and imms due.



Reminder Letter – Reminder Request Status Screen

• Click the report name hyperlink to open the letters in a separate browser window.

Reminder Request St	atus					Refresh
Started	Completed	Status	Clients	Target From	Target To	Cancer
03/03/2022 09:41 AM	03/03/2022 09:42 /	AM 100 %	20	01/01/2019	01/01/2020	
Reminder Output Stat	US	Requested	Starte	d Comple	ted Status	
	1300	03/03/2022	03/03/20	03/03/20	122	
Letter 3-3-22	Reminder Letter	11:28 AM	11:28 A	M 11:28 A	M Ready	
Letter 3-3-22(Spanish)	Reminder Letter	03/03/2022 11:28 AM	03/03/20 11:28 A	022 03/03/20 M 11:28 A	M Ready	



Example of a Reminder Letter

Dear Parent/Guardian of Jack Sparrow,

Our records indicate that Jack Sparrow has received the following immunizations:

Immunization Record	l	Tracking Sche	dule: ACIP
Vaccine Group	Date Administered	Series	Vaccine
SARS-COV2	04/07/2021	1 of 2	COVID-19,mRNA,LNP-
	04/28/2021	2 of 2	COVID-19,mRNA,LNP-

Our records also show that Jack Sparrow may be due for the following immunizations. If Jack received these or other immunizations from another health care provider please call our office so that we can update Jack's record. Otherwise please take Jack to a health care provider to receive them.

Immunizations Due
Flu NOS
HepA, NOS
HepB, NOS
HPV, NOS
MCV4, NOS
MMR
Pfizer COVID-19 Vaccine
Polio, NOS
Tdap
Varicella

Please call us with any questions.

The number for our office is: 512-123-4567



Reminder Card

- Use "Reminder Card" to send a postcard to clients with immunizations due. No immunization history is listed.
- Verify that this doesn't violate your clinic's privacy policies before you use this option.





Reminder Card – Reminder Request Status Screen

• Click the report name hyperlink to open the cards in a separate browser window.

eminder Request St	atus						Can
Started	Completed	Status	Clients	Target From	Targ	et To	
<u>3/03/2022 09:41 AM</u>	03/03/2022 09:42 /	AM 100 %	20	01/01/2019	01/01	/2020	
Name	Туре	Requested	Starte	d Comple	eted !	Status	
(<u>Spanish)</u>	Reminder Card	03/03/2022 10:42 AM	03/03/20 10:42 A	22 03/03/2 M 10:42 /	022 \M	Ready	
Densieder Ored		02/02/2022	02/02/20	ດວ່ ດວມດວມວ	022		
Reminder Card	Reminder Card	10:42 AM	10:42 A	M 10:42 /	AM	Ready	



Mailing Labels

• Use the "Mailing Labels" option to print address labels to save time on addressing envelopes





Mailing Labels – Reminder Request Status Screen

• Click the report name hyperlink to open the labels in a separate browser window.

eminder Request St	atus					
Started	Completed	Status	Clients	Target From	Tai	rget To
/03/2022 09:41 AM	03/03/2022 09:42 /	AM 100 %	20	01/01/2019	01/	01/2020
eminder Output Stat	tus					
eminder Output Stat	tus	Deguaated	Starta	d Compl	atad	Status
Reminder Output Stat	tus Type	Requested	Starte	d Compl	eted	Status
eminder Output Stat Name Labels 3-3-22	tus Type Mailing Labels	Requested 03/03/2022 11:20 AM	Starte 03/03/20 11:20 A	d Compl 022 03/03/2 M 11:20	eted 2022 AM	Status Ready



Client Query Listing

 Use the "Client Query Listing" to generate a PDF of patients, their contact information, immunizations given, and immunizations needed. This helps when calling clients.





Client Query Listing – Reminder Request Status Screen

• Click the report name hyperlink to open the listing in a separate browser window.

Reminder Request St	atus					Refresh
Started	Completed	Status	Clients	Target From	Target To	
03/03/2022 09:41 AM	03/03/2022 09:42 A	M 100 %	20	01/01/2019	01/01/2020	
Reminder Output Stat	us					
Name	Туре	Requested	Started	d Complet	ted Status	
Listing - 3-3-22	Client List	03/03/2022 11:41 AM	03/03/20 11:41 A	22 03/03/20 M 11:41 A	22 M Ready	
Reminder Letter	Reminder Letter	03/03/2022 11:34 AM	03/03/20 11:34 A	22 03/03/20 M 11:34 A	22 Ready M	



Client Query Listing – Output

EXAS

ervices

Texas Department of State

Health Services

Report run on : 02/25/2	022	Client Qu	ery Listing		Page	1	of 225
Client Name (FML)		Phone Number	Address		City/State/Z	ZIP	
JACK SPARROW - 01/	01/1952	(512) 123-4567 1	201 ELM ST		AUSTIN, TX	7870	4-1234
				Tracking School	edule:	ACIP	
Vaccine	Immunizations Due	Immunizatio	n Dates				
DTP/aP	Complete	1) 07/21/2006	6 2) 08/19/2006	3) 05/23/2007	4) 06/04/2010		
HepA	Complete	1) 05/23/2007	7 2) 12/07/2007				
HepB	Complete	1) 05/17/2006	6 2) 07/12/2006	3) 12/04/2006			
Hib	Complete	1) 05/23/2007	2) 08/27/2007	3) 11/27/2007	4) 06/04/2010		
HPV	04/22/2019	1) 10/22/2018	3				
Influenza-seasnl	07/01/2021	1) 12/31/2007	2) 02/08/2008	3) 10/10/2008	4) 11/03/2009		
Meningo	05/17/2017						
MMR	Complete	1) 05/23/2007	2) 06/04/2010				
PneumoConjugate	Complete	1) 03/15/2007	2) 05/23/2007	3) 08/27/2007	4) 12/07/2007		
Polio	12/04/2010	1) 06/23/2006	6 (NV) 2) 07/21	2006 3) 08/19/	/2006 4)		
SARS-COV2	11/09/2021	1) 05/19/2021	2) 06/09/2021				
Td/Tdap	05/17/2017						
Varicella	Complete	1) 05/23/2007	2) 06/04/2010				

Client Reminder/Recall Spreadsheet

• This Excel report lists client demographic data in addition to vaccines due and recommended date for the shot.





Spreadsheet – Reminder Request Status Screen

• Click the report name hyperlink to open the spreadsheet in a separate browser window.

Reminder Request Status								
Started	Completed	Status	Clients	Target From	Target To			
03/03/2022 09:41 AM	03/03/2022 09:42 A	M 100 %	20	01/01/2019	01/01/2020			
Reminder Output Stat	us							
Name	Туре	Requested	Starte	d Comple	ted Status			
Spreadsheet 3-3-22	Spreadsheet	03/03/2022 12:02 PM	03/03/20 12:02 P	22 03/03/20 M 12:02 P	M Ready	57		



Spreadsheet – Output

• Lists TVFC PIN, client first and last name, date of birth, parent, address, city, state, zip, county, phone, & immunizations due and date recommended.

Spreadshee	et 3-3-22												Repo	rt Date: 03/03/202
Type: To and Fro Client Age I	Clients that m Date: Range 24 M	are Due Nov 01/01/2019 onth to 35 M	v or Past Due fo to 01/01/2020 onth	r one or more va	ccinations be	tween								
TXIIS ID:														
Organizatio	on Name:													
TVFC PIN:														
Client First	Client Last	Client Date	Parent/Guardian	Parent/Guardian	Client	Client	Client	Client	Client	Client	Client		Vaccine	Date
Name	Name	of Birth			Address 1	Address 2	City	State	Zip	County	Phone #	Client ID	Due	Recommended
	10053				1070 0 0TATE									10/00/00/0



Custom Letter

- Displays each of the saved custom letters created through the Manage Custom Letter screen.
- Described in the next section.





Last Notice Date Options

Last Notice Date Options

Preview Clients that will display on the Reminder Recall Report.	Preview Clients
Increment last notice date for all clients eligible for this reminder.	Increment Eligible
Increment last notice date for all clients immunized by Community Health Center Of Lubbock - Lubbock 2.	Increment Immunized
Return to the previous screen.	Cancel



Creating Custom Letters



Advantages of the Custom Reminder Letter

- More control.
- You can choose to not include the client's immunization history in the letter if you do not want to include it. This can be a security issue.



Click (1) Generate Report and Select (2) Reminder/Recall Custom Letters

Deporte		delimited text file that can be imported into the CoCASA application	oluluc
generate report scheduled report Data Exchange registration of intent exchange data	Immunization Coverage Rate Report	The Immunization Coverage Rate Report provides an analysis of an organization's immunization coverage rates. The coverage rate is defined as the percent of provider's clients whose recommended vaccine series are completed.	<u>Status</u>
check status manage data exchange vital data exchange job monitor	Immunization History Report	The Immunization History Report allows users to compile the immunization history for a group of selected clients.	<u>Statu:</u>
Maintenance manage clinicians manage schools	Manage Ad hoc Template	The Manage Ad hoc Template allows the capability to generate, run, and save ad-hoc user reports to a user profile.	<u>Statu</u>
Admin Support manufacturer listing ter code upload trade name listing vaccine group listing	Provider Level Report	The Provider Level Report allows a user to produce provider-specific reports (Provider Data Entry, Data Entry Compliance and Late Date Entry Detail) about aggregate transactions entered into ImmTrac2 for specified time periods.	<u>Statu</u>
vaccine group listing vaccine listing vaccine relationships trade name rules	Reminder/Recall Custom Letters	The Reminder/Recall Custom Letters allow ImmTrac2 users to create and store up to three custom letters to be used for reminder and recall notices.	
Manage My Account edit my user account	Reminder/Recall Report	The Reminder/Recall Report generates reminder and recall notices, which include letters, mailing labels, and client listings.	<u>Statu</u>



Select "New Custom Letter"

—Reminder/Recall Custom Letters





Fill Out the Template

	·
lient Address	
	Include a name with the client address. (In name)
	Include client address
alutation	
Enter a salutation	for the letter: To the
Incl	ude a name at the end of the salutation: Responsible person 🗸
aragraph 1	
First Part	
We care about	
Include a name	between the first and second parts of this paragraph: Client name
second Part	sending you this letter. Here's your child's immudization histopy
So mars any were	
mmunization History	_
	Include immunization history
aragraph 2	
	ecommended immunizations for your child:
and here are any n	econnerded initializations for your critic.
and here are any n	
and here are any n	
and here are any n	endations
and here are any r	endations
mmunization Recomm	endations Include immunization recommendations
and here are any n mmunization Recomm	endations Include immunization recommendations
and here are any n	endations Include immunization recommendations
and here are any n mmunization Recomm	endations Include immunization recommendations
and here are any n mmunization Recomm 'aragraph 3	endations Include immunization recommendations
and here are any n mmunization Recomm aragraph 3	endations Include immunization recommendations
and here are any n mmunization Recomm Paragraph 3 Closing Enter a closing for the	endations Include immunization recommendations I locations I locati
and here are any n mmunization Recomm aragraph 3 losing Enter a closing for the	endations endations Include immunization recommendations letter: If you have any questions, please call us! Include provider organization name in the closing
and here are any n mmunization Recomm aragraph 3 Closing Enter a closing for the	endations endations Include immunization recommendations letter: If you have any questions, please call us! Include provider organization name in the closing Include provider organization phone number in the closing
and here are any n mmunization Recomm Paragraph 3 Closing Enter a closing for the lame and save the cus	endations Include immunization recommendations Include immunization recommendations Include provider organization name in the closing Include provider organization phone number in the closing Include p
and here are any n mmunization Recomm aragraph 3 Closing Enter a closing for the Name the custor	endations endations Include immunization recommendations Include immunization recommendations Include provider organization name in the closing Include provider organization phone number in the closing Include phone number in the closing Includ
and here are any n nmunization Recomm aragraph 3 losing Enter a closing for the ame and save the cus Name the custor	endations endations Include immunization recommendations e letter: If you have any questions, please call us! e letter: If you have any questions, please call us! i Include provider organization name in the closing i Include provider organization phone number in the closing tom letter m letter Pauls Custom Letter Save Cancel



Top Margin and Client Address

- Top Margin. From the drop-down list provided, choose the number of blank lines at the top of the letter. These blank spaces will leave room for your office letterhead. This field will default to 3.
- **Client Address**. Check the box to include the client's address at the top of the letter.

	Number of blank lines at the top of the letter: 3	
Client Address -		
	Include a name with the client address: (no name)	
	Include client address	66



Texas Department of Stat

Health Services

Salutation

rvices

Health Services

- Enter a greeting in the text box to begin the letter. For example, "To the" selected, the name of the client will show up after the salutation.
- If "Responsible Person" is chosen, the letter will read <salutation> Parent/Guardian of <client name>. For example, "To the Parent/Guardian of Peggy Sue."



Paragraph 1 First Part, Name, and Second Part

- Paragraph 1 First Part. Enter desired text, up to 4,000 characters of text.
- Paragraph 1 Name Option. Include a name between the first and second part of this paragraph: Choose the name to appear within the paragraph from the drop-down list. Select either parent/guardian, client name or no name.
- **Paragraph 1 Second Part**. If you chose to enter a name, add the remaining text for the first paragraph in this field.

We care about					
la chude e venere la truccu	the first and second parts	f this a second by C	line termine		4
Include a name between	the first and second parts of	of this paragraph:	lient name	~	
econd Part					
and your child's health, and th	at is why we're sending this	letter. Here is your	child's immuniz	ation history.	



Immunization History Option

 Immunization History Option. Check the box to include the client's immunization history in the letter. If you do not want to include the client's immunization history in this letter, do not check the box "Include immunization history".





Paragraph 2 and Immunizations Recommended Option

- **Paragraph 2**. Enter desired text. Enter up to 4,000 characters of text in this field.
- Immunizations Recommended Option. Check this box to include the immunization needed forecast for the client in the letter.

And here are the recommend	ed immunizations:	
munization Recommendatio	ns	



Paragraph 3 and Closing

Texas Department of State

Health Services

- **Paragraph 3**. Enter desired text. Enter up to 4,000 characters of text in this field.
- **Closing**. Enter a closing word or statement for the letter in this field. You have the option of checking a box to include the name of the provider organization in the closing, and another option of checking a box to include the phone number of the organization in the closing.

- Paragraph 3	
- Closing	
Enter a closing for the letter: Thank you, and please call if you have questions!	
Include provider organization name in the closing	
Include provider ergenization phone number in the closing	74

Enter Custom Letter Name and Click Save

- The screen will refresh, but no message will display.
- Click the Cancel button to return to the previous Reminder/Recall Customer Letters screen, where the newly created letter displays as a hyperlink.

Name and save the custom letter									
Name the custom letter Past Due Immu	Name the custom letter Past Due Immunizations								
	Save	Cancel							

Health Services
Edit a Reminder/Recall Custom Letter

 To edit an existing Custom Letter, go back to Generated Reports, click the Reminder/Recall Custom Letters link, then click the name of the custom letter to be edited.

Reminder/Recall Custom Letters	
	Cancel
Past Due Immunizations	Delete
New Custom Letter	



Update and Save the Letter

- Update the customer letter data or letter name as needed, and then click the Save button.
- The screen will refresh, but no message displays.
- Click the Cancel button to return to the previous Reminder/Recall Custom Letters.

Name and save the custom letter						
Name the custom letter Past Due Imm	nunizations					
	Save	Cancel				

74



Texas Department of State

Health Services

To Delete a Reminder/Recall Custom Letter

- Go to the Reminder/Recall Custom Letter and click the Delete button next to the letter to be deleted.
- Click the OK button to delete the Custom Letter.

- Reminder/Recall Custom Letters							
Cancel							
Delete							



Click OK to Confirm

- You will be asked if you are sure you want to delete the letter.
- Click the OK button to delete the Custom Letter.





Thank You!

Texas Immunization Registry ImmTrac2@dshs.texas.gov

