



TEXAS
Health and Human
Services

Texas Department of State
Health Services

The Texas Immunization Registry Site Renewal Guide

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When is a Site Renewal Needed?

Any active user can renew their site agreement. A site renewal may be needed if:

The two-year site agreement has expired.

The Point of Contact (POC) needs to be changed. Requests for a POC change should be planned by the organization to not cause an interruption in service. To update an organization, Point of Contact (POC), the organization's site agreement must be renewed. Any staff member within the organization that has an active ImmTrac2 account can log in to the system and begin the renewal process. During the renewal process, the user can update the POC and amend any other information before submitting for approval. The approval processes can take up to 14 business days.

Users need to be added or removed from the organization. If more than three users need to be added or changed, the POC should do a renewal.

If any required field (for example, organization name, address, city, or Point of Contact) has changed, you must do a site renewal. Please contact ImmTrac Customer Support by phone at 800-348-9158 (option 4) or email ImmTrac2@dshs.texas.gov.

The only time that a new ImmTrac2 **registration** has to be completed is:

If an organization is registering for the first time, or

If an organization was bought out and the physical address changes as well. If the name and staff are the only thing changing, then they can complete a site renewal to update the facility name and add new users.

Site agreement renewals can take up to 14 business days to approve. The Texas Immunization Registry staff will review the forms and process them in the order they are received.

2. Tips for Avoiding Errors:

Know when to use Syntropi and when to use ImmTrac2 for registrations or renewals.

Use Syntropi if you:

- Are signing up for or currently enrolled as a TVFC/ASN provider,
- Are signing up for or currently using bidirectional data exchange (BiDX),
- Were previously a provider who administered a Pandemic disaster Antiviral, Immunization, Medication (an AIM) during a declared Pandemic disaster event, or
- Were already registered in Syntropi.
- All other providers should use ImmTrac2.
- Complete all required fields that have an asterisk (*).
- Avoid listing any user, including doctor and nurses, more than once.
- Ensure all users have unique email addresses to prevent duplicate accounts.
- Ensure the first and last names of all users are spelled correctly.
- Include the titles of each individual user. (e.g., LVN, RN, MA, POC, PRC, RMP, etc.)
- Include phone numbers and the unique email address, confirming they are correct.
- Open each entry for doctors and nurses to check that all entries are complete.
- Notify the individual responsible for signing the registration or renewal to watch for the signature request email.

3. How to Begin the Renewal Process

Log in to ImmTrac2 using IAMOnline at <https://iamonline.hhs.state.tx.us/>.

If you are assigned to multiple organizations:

Select the “ImmTrac2” button next to the organization that needs the site renewal. Bolded organizations are parent organizations. If you see “Site Agreement Expired” – call Customer Support.



Figure 1: Multiple Organizations - Bolded Orgs are Parent Orgs

If you are only assigned to one organization:

You will only see the menu bar at the top. Click the “registration/renewal” tab.

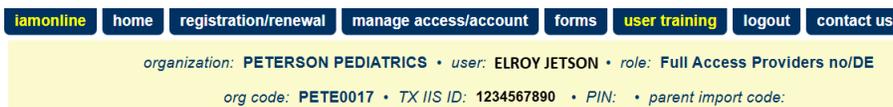


Figure 2: Registration/Renewal Tab

On the “Manage Registration/Renewal” screen select “Manage Renewals”. See Figure 3: Manage Renewals.

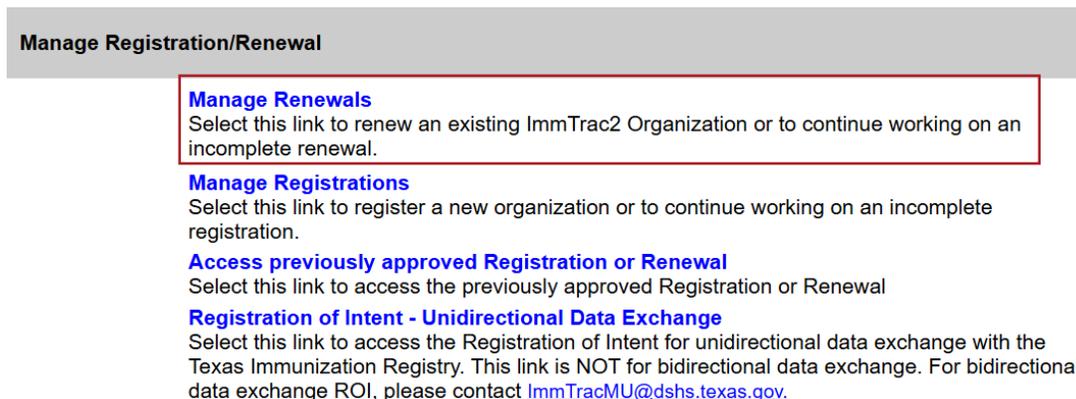


Figure 3: Manage Renewals

Click to Renew

This is the status you will see when you need to start a **New Renewal** if needed for any reason.

Manage Renewals
Manage Renewals
Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.
Manage Registrations
Select this link to register a new organization or to continue working on an incomplete registration.
Access previously approved Registration or Renewal
Select this link to access the previously approved Registration or Renewal
Registration of Intent - Unidirectional Data Exchange
Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Renewals:
When submitting a renewal for an existing organization, please review the information in each section of the application and make any necessary changes or updates. To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". To continue working on an incomplete renewal, click the "Incomplete Renewal" link below.

Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.

Organization Name	Org Code	Site Agreement Expiration Date	Application Status	Last Edited By	Application Expires
PETERSON PEDIATRICS	PETE0017	03/26/2027	Incomplete	ImmTrac2	13 days

Figure 4: Click to Renew

4. Starting the Renewal

The applicant who is registering or renewing is required to list themselves as the Organization Point of Contact (POC) and/or the Primary Registry Contact (PRC).

Best practice is to expand one section at a time to ensure all required fields are completed (these are the fields with an asterisk and in blue). Navigate to each section by clicking the down arrow to expand and the up arrow to minimize. See Figure 5: Site Agreement.

Site Agreement

Welcome to the ImmTrac2 Online Renewal

Please review the information in each section below and make any necessary changes or updates. Once all required fields have been completed, please select the proper submit button at the bottom of the form. **To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.**

To reset the Renewal application back to the default information for the organization, click the "Start Over" button.

If you have any questions about the ImmTrac2 renewal process, please contact the ImmTrac2 Customer Support Team at (800) 348-9158 or at ImmTrac2@dshs.texas.gov.

Warning: Time out will occur after 15 minutes of no activity. Please ensure you save your progress frequently to avoid loss of data.

[\[expand all\]](#) [\[minimize all\]](#)

- Registration Questions ▼
- Organization Demographics ▼
- Parent/Headquarters Info ▼
- Organization Point of Contact (POC) ▼
- Primary Registry Contact ▼
- User Accounts Info ▼
- Responsible Medical Provider ▼
- Practicing Providers with Prescribing Authority ▼
- Agree and Sign ▼

Figure 5: Site Agreement

After each of the following Renewal sections, click the Save Progress and Continue button. Your Renewal will be timed out after 15 minutes of no activity.



Figure 6: Save Progress and Continue

5. Renewal Sections

5A. Registration Questions

This section helps to identify your organization. See Figure 7: Registration Questions.

Registration Questions ▲

* 1. Is your organization [authorized to administer immunizations](#)? Yes No

Note: A Texas licensed doctor or nurse **could potentially be authorized to administer** immunizations if they are also a [Prescribing Authority](#) or are under the supervision of a [Prescribing Authority](#). Organizations selecting 'No' are not required to list a prescribing authority and users are granted "view only" access to client/immunization records.

* 2. Does your organization [administer immunizations, antivirals, or prophylactic injections](#)? Yes No

* 3. The TVFC Program serves financially vulnerable children from birth through 18 years of age. Would you like to be contacted with more information on the TVFC Program? Yes No

TVFC Program information can be found at www.immunizetexas.com

* 4. Would you like to enroll in the TVFC Program now? Yes No

* 5. Select your Organization Type ▼

* 6. The ASN Program serves uninsured adults 19 and over. Would you like to be contacted with more information on the ASN Program? Yes No

ASN Program information can be found at www.immunizetexas.com

Figure 7: Registration Questions

Question 1: If your organization is licensed in Texas to administer vaccines, select 'Yes'. If not select 'No'.

Question 2: If your organization administers immunizations, antivirals, or prophylactic injections, select 'Yes'. If not select 'No'.

Question 3: If you select 'Yes', the Texas Vaccines for Children program at DSHS are notified to contact you.

Question 4: This question is grayed out and cannot be selected.

Question 5: You can select from a drop-down box the type of organization.

Question 6: If you click yes, Adult Safety Net staff at DSHS are notified to contact you.

5B. Organization Demographics

ImmTrac2 does not accept exact duplicate physical addresses. Please include suite, building, or section numbers in Address line 2 to ensure that your organizations address is unique.

Examples: add a suite number, a building section, an area, a doctor's name; or for schools add elementary, middle, high, or ISD. See Figure 8: Organization Demographics.

Organization Demographics ▲ [\[back to top\]](#)

CURRENT ORGANIZATION CODE: PETE0017
CURRENT ORGANIZATION NAME: PETERSON PEDIATRICS
CURRENT PHYSICAL ADDRESS: 1100 W. 49TH STREET, AUSTIN TX, 78756

**** Organization Name and Email Must be entered to before saving. ****

* Organization Name: PETERSON PEDIATRICS
* Organization Email: PETERSON-PED@YAHOOO.COM

* Organization Physical Address: 1100 W. 49TH STREET

Physical Address Line 2: [Red Box]

* City: AUSTIN * State: TX * Zip Code: 78756 +4 []

* County: Travis

* Phone Number: 512 - 123 - 4567 Ext: []
Fax Number: [] - [] - [] Ext: []

Check box if Mailing Address is same as the Physical Address

* Organization Mailing Address: 1100 W. 49TH STREET

Mailing Address Line 2: []

* City: AUSTIN * State: TX * Zip Code: 78756 +4 []

Check box if Delivery Address is same as the Physical Address

* Organization Delivery Address: 1100 W. 49TH STREET

Delivery Address Line 2: [Red Box]

* City: AUSTIN * State: TX * Zip Code: 78756 +4 []

Organization Medicaid ID: []

Save Progress and Continue

Figure 8: Organization Demographics

5C. Parent/Headquarters Info

If you do not have a parent organization (see Figure 9 Parent/Headquarters Info):

If your organization is the parent or stand-alone site being renewed, the No option must be selected.

Parent/Headquarters Info ▲ [\[back to top\]](#)

* Is this Organization a sub-office, mobile unit or satellite office? Yes No

Save Progress and Continue

Figure 9: Parent/Headquarters Info

If you have a parent organization (see Figure 10: Parent/Sub-Sites):



Figure 10: Parent/Sub-Sites

The parent organization must already be registered with ImmTrac2.

Enter the parent site's TXIIS ID and click Search (see Figure 11: Parent TXIIS ID). If you do not know the parent TXIIS ID, please contact ImmTrac Customer Support at 800-348-9158 or email ImmTrac2@dshs.texas.gov.

Parent/Headquarters Info ▲ [\[back to top\]](#)

* Is this Organization a sub-office, mobile unit or satellite office? Yes No

If this Organization is owned and/or managed by a Primary Organization (e.g. this Organization is a sub-office, satellite office or mobile unit), the Parent Organization must already be registered with ImmTrac2. Please enter the Parent Organization's TXIIS ID, formerly referred to as PFS# or ImmTrac Provider Number, then select "Search". If you do not know the Parent Organization's TXIIS ID or are unsure if it is registered, please contact ImmTrac2 Customer Support at (800) 348-9158 or at ImmTrac2@dshs.texas.gov.

* Parent Organization's TXIIS ID

Parent Organization's Name:
Parent Organization's Physical Address

Parent Organization's Phone
Parent Organization's Fax

Save Progress and Continue

Figure 11: Parent TXIIS ID

The "Please Specify" box is now visible. Click the drop-down arrow and select: sub-office, mobile unit, or satellite office. See Figure 12: Parent/Headquarters Info – Sub-Office.

Providers with multiple locations sharing one EHR (electronic health records) system or vendor must indicate Parent/Sub-site relationship for each location.

Definitions of organization types:

A sub-office is a public organizational site that reports up to the main office in their company.

A mobile unit is the same as a sub-office, but this is a unit that moves physically from site to site by some means of transportation.

A satellite office is a government site that reports up to another government office.

* Is this Organization a sub-office, mobile unit or satellite office? Yes No Please Specify Sub-office Mobile Unit Satellite Office

Organization is owned and/or managed by a Primary Organization (e.g. this Organization is a sub-office, satellite office, or mobile unit) then the Parent Organization must already be registered with ImmTrac2. Please enter the Parent Organization's TXIIS ID, formerly referred to as the ImmTrac Provider ID. When select "Search". If you do not know the Parent Organization's TXIIS ID or are unsure if it is registered, please contact ImmTrac2 Customer Support at 48-9158 or at ImmTrac2@dshs.texas.gov.

Parent Organization's TXIIS ID

Parent Organization's Name:
Parent Organization's Physical Address:
Parent Organization's Phone:
Parent Organization's Fax:

Figure 12: Parent/Headquarters Info - Sub-Office

5D. Organization Point of Contact (POC)

The Organization Point of Contact (POC) serves as the Organization's main POC for ImmTrac2. This individual is responsible for completing the ImmTrac2 registration/renewal and updating the organization's demographics and/or a user's profile. The Organization POC may be the assigned Registry and/or Texas Vaccines for Children (TVFC) Program contact and may assign individuals within their organization as Registry and/or TVFC contacts. This individual may also be the Authorized Signer with the ability to electronically sign the registration/renewal. For more information, please review the "Authorized Signer" tab.

When completing the Organization Point of Contact section, do not check the box if this contact already has an ImmTrac2 user account. See Figure 13: POC – Add User Account.

NOTE: The Organizational Point of Contact can be the same person as the Primary Registry Contact at your organization.

Organization Point of Contact (POC) ▲

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The Organization Point of Contact (POC) serves as the Organization's main POC for ImmTrac2. This individual is responsible for completing the ImmTrac2 registration/renewal and updating the organization's demographics and/or a user's profile. The Organization POC may be the assigned Registry and/or Texas Vaccines for Children (TVFC) Program contact and may assign individuals within their organization as Registry and/or TVFC contacts. This individual may also be the Authorized Signer with the ability to electronically sign the registration/renewal. For more information, please review the "Authorized Signer" tab.

Access privileges to manage users within an organization are restricted to certain organization types within ImmTrac2 and require "Provider Supervisor Role" training. For more information and to enroll in the online "Provider Supervisor Role" training, please visit the ImmTrac2 Training website at: www.immunizetexas.com

* First Name Middle * Last Name

* Title

* Contact Phone Number - - Ext

* Email

If an ImmTrac2 user account is necessary for this person, check here to copy data you have entered to the User Account Info accordion tab, which will be used to create user accounts.

Figure 13: POC - Add User Account

5E. Primary Registry Contact

The Primary Registry contact is the main point of contact for ImmTrac2 related matters and client immunization related items. The ImmTrac2 Primary Registry contact may be the assigned Organization Point of Contact (POC) and/or Texas Vaccines for Children (TVFC) Program contact. These contact roles may or may not be the same person.

When completing the Primary Registry Contact section, do not check the box if this contact already has an ImmTrac2 user account. See Figure 14: Primary Registry Contact – Add User Account.

Also, the title of the Primary Registry Contact is now required so be sure to include it.

Primary Registry Contact ▲ [\[back to top\]](#)

Primary Registry contact is the main point of contact for ImmTrac2 related matters and client immunization related items. The ImmTrac2 Primary Registry contact may be the assigned Organization Point of Contact (POC) and/or Texas Vaccines for Children (TVFC) Program contact. These contact roles may or may not be the same person.

* First Name Middle * Last Name

* Title

* Contact Phone Number - - Ext

* Email

If an ImmTrac2 user account is necessary for this person, check here to copy data you have entered to the User Account Info accordion tab, which will be used to create user accounts.

Figure 14: Primary Registry Contact - Add User Account

5F. User Account(s) Info

In this section enter people in your organization who need to be ImmTrac2 users, but do not have a current ImmTrac user Name. See Figure 15: User Accounts Info.

Everyone accessing ImmTrac2 is assigned a username. Usernames must not be shared. For security purposes, each user is required to provide an email address. All email addresses will be verified by the system for uniqueness. Please review your organization's current list of users who will be accessing ImmTrac2.

Staff that are no longer associated to your organization can be removed by selecting the check box on the right side of the user's name.

User Accounts Info ▲ [\[back to top\]](#)

Each individual accessing ImmTrac2 is assigned a username. Usernames must not be shared. For security purposes, each user is required to provide an e-mail address. All e-mail addresses will be verified by the system for uniqueness. Please review your Organization's current list of users who will be accessing ImmTrac2. Please indicate which current users need their access removed and which new users need to be additionally added to your organization.

Current Users

First Name	Middle	Last Name	Phone Number	Ext	Email	Account Status	Username	Org Status	Remove Access
ELROY		JETSON			ELROY.JETSON@YAHOOO.COM	Active	EL1234JE	Active	<input type="checkbox"/>

[+ Add Additional Users](#) Save Progress and Continue

Figure 15: User Accounts Info

If additional users need to be added, select "Add Additional Users". See Figure 16: Add Additional Users.

Add Additional Users

[+ Add Additional Users](#) Save Progress and Continue

Figure 16: Add Additional Users

If you are a current ImmTrac2 user, do not add yourself as an additional user. See Figure 17: Avoid Adding Users That Already Exist.

Add Additional Users

[+ Add Additional Users](#)

Save Progress and Continue

Figure 17: Avoid Adding Users That Already Exist.

If the “Add Additional Users” hyperlink was incorrectly selected, the entry can be removed by selecting the “Delete Entry” button. See Figure 18: Delete Entry.

Each individual accessing ImmTrac2 is assigned a username. Usernames must not be shared. For security purposes, each user is required to provide an e-mail address. All e-mail addresses will be verified by the system for uniqueness. Please review your Organization's current list of users who will be accessing ImmTrac2. Please indicate which current users need their access removed and which new users need to be additionally added to your organization.

Current Users

First Name	Middle	Last Name	Phone Number	Ext	Email	Account Status	Username	Org Status	Remove Access
ELROY		JETSON			ELROY.JETSON@YAHOOO.COM	Active	EL1234JE	Active	<input type="checkbox"/>

Add Additional Users

* First Name Middle * Last Name

Phone Number - - Ext

* Email

Current ImmTrac2 Username

Figure 18: Delete Entry

NOTE: Users can only report immunizations for organizations to which they have access. Users will need to be associated to each organization where the immunization was administered. If a user is associated with a parent organization, they do not need to be associated with the child site, unless they are adding immunizations for the child organization.

5G. Responsible Medical Provider

This section is for the Chief/Senior Medical Authority or a Texas Licensed Medical Professional (Example: MD, DO, NP, PA, or Pharmacist) over that organization.

Organizations must have a designated Chief Medical officer or Senior Practicing Provider for the “Responsible Medical Provider” section. They must be a Texas licensed medical professional with prescribing authority for organizations that administer immunizations. See Figure 19: Responsible Medical Provider.

Responsible Medical Provider ▲ [\[back to top\]](#)

Organizations must have a designated Chief Medical Officer or Senior Practicing Provider for the “Responsible Medical Provider” section. They must be a Texas licensed medical provider and/or a licensed prescribing authority for Organizations administering immunizations.

* First Name Middle * Last Name

* Job Title

* Specialty

* License Type

* License Number * NPI Number

Provider Medicaid ID

Employee ID Number

* Email

* Phone Number - - Ext

Figure 19: Responsible Medical Provider

- MD Doctor of Medicine**
- DO Doctor of Osteopathic Medicine
- PA Physician Assistant
- NP Nurse Practitioner
- RPh Registered Pharmacist
- PharmD Doctor of Pharmacy
- CNM Certified Nurse Midwife
- CPM Certified Professional Nurse Midwife
- APRN Advanced Practice Registered Nurse
- OD Optometrist

Figure 20: License Types

The formats for license numbers are:

- MD is a letter and four numbers. Example: N5678
- PA is “PA” followed by four or five numbers. Example: PA12345
- The NPI Number consists of 10 numbers, formed by nine numbers followed by a numeric check digit. Example: 1234567893
- Advanced Practice Nurses should put an “AP” in front of their license number. Example: AP123456
- There are no RN or LVN license types. RN and LVN license types will never be collected on this screen.

5H. Practicing Providers with Prescribing Authority

This section is for Texas Licensed Medical Professional(s) who will be prescribing immunizations. These providers must have a Texas license number and an NPI number. See Figure 21: Practicing Providers with Prescribing Authority.

NOTE: They will be the ones that are attached to the immunization information in the “Administered by” field.

If the “Add Additional Entry” hyperlink was incorrectly selected, the entry can be removed by selecting the “Delete” button.

Practicing Providers with Prescribing Authority ▲ [\[back to top\]](#)

List all Texas licensed health care providers (MD, DO, NP, PA, APRN, Pharmacist) at your facility who have prescribing authority.

* First Name Middle * Last Name

* Job Title

* Specialty

* License Type

* License Number * NPI Number

Provider Medicaid ID

Employee ID Number

* Email

[+ Add Additional Entry](#)

Figure 21: Practicing Providers with Prescribing Authority

- MD Doctor of Medicine**
- DO Doctor of Osteopathic Medicine
- PA Physician Assistant
- NP Nurse Practitioner
- RPh Registered Pharmacist
- PharmD Doctor of Pharmacy
- CNM Certified Nurse Midwife
- CPM Certified Professional Nurse Midwife
- APRN Advanced Practice Registered Nurse
- OD Optometrist

Figure 22: License Types

The formats for license numbers are:

- MD is a letter and four numbers. Example: N5678
- PA is “PA” followed by four or five numbers. Example: PA12345
- The NPI Number consists of 10 numbers, formed by nine numbers followed by a numeric check digit. Example: 1234567893
- Advanced Practice Nurses should put an “AP” in front of their license number. Example: AP123456
- There are no RN or LVN license types. RN and LVN license types will never be collected on this screen.

51. Agree and Sign

See Figure 23: Agree and Sign. This is a long document so only the top and bottom portions are displayed below. You must read and agree with the Organization Agreement and Confidentiality Statement. See Figure 23: Agree and Sign

Agree and Sign [\[back to top\]](#)

Organization Agreement and Confidentiality Statement

This agreement and confidentiality statement is by and between the Texas Department of State Health Services (DSHS, hereinafter) and PETERSON PEDIATRICS made and entered into on Date 04/09/2025 concerning the access and use of ImmTrac2.

1. DSHS agrees to:

A. Provide:

- Secure access to ImmTrac2 for compatible computers at registered organizations.
- Training and support to authorized organization staff on using ImmTrac2, including periodic briefing sessions as needed.
- Customer support for assistance with questions and technical support for ImmTrac2 information resources-specific issues [Customer Support: Monday through Friday (except state holidays) from 8:00 AM to 4:30 PM CST by e-mailing ImmTrac2@dshs.texas.gov or calling (800) 348-9158].

B. Maintain:

- Registry data for: (a) participants from birth to age 18 years old, (b) first responders, (c) first responder immediate family members 18 years of age and older, (d) participants age 18 years and older, (e) persons entered in preparation for or in response to a declared public health emergency or disaster related event (information is retained for 5 years after the event has been declared over unless consent to further retain information permanently is obtained)- all consistent with Texas Health & Safety Code Chapter 161.
- Registry information privacy in accordance with state and federal law, and DSHS policy.

C. Adhere to DSHS ImmTrac2 security and customer support access policies and procedures as follows:

- Assign each individual user a unique username. ImmTrac2 support staff members will remind organizations that usernames for ImmTrac2 web access cannot be shared.
- Disable new user accounts which are not used within 30 days of creation.
- Delete new user accounts which are not used within 120 days of creation.
- Auto-lock accounts with previous activity which are inactive for more than 90 days.
- ImmTrac2 will handle all out-of-state access requests on a case by case basis. Out-of-state providers and schools must be actively providing service to Texas clients. The number of Texas clients that a provider or school services, and Texas medical professional licenses for the providers at issue, will also be taken into consideration in the agency's decision-making process regarding access and/or release of client data. By signing this agreement, an out-of-state provider affirmatively agrees to be bound by Texas law, and stipulated to Travis County, Texas as the venue for any legal proceedings stemming from the provider's ImmTrac2 usage. All ImmTrac2 users are also subject to federal privacy laws.

2. Organizations/individuals accessing ImmTrac2 agree to:

H. I have read and agree to the terms on this ImmTrac2 Organization Agreement and Confidentiality Statement.

Authorized Signer

* Select one

I am not the Authorized Signer

Note: Selecting this option confirms that you are not an Authorized Signer and unable to sign for this Organization. Clicking the Submit for Signature button below will send a request for signature by the Authorized Signer identified in this form.

I am the Authorized Signer

Responsible Medical Provider or Authorized Signer: **Paul Peterson**

[\[expand all\]](#) [\[minimize all\]](#)

Figure 23: Agree and Sign

The applicant filling out the registration or renewal may or may not be the person who electronically signs the form.

NOTE: Anyone authorized by the Medical Authority may sign the form on their behalf.

The Responsible Medical Provider accordion tab lists information about the Responsible Medical Provider. See previous Figure 19: Responsible Medical Provider.

All required fields on the electronic form must be filled out before the registration or renewal applicant can ‘Submit for Signature’ or ‘Submit for Approval’.

A Site Agreement Renewal is required every two years.

The details of the site agreement include the legal requirements for who can access the registry as well as the usage policies that each organization agrees to abide by. ImmTrac2 contains Protected Health Information (PHI) and Personal Identifiable Information (PII). At the point the responsible medical provider or authorized signer submits the form for approval to the Texas Immunization Registry, the person is required to acknowledge (check box) that they have read and agree to the terms of the agreement and confidentiality statement.

5J. Agree and Sign – I Am Not the Authorized Signer

This section is to be completed by the medical staff completing the form for the Texas Medical Licensed Professional who will be taking responsibility to ensure all users comply with the agreement for all PHI and PII data contained in ImmTrac2.

If the person filling this form out is not the Authorized Signer, (see Figure 24:) then:

Select the option “I am not the Authorized Signer”,

Select the “Submit for Signature” box to have the form emailed to the Authorized Signer to sign the form.

Authorized Signer

* Select one

I am not the Authorized Signer

Note: Selecting this option confirms that you are not an Authorized Signer and unable to sign for this Organization. Clicking the Submit for Signature button below will send a request for signature by the Authorized Signer identified in this form.

I am the Authorized Signer

Responsible Medical Provider or Authorized Signer: **Paul Peterson**

Save Progress and Continue Submit for Signature Submit for Approval

Figure 24: I Am Not the Authorized Signer

Who is the Authorized Signer? The default Authorized Signer is the Responsible Medical Provider. See Figure 25: Responsible Medical Provider.

Responsible Medical Provider ▲ [\[back to\]](#)

Organizations must have a designated Chief Medical Officer or Senior Practicing Provider for the "Responsible Medical Provider" section. They must be a Texas-licensed medical provider and/or a licensed prescribing authority for Organizations administering immunizations.

* First Name Middle * Last Name

* Job Title

* Specialty

* License Type

* License Number * NPI Number

Provider Medicaid ID

Employee ID Number

* Email

* Phone Number - - Ext

Figure 25: Responsible Medical Provider

The Authorized Signer will receive an email with a Random Access Code, a link to "review and sign", and a link to "decline signing". (see Figure 26: Authorized Signer).

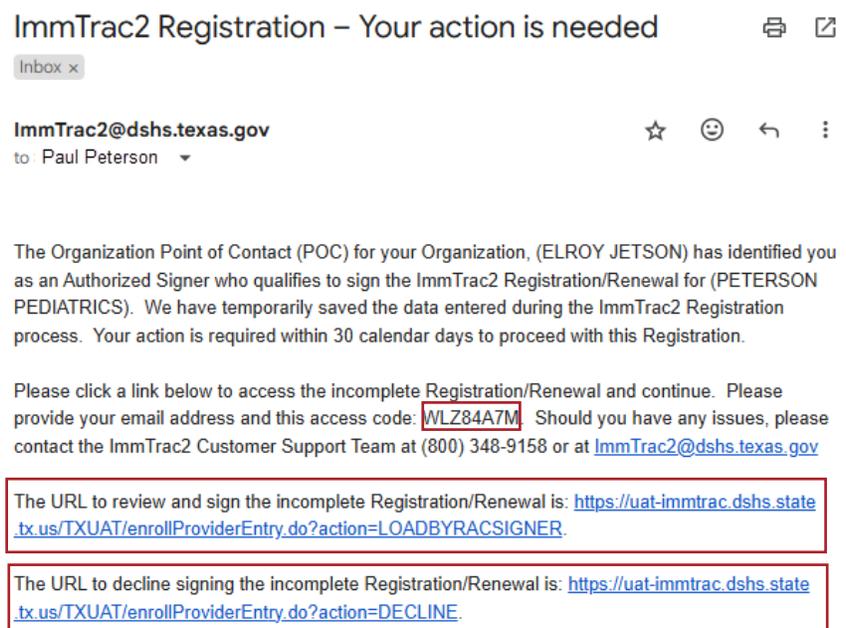
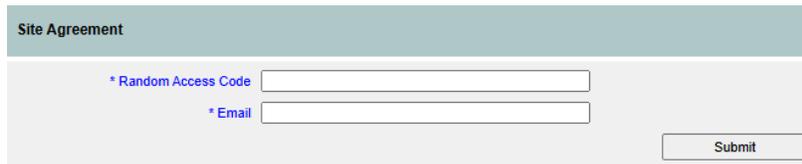


Figure 26: Authorized Signer

If the link to review and sign is selected, a web page asks for the random access code and the email of the official signer (See Figure 27: Random Access Code).

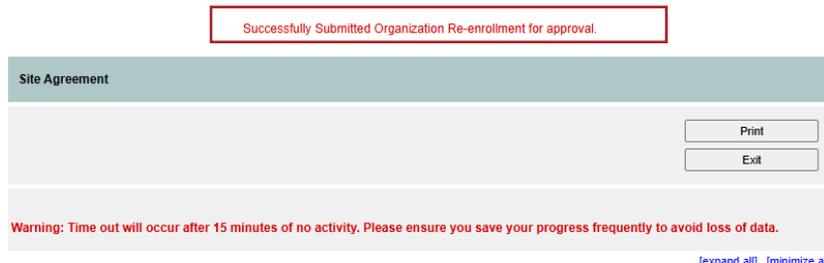
NOTE: The Random Access Code will never have a period at the end of it. Please be careful when copying and pasting the code to not include the period.



The screenshot shows a web form titled "Site Agreement". It contains two input fields: "* Random Access Code" and "* Email". A "Submit" button is located at the bottom right of the form.

Figure 27: Random Access Code

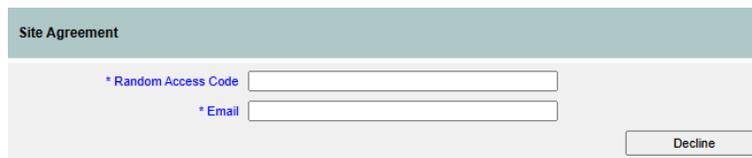
The Site Agreement is displayed with the message, "Successfully Submitted Organization Re-enrollment for signature". See Figure 28: Successfully Submitted for Signature.



The screenshot shows the "Site Agreement" form with a success message: "Successfully Submitted Organization Re-enrollment for approval." The message is enclosed in a red border. Below the message, there are "Print" and "Exit" buttons. A warning message is displayed at the bottom: "Warning: Time out will occur after 15 minutes of no activity. Please ensure you save your progress frequently to avoid loss of data." There are also window control buttons for "Maximize all" and "Minimize all" at the bottom right.

Figure 28: Successfully Submitted for Signature

If the link to decline signing the Site Agreement is selected, then the option to decline is displayed. Please be careful when copying and pasting the Random Access code to not include a period at the end of the code. See Figure 29: Decline to Sign.



The screenshot shows the "Site Agreement" form with two input fields: "* Random Access Code" and "* Email". A "Decline" button is located at the bottom right of the form.

Figure 29: Decline to Sign

If the Decline option is chosen, an email is sent to the person who submitted the renewal for signature, stating that the Authorized Signer declined the request to submit the renewal, and to select someone else as the Authorized Signer and resubmit the renewal for signature. See Figure 30: Authorized Signer Declined.

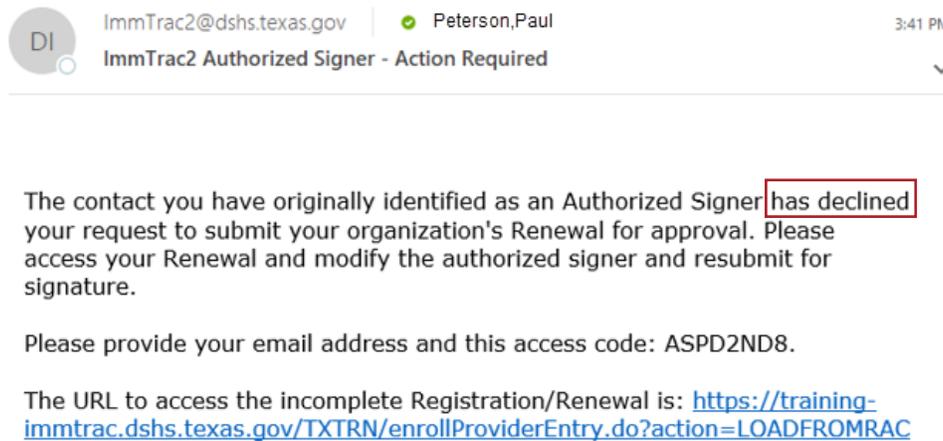


Figure 30: Authorized Signer Declined

5K. Agree and Sign – I Am the Authorized Signer

This section is to be completed by the Responsible Medical Provider or a person authorized to sign the agreement. The Responsible Medical Provider is responsible to ensure all users comply with the agreement for the Protected Health Information (PHI) and Personally Identifiable Information (PII) data contained in ImmTrac2. See Figure 31: Signed by the Responsible Medical Provider.

Authorized Signer

* Select one

I am not the Authorized Signer

Note: Selecting this option confirms that you are not an Authorized Signer and unable to sign for this Organization. Clicking the Submit for Signature button below will send a request for signature by the Authorized Signer identified in this form.

I am the Authorized Signer

Organization Agreement and Confidentiality Statement Acceptance

* I have read and agree to comply with the Organization Agreement and Confidentiality Statement as presented in this section

Responsible Medical Provider or Authorized Signer: **Paul Peterson**

* Signature

To sign, please type your name.

* Title

* Email

Date/Time

Figure 31: Signed by the Responsible Medical Provider

The check box “I have read and agree to comply with the Organization Agreement and Confidentiality Statement as presented in this section” must be checked.

The Signature line must be entered, along with the title and email address of the Authorized Signer. Then select “Submit for Approval”.

Although the Responsible Medical Provider is listed on the Authorized Signer page, an Authorized Signer who is not the Responsible Medical Provider can also sign on behalf of them and submit the form for approval. See Figure 32: Authorized Signer Who Is Not the Responsible Medical Provider. In this case, the signer is authorized by the provider to sign for him/her.

Authorized Signer

* Select one

I am not the Authorized Signer
Note: Selecting this option confirms that you are not an Authorized Signer and unable to sign for this Organization. Clicking the Submit for Signature button below will send a request for signature by the Authorized Signer identified in this form.

I am the Authorized Signer

Organization Agreement and Confidentiality Statement Acceptance

* I have read and agree to comply with the Organization Agreement and Confidentiality Statement as presented in this section

Responsible Medical Provider or Authorized Signer: **Paul Peterson**

* Signature
To sign, please type your name.

* Title

* Email

Date/Time

Figure 32: Authorized Signer Who Is Not the Responsible Medical Provider

Once the application is successfully submitted, the Authorized Signer will receive a “Submitted Successfully” message at the top of the screen.

NOTE: Please allow up to 14 business days to process. For additional assistance, please contact the ImmTrac2 Customer Support Team.

6. Status of the Renewal

The types of Renewal Application Status are as follows:

6A. Click to Renew

This is the status mentioned earlier that you will see when you need to start a New Renewal if needed for any reason. See Figure 33: Click to Renew.

Manage Renewals

Manage Renewals

Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.

Manage Registrations

Select this link to register a new organization or to continue working on an incomplete registration.

Access previously approved Registration or Renewal

Select this link to access the previously approved Registration or Renewal

Registration of Intent - Unidirectional Data Exchange

Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Renewals:

When submitting a renewal for an existing organization, please review the information in each section of the application and make any necessary changes or updates. To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". To continue working on an incomplete renewal, click the "Incomplete Renewal" link below.

Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.

Organization Name	Org Code	Site Agreement Expiration Date	Application Status	Last Edited By	Application Expires
PETERSON PEDIATRICS	PETE0017	03/26/2027	Click to Renew	ImmTrac2	13 days

Figure 33: Click to Renew

6B. Incomplete

There is some missing or partial information that needs to be added or updated per the email you were sent. The information must be completed before it can be successfully submitted and processed in the system. See Figure 34: Incomplete.

Manage Renewals

Manage Renewals

Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.

Manage Registrations

Select this link to register a new organization or to continue working on an incomplete registration.

Access previously approved Registration or Renewal

Select this link to access the previously approved Registration or Renewal

Registration of Intent - Unidirectional Data Exchange

Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Renewals:

When submitting a renewal for an existing organization, please review the information in each section of the application and make any necessary changes or updates. To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". To continue working on an incomplete renewal, click the "Incomplete Renewal" link below.

Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.

Organization Name	Org Code	Site Agreement Expiration Date	Application Status	Last Edited By	Application Expires
PETERSON PEDIATRICS	PETE0017	03/26/2027	Incomplete	ImmTrac2	13 days

Figure 34: Incomplete

6C. Submitted for Signature

The person filling out the Site Renewal is not the Authorized Signer. See Figure 35: Submitted for Signature.

Manage Renewals

Manage Renewals
Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.

Manage Registrations
Select this link to register a new organization or to continue working on an incomplete registration.

Access previously approved Registration or Renewal
Select this link to access the previously approved Registration or Renewal

Registration of Intent - Unidirectional Data Exchange
Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Renewals:

When submitting a renewal for an existing organization, please review the information in each section of the application and make any necessary changes or updates. To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". To continue working on an incomplete renewal, click the "Incomplete Renewal" link below.

Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.

Organization Name	Org Code	Site Agreement Expiration Date	Application Status	Last Edited By	Application Expires
PETERSON PEDIATRICS	PETE0017	03/26/2027	Submitted for Signature	ImmTrac2	14 days

Figure 35: Submitted for Signature

The Authorized Signer indicated in the site renewal will receive an email with a Random Access Code who will then sign the renewal and submit it for approval. The default for the authorized signer will be the name used in the Responsible Medical Provider tab. See Figure 36: Default Signer is the Responsible Medical Provider.

Responsible Medical Provider ▲

[back to top](#)

Organizations must have a designated Chief Medical Officer or Senior Practicing Provider for the "Responsible Medical Provider" section. They must be a Texas licensed medical provider and/or a licensed prescribing authority for Organizations administering immunizations.

* First Name Middle * Last Name

* Job Title

* Specialty

* License Type

* License Number * NPI Number

Provider Medicaid ID

Employee ID Number

* Email

* Phone Number - - Ext

Figure 36: Default Signer is the Responsible Medical Provider

6D. Submitted for Approval

The renewal has been successfully signed and sent to DSHS for processing. See Figure 37: Submitted for Approval.

Manage Renewals

Manage Renewals
Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.

Manage Registrations
Select this link to register a new organization or to continue working on an incomplete registration.

Access previously approved Registration or Renewal
Select this link to access the previously approved Registration or Renewal

Registration of Intent - Unidirectional Data Exchange
Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Renewals:

When submitting a renewal for an existing organization, please review the information in each section of the application and make any necessary changes or updates. To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". To continue working on an incomplete renewal, click the "Incomplete Renewal" link below.

Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.

Organization Name	Org Code	Site Agreement Expiration Date	Application Status	Last Edited By	Application Expires
PETERSON PEDIATRICS	PETE0017	03/26/2027	Submitted for Approval	ImmTrac2	14 days

Figure 37: Submitted for Approval

NOTE: Please allow up to 14 business days to process. For additional assistance, please contact the ImmTrac2 Customer Support Team.

After your site renewal has been successfully submitted to DSHS, the Organization Point of Contact will receive an email confirming receipt by DSHS. See Figure 38: Submitted for Approval.

ImmTrac2@dshs.texas.gov

10:20 AM (3 hours ago)

Your ImmTrac2 Renewal request for PETERSON PEDIATRICS has been received. Please allow 10-14 days for processing. If you do not receive an e-mail after 14 days of your registration submission date confirming approval or denial, contact the ImmTrac2 Customer Support Team at 1-800-348-9158 or at ImmTrac2@dshs.texas.gov.

Figure 38: Submitted for Approval

6E. Returned

The renewal has been reviewed by DSHS and returned to the Organization email to be corrected and resubmitted. The reviewer at DSHS will notate what needs to be changed. See Figure 39: Returned.

Manage Renewals

Manage Renewals

Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.

Manage Registrations

Select this link to register a new organization or to continue working on an incomplete registration.

Access previously approved Registration or Renewal

Select this link to access the previously approved Registration or Renewal

Registration of Intent - Unidirectional Data Exchange

Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Renewals:

When submitting a renewal for an existing organization, please review the information in each section of the application and make any necessary changes or updates. To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". To continue working on an incomplete renewal, click the "Incomplete Renewal" link below.

Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.

Organization Name	Org Code	Site Agreement Expiration Date	Application Status	Last Edited By	Application Expires
PETERSON PEDIATRICS	PETE0017	03/26/2027	Returned	ImmTrac2	14 days

Figure 39: Returned

See the example below. Figure 40: Example of Returned Renewal Email displays an email informing an organization that their renewal was returned with specific instructions to correct before resubmitting.



ImmTrac2@dshtexas.gov
to Paul Peterson

1:13 PM (0 minutes ago)



You have been identified as the Authorized Signer of record for the following organization:

Authorized Signer: Paul Peterson
Organization: PETERSON PEDIATRICS
Type: RENEWAL
FORM ID: DSHS336992
Date Submitted: 03/26/2025

During an initial review of your organization's Renewal form, the following values were changed:

Summary of Changes

NONE - See DSHS Specific Instructions at the bottom of this email

The changes listed above or described in the DSHS Specific Instructions section below, require your review and the enrollment form previously submitted must be resubmitted for approval. Please use your ImmTrac2 log in account credentials to log in. Once logged in use the top menu bar to navigate to the Registration/Renewal page. On the Manage Registration/Renewal page, select the link titled Access Saved/In Progress Registration or Renewal. Select the appropriate Form ID, make any necessary form changes, and resubmit your form for approval.

DSHS Specific Instructions

Please provide a valid medical license for the Johnny Appleseed.

If you have any questions about this email or the recertification process, please contact the ImmTrac2 Customer Support Team at 1-800-348-9158 or ImmTrac2@dshtexas.gov.

Figure 40: Example of Returned Renewal Email

6F. Approved

When your site renewal has been approved by DSHS, the Organization Point of Contact will be emailed notification of approval. See Figure 41: Example of Approved Site Renewal Email.

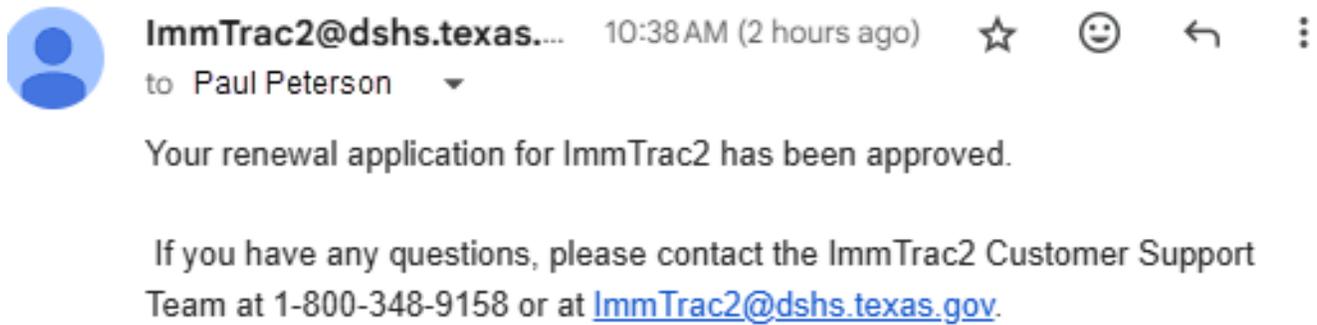


Figure 41: Example of Approved Site Renewal Email

7. Accessing Previously Approved Renewals

If you want to see your Site Agreement Renewal that has previously been approved, you can select the “registration/renewal” tab at the top of the screen and then select “Access previously approved Registration or Renewal”. See Figure 42: Access Previously Approved Registration or Renewal.

organization **PETERSON PEDIATRICS** • user **PAUL PETERSON** role **Full Access Providers no/DE**

Manage Registration/Renewal

[Manage Renewals](#)

Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.

[Manage Registrations](#)

Select this link to register a new organization or to continue working on an incomplete registration.

[Access previously approved Registration or Renewal](#)

Select this link to access the previously approved Registration or Renewal

[Registration of Intent - Unidirectional Data Exchange](#)

Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Figure 42: Access Previously Approved Registration or Renewal

Then select the organization name in blue to view the organization’s site agreement. You can print out the renewal once it is opened. See Figure 43: Previously Approved Registration or Renewal.

Manage Renewals

Manage Renewals

Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.

Manage Registrations

Select this link to register a new organization or to continue working on an incomplete registration.

Access previously approved Registration or Renewal

Select this link to access the previously approved Registration or Renewal

Registration of Intent - Unidirectional Data Exchange

Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Renewals:

When submitting a renewal for an existing organization, please review the information in each section of the application and make any necessary changes or updates. To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". To continue working on an incomplete renewal, click the "Incomplete Renewal" link below.

Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.

Organization Name	Org Code	Site Agreement Expiration Date	Application Status	Last Edited By	Application Expires
PETERSON PEDIATRICS	PETE0017	04/09/2027	Click to Renew	ImmTrac2	

Figure 43: Previously Approved Registration or Renewal

8. Troubleshooting Site Renewals

8A. Check for Errors After Submitting Renewal

When you select “Submit for Approval” at the end of the site agreement, the renewal will be checked for missing or invalid information on required fields.

For some fields with missing or invalid information, an error message will appear at the top of the registration (see Figure 44: Validation Error Message at Top of Renewal Form). Carefully go back through the application, open each section one at a time, and look for any required fields marked with asterisks that are blank or any sections that have red error messages (see Figure 45: Validation Error Message at Top of Section).

Validation Errors

- Please scroll down through each accordion tab to review validation error(s) listed at the top of the section.
- Please enter information in all required fields with an asterisk (*)

Figure 44: Validation Error Message at Top of Renewal Form

The screenshot shows a section header "Responsible Medical Provider" with a dropdown arrow and a "[back to top]" link. Below it is a red-bordered box containing the text "Validation Errors" and a list of error messages: "The value entered for phone number is invalid and (or) incomplete." and "Please enter information in all required fields with an asterisk (*)". Below the box is a horizontal line and a small note: "Organizations must have a designated Chief Medical Officer or Senior Practicing Provider for the 'Responsible Medical Provider' section. They must be a Texas licensed medical provider and/or a licensed prescribing authority for Organizations administering immunizations."

Figure 45: Validation Error Message at Top of Section

8B. Common Issues for Completing Site Renewals

Required fields have an asterisk (*) and are in blue. Before submitting a renewal, review each section of the application and look for required fields that are blank.

Unique organization name: The organization name must be unique. For large organizations with similar names, use a unique identifier specific to the site. (Ex: “Pediatric Clinic – Dr. Paul Smith” or “Kindercare – 1003” or “Martin Luther King Middle – Austin ISD”)

Unique physical address: If the address already exists in ImmTrac2 by a different business, use address line 2 to make the address unique, such as adding a suite number.

Look out for spaces before, after, or in Email addresses:

User Account Info: If you are a “current user”, do not add yourself as an additional user.

Advanced Practice Nurses (APN) should not put an “AP” in front of their license number.

The email address for each user must be unique. For security purposes, each user account is required to have a unique email address. This will allow each individual user to reset their own password and retrieve their Org Code and Username.

NOTE: Each individual user should not share their credentials as this violates the organization site agreement.

8C. Save Progress and Exit

To save your progress and return later, select “SAVE PROGRESS AND EXIT”.

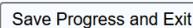
A rectangular button with a light blue border and a white background, containing the text "Save Progress and Exit" in a dark blue font.

Figure 46: Save Progress and Exit Button

Then a message appears asking if you are sure you want to exit (see Figure 47: Exit Message).

A dialog box with a light blue background. The text inside reads: "Are you sure you want to exit? Select the Cancel to remain on the current screen. Select OK to save information you have entered." Below the text are two buttons: "OK" and "Cancel".

OK Cancel

Figure 47: Exit Message

If “OK” is selected and you want to save and exit, a message appears that progress has been saved and ImmTrac2 has sent you an email with instructions on how to return to the incomplete application. If you think you did not receive an email, please check the Authorized Signer email box (and your spam, junk mail, and clutter folders) and verify that the email listed is correct.

NOTE: Applications left inactive for more than 14 calendar days will be deleted and a new application must be started and saved. See Figure 48: Progress Saved Message.

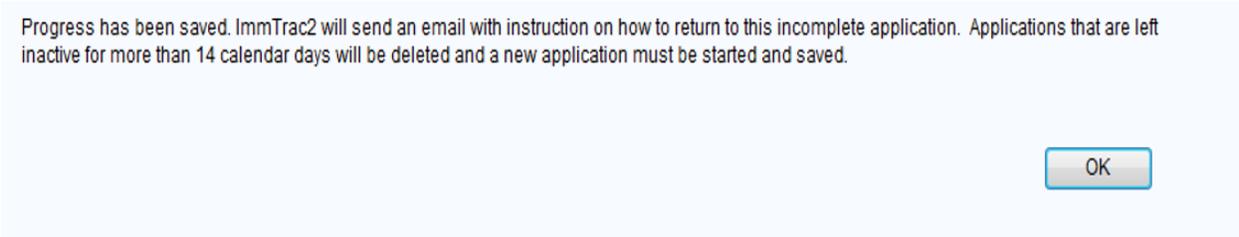


Figure 48: Progress Saved Message

If you have started the renewal process, then saved it and exited, when coming back to open the renewal, the “Incomplete” or “Click to Renew” application status may be selected to open the renewal and continue. See Figure 49: Incomplete Renewal.

Manage Renewals

Manage Renewals
Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.

Manage Registrations
Select this link to register a new organization or to continue working on an incomplete registration.

Access previously approved Registration or Renewal
Select this link to access the previously approved Registration or Renewal

Registration of Intent - Unidirectional Data Exchange
Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Renewals:
When submitting a renewal for an existing organization, please review the information in each section of the application and make any necessary changes or updates. To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". To continue working on an incomplete renewal, click the "Incomplete Renewal" link below.

Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.

Organization Name	Org Code	Site Agreement Expiration Date	Application Status	Last Edited By	Application Expires
PETERSON PEDIATRICS	PETE0017	03/26/2027	Incomplete	ImmTrac2	13 days

Figure 49: Incomplete Renewal

An email with the title “ImmTrac2: Incomplete Renewal” is sent to the Authorized Signer email address listed in the Site Agreement. The opened email tells you how to access the incomplete renewal. See Figure 50: Incomplete Renewal Message.

ImmTrac2@dshs.texas.gov
to PAUL.PETERSON@YAHOOOO.COM

12:43 PM (1 hour ago) ☆ 😊 ↶ ⋮

PAUL PETERSON

Thank you for starting the process to renew your organization.
At this point, your renewal is **still Incomplete**.
Your renewal will **expire in 14 days** if it is not updated or completed.
Further action is required to finish this process and have your renewal submitted for approval.

Please follow these instructions to access your **Incomplete** renewal.

1. Login to [ImmTrac2](#).
2. Agree to the Confidentiality Statement.
3. Select an organization to login to.
 - If you are only associated to one organization, go to step 4.
4. Select the 'registration/renewal' tab at the top of the screen.
5. Select Manage Renewals.
6. Select your in-progress renewal.

If you have any questions, please contact the ImmTrac2 Customer Support Team at 1-800-348-9158 or at ImmTrac2@dshs.texas.gov

Figure 50: Incomplete Renewal Message

To continue the in-progress renewal,

Go back into ImmTrac2, select the “registration/renewal” tab in the menu bar near the top of the screen, select “Manage Renewals” (see Figure 51: Manage Renewals Screen), and select the renewal that is still in progress by clicking on the word “Incomplete” in that row.

Manage Renewals

Manage Renewals

Select this link to renew an existing ImmTrac2 Organization or to continue working on an incomplete renewal.

Manage Registrations

Select this link to register a new organization or to continue working on an incomplete registration.

Access previously approved Registration or Renewal

Select this link to access the previously approved Registration or Renewal

Registration of Intent - Unidirectional Data Exchange

Select this link to access the Registration of Intent for unidirectional data exchange with the Texas Immunization Registry. This link is NOT for bidirectional data exchange. For bidirectional data exchange ROI, please contact ImmTracMU@dshs.texas.gov.

Renewals:

When submitting a renewal for an existing organization, please review the information in each section of the application and make any necessary changes or updates. To save your progress and return at a later time to complete the renewal process, select "Save Progress and Exit". To continue working on an incomplete renewal, click the "Incomplete Renewal" link below.

Applications that are left inactive for more than 14 calendar days will be deleted and a new application must be started and saved.

Organization Name	Org Code	Site Agreement Expiration Date	Application Status	Last Edited By	Application Expires
PETERSON PEDIATRICS	PETE0017	03/26/2027	Incomplete	ImmTrac2	13 days

Figure 51: Manage Renewals Screen

When incomplete renewals are left inactive for more than 14 calendar days, they will be deleted from ImmTrac2. After 14 days, a new application must be saved or submitted.

For more information and support with renewals or registrations, contact the Texas Immunization Renewal/Registration Team.

Email: ImmTrac2@dshs.texas.gov

Phone: 800-348-9158, press option 4

Registration website: dshs.texas.gov/

ImmTrac Information Website: dshs.texas.gov/immunizations/providers/programs



TEXAS
Health and Human
Services

**Texas Department of State
Health Services**

Texas Department of State Health Services
Immunizations Section
Stock # 11-15252 Rev. 04/2025