

Registry Participation Instructions



Phone: (775) 684-5954

Fax: (775) 687-7596

Nevada law states that all shots administered in Nevada must be recorded in Nevada WeblZ.

This requirement extends to patients of ALL ages.

Per Nevada Revised Statute (NRS) 439.265 and the regulations adopted to support this law, all shots given in Nevada must be recorded in Nevada WeblZ, our statewide immunization registry.

The steps necessary to successfully comply with this law are listed below:

1) DISCLOSURE

Print the **Disclosure Statement Poster** and **post it prominently** in your lobby, waiting room or registration area. This Poster will serve as notification to vaccination patients that their information will be entered into the registry.

2) ENTERING THE PATIENT DATA

Patients **DO NOT** need to give consent for their (or their child's) information to be entered into the registry. Please make sure the patient (or parent/guardian) understands what the registry is and offer to answer any questions they may have. You may always refer them to the Nevada WebIZ Help Desk for further information.

- THE PATIENT <u>DOES NOT</u> NEED TO SIGN A FORM IF THEY <u>DO NOT OBJECT</u> to having their (or their child's) data entered into the registry. You may now enter their data.
- If the patient objects to having their data entered into the registry, <u>DO NOT</u> enter their data and move on to step 3.

3) PARTICIPATION FORM

The Participation Form serves two functions:

- Patients may sign this form if they do not want to have their (or their child's) information entered into the registry.
- Patients who previously did not want to participate and now do may sign this form to have their information entered into the registry.

ONLY provide the Form to patients who do not want to participate and to those that previously did not want to participate and now do.

4) SUBMITTING SIGNED FORMS TO THE WEBIZ HELP DESK

If any of your patients sign a Participation Form for **EITHER** of the reasons listed above, you must submit a copy of the form to the Nevada WebIZ Help Desk.

 At the end of each month, please mail or fax photocopies of any forms received during that month to the Help Desk (address and fax # listed below).

Registry Participation Instructions

1) DISCLOSURE

 Post the Disclosure Poster Prominently in lobby



2) PATIENT DATA

Patient does not object?STOP! Go to Step 3



3) ENTER THE DATA

 Enter the vaccination patient's data into Nevada WebIZ

Patient DOES object?Go to Step 4



- Provide Form to Patient
- Patient signs Form if they...
 - DO NOT want to particpate (STOP! Do not enter data and go to step 5)



PARTICIPATION FORM

- Did not want to participate but now WANT TO
 - You may now enter the vaccination patient's data into Nevada WebIZ (step 3)



5) SUBMITTING FORM COPIES

- Mail or fax photocopies of signed Forms to Nevada WebIZ Help Desk
 - Submit ALL forms signed for either reason
 - Send Forms only once per month

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