



NEVADA STATE  
IMMUNIZATION  
PROGRAM

**State of Nevada  
Immunization Information System (IIS)**

***2022 Men ACWY  
Reminder/Recall Instructions***

**<https://webiz.nv.gov>**

Help Desk  
(775) 684-5954  
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## 2022 Men ACWY Reminder/Recall Instructions

For the 2022-2023 school year, all students entering 12<sup>th</sup> grade in Public, Private or Charter schools must have a dose of MenACWY vaccine on or after their 16<sup>th</sup> birthday. Use the instructions below to generate a reminder/recall list for your practice from NV WebIZ. Call your patients and schedule them for an appointment if they do not have a dose of MenACWY vaccine on or after their 16<sup>th</sup> birthday. Act now and **avoid the back-to-school rush!**

In **NV WEBIZ**, click on "Reports". Scroll down to the "Patient Management" box. Click on "Patient Reminder/Recall". Set up the screen as follows and then click "Create":

**Run Name**  
MENACWY 2

**Provider/Clinic :** NEVADA STATE IMMUNIZATION PROGRAM , NEVADA STATE IMMUNIZATION PROGRAM  
SELECT A CLINIC BY TYPING PROVIDER, CLINIC, VFC PIN, OR CLINIC CODE ✕

**Report Type**  
 Patient Default Clinic  
 Vaccination Clinic

**Run Schedule Date \*** **Run Completed Date**  
02/28/2022  MM/DD/YYYY

**Reminder/Recall Date Range \***  
From: 02/28/2022  Through: 07/01/2022

**Age Range \***  
From: 16 Through: 18 UOM: YEARS ▼

**Date of Birth Date Range \***  
From: 01/01/2004  Through: 01/01/2006

**Options To Target Patients Included For Reminder/Recall**

Patient Eligibility

Gender

Ignore Setting For "Do Not Include Patient in Reminder/Recall?"  
 Only Include Patients With Address (i.e., Street Address, City, State, Zip)?  
 Increment Patient Reminders/Recall Count?  
 Exclude Patients After Number of Reminders/Recalls Without Subsequent Vaccination  
 Include Recommender Reminders/Recalls?  
 Generate Reminder/Recall Event?  
 Include Manual Reminders/Recalls?  
 Include Patients Due For Vaccinations (Reminders)?  
 Include Patients Overdue For Vaccinations (Recalls)?  
0 Minimum Number Of Days Past Due To Include 760 Maximum Number Of Days Past Due To Include  
 Only include patients with 2 or more non- Influenza/H1N1-09/COVID-19 vaccinations?  
 Exclude patients with one or more vaccine refusals?

**Vaccine Series and Optional Dose (Note: Leave Dose blank to include all doses in series)**

<input type="checkbox"/>	Vaccine Series	Dose Number
<input type="checkbox"/>	COVID-19	<input type="text"/>
<input type="checkbox"/>	DTaP/Td/Tdap	<input type="text"/>
<input type="checkbox"/>	H1N1-09	<input type="text"/>
<input type="checkbox"/>	HEPA	<input type="text"/>
<input type="checkbox"/>	HEPB	<input type="text"/>
<input type="checkbox"/>	Hib	<input type="text"/>
<input type="checkbox"/>	HPV	<input type="text"/>
<input type="checkbox"/>	Influenza	<input type="text"/>
<input checked="" type="checkbox"/>	Meningococcal	<input type="text"/>
<input type="checkbox"/>	Meningococcal B	<input type="text"/>
<input type="checkbox"/>	MMR/Measles	<input type="text"/>
<input type="checkbox"/>	Pneumococcal	<input type="text"/>
<input type="checkbox"/>	Polio	<input type="text"/>
<input type="checkbox"/>	ROTA	<input type="text"/>
<input type="checkbox"/>	Varicella(CPOX)	<input type="text"/>
<input type="checkbox"/>	Zoster	<input type="text"/>

**Create** **Cancel**

The report will run overnight. The next day, you can generate the list of patients to recall from these choices.

Unvaccinated Report	Report	Extended Report
Dymo Labels	Avery Labels	Postcard
Full Extract		

If any of the patients on the list are not your patients, please close their program so they do not appear on future reminder/recalls.