

CDMS Registration Process- Check in.

Instructions for Recalling Registrants:

1. Select NYS DOH Central Islip Regional Office from the Organization





2. From the Home screen, select the '**Operational**' menu option and click on '**Recall Registration**.'



3. In the 'Set Session Specifics' screen, select the **Event**, the **Form Name** and the name of the **POD** from the provided drop-down menus.





Email Address		
Registration ID	Phone #	



6. On the '**Recall Registration Search Results**' screen, select the name of the registrant you wish to process. Use the Global search to locate a client (Last Name, First Name, DOB) to narrow search if necessary. Click client name (blue font) to open the client record.

Re	call Registration Search Results							
	Q testiulie		×					
	Name	Phone Numb	Email Address	÷	Appointment Date & 💠 Time	Date of Birth 🗘	Registration ID #	🗘 Group ID #
	təstjulie,təstjulie				12/29/2020 06:30:00 PM - 07:00:00 PM		55663	
	Total Records : 483		N 🚺 N				F	Records Per Pag

7. If the current date/time is prior to the client's scheduled date/time, the following message will display. Click 'OK' to access the client record.





8. Verify client's demographic information is correct.

	Recipient: testjulie testju	lie Date of Birth:	Age:	Date of Visit: 12/26/2020	
Enter Col	iments				
call Registration			Date o	f Visit (MILCO 1999) 12	26
- Recipient Inform	tion			42	
Country of Resident	United St	ates		~	
First Name	testjulie				
Middle Name	Enter Mid/	die Name (Optional)			
Last Name	testjulie				



9. Scroll down to the 'Screening Questions' section. The screener reviews each question with the client and places 3 initials of screeners in the 'Screener Initials' box and select the appropriate option in the 'Screening Disposition' box (this will most likely be 'Referred for Countermeasure').

Creening Questions			Yes	No	Unknown
1: Will you sneeze when swabbed with a nasopharyngeal swab?			۲	0	0
2: Do you have any other severe, life-threatening allergies?			۲	0	0
3: Do you consent to a COVID-19 test?			۲	0	0
	Screener Initials:	Screening Disposition			
		 Select Screening Disposition			
		Select Screening Disposition			
termeasure		Referred for Countermeasure Referred for Medical Evaluation Other Recipient Declined Countermeasure			

- **Referral for Countermeasure** = Vaccine
- Referred for Medical Evaluation = Review with Medical Consultant
- **Recipient Declined Countermeasure**= No Vaccine

Health Commerce System Countermeasure Data Management System (CDMS) Operation Management

10. Creating this record will confirm in CDMS that the client came to the vaccination clinic (but does not confirm that the client received a vaccination of any kind).

creening Questions	Ye	s No	Unknown
1: Will you sneeze when swabbed with a n	asopharyngeal swab?	0	0
2: Do you have any other severe, life-threa	atening allergies?	0	0
3: Do you consent to a COVID-19 test?		0	0
Screener Initials:	Screening Disposition		
	Referred for Countermeasure ~		
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11. Be sure to select Create Record to save the record and check in the client!

NOTE: This created record may be used with other systems to assist in follow-up and scheduling clients for second doses of the COVID-19 vaccine.

12. The client will no longer be viewable from the Recalled Registration List. The record will now be viewable on the 'Recall Visit List'.