Welcome to ImmuNet!

NOTE: If you are reporting via your EHR/EMR, please ensure your vendor has mapped the correct CVX codes as follows:

- **Jynneos - 206**
- **ACAM2000 – 75**

PLEASE SEND AS NEW IMMUNIZATIONS; NOT HISTORICAL. Remember you can use PrepMod to report immunization data, if you don't have an Electronic Health Record (EHR), or if your EHR is having issues.

To report MPX (Monkeypox) manually to ImmuNet, search for the patient under which you would like to add the MPX vaccine.

On the left navigator, click **Patients**, **Patient Search.**

Patients
> Patient Search

Click on the link of the desired patient, if the search yields more than one result.

Click **Add Immunization**.

Add Immunization

NOTE: Choose 1 of the 2 scenarios and proceed as follows:

1. **Scenario 1 – MPX inventory has been entered into ImmuNet (while not required, it is recommended for LHDs to add their inventory into ImmuNet)**
2. **Scenario 2 – MPX Inventory that is NOT in ImmuNet (while not required, it is recommended' for LHDs to add their inventory into ImmuNet)**
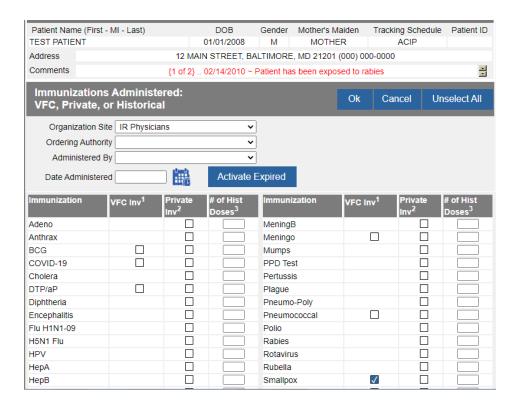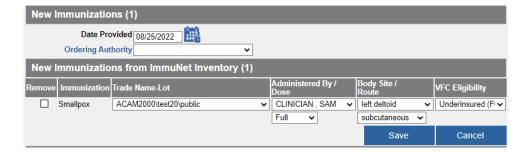
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Scenario 1 – MPX inventory has been entered into ImmuNet (while not required, it is recommended for LHDs to add their inventory into ImmuNet)

Locate **Smallpox** under the **VFC Inv1** column and click in the corresponding checkbox

Patient Name (First - MI - Last)		DOB	Gender	Mother's Maiden	Tracking Schedule	Patient ID
TEST PATIENT		01/01/2008	M	MOTHER	ACIP	
Address		12 MAIN STREET, BALTIMORE, MD 21201 (000) 000-0000				
Comments		{1 of 2} .. 02/14/2010 ~ Patient has been exposed to rabies				

Immunizations Administered: VFC, Private, or Historical   [Ok] [Cancel] [Unselect All]

Organization Site: IR Physicians
Ordering Authority:
Administered By:
Date Administered: [   ] [Activate Expired]

Immunization	VFC Inv¹	Private Inv²	# of Hist Doses³	Immunization	VFC Inv¹	Private Inv²	# of Hist Doses³
Adeno		☐	[ ]	MeningB		☐	[ ]
Anthrax		☐	[ ]	Meningo	☐	☐	[ ]
BCG	☐	☐	[ ]	Mumps		☐	[ ]
COVID-19	☐	☐	[ ]	PPD Test		☐	[ ]
Cholera		☐	[ ]	Pertussis		☐	[ ]
DTP/aP	☐	☐	[ ]	Plague		☐	[ ]
Diphtheria		☐	[ ]	Pneumo-Poly		☐	[ ]
Encephalitis		☐	[ ]	Pneumococcal	☐	☐	[ ]
Flu H1N1-09		☐	[ ]	Polio		☐	[ ]
H5N1 Flu		☐	[ ]	Rabies		☐	[ ]
HPV		☐	[ ]	Rotavirus		☐	[ ]
HepA		☐	[ ]	Rubella		☐	[ ]
HepB		☐	[ ]	Smallpox	☑	☐	[ ]

Click **Ok.**

Enter the **Date Provided** and select the **Ordering Authority** from the drop-down menu. Select the **Trade Name-Lot - JYNNEOS or ACAM2000**.

New Immunizations (1)

Date Provided: 08/25/2022
Ordering Authority: [   ]

New Immunizations from ImmuNet Inventory (1)

Remove	Immunization	Trade Name-Lot	Administered By / Dose	Body Site / Route	VFC Eligibility
☐	Smallpox	ACAM2000\test20\public	CLINICIAN , SAM	left deltoid	Underinsured (F
			Full	subcutaneous	

[Save] [Cancel]

Maryland
DEPARTMENT OF HEALTH

ImmuNet:
Maryland's Immunization Information System

Select the **Administered By/Dose, Body Site/Route,** and the appropriate **VFC Eligibility** description**.**

VFC Eligibility	Administered B
Not VFC Eligit ▾	
Not VFC Eligible	
Medicaid (including Healthy Kids)	
Uninsured	
American Indian/Alaskan Native	
Underinsured (FQHC & LHD only)	

Click **Save**.

The immunization now displays in the patient's record.

NOTE: Under Series, ImmuNet displays Pending or NOT VALID; the vendor has not added the series information to ImmuNet yet. It will automatically be corrected once they have implemented the update.

History	Add Immunization	Patient Demographics	Patient Reports	Blood Lead	Print	Print Confidential

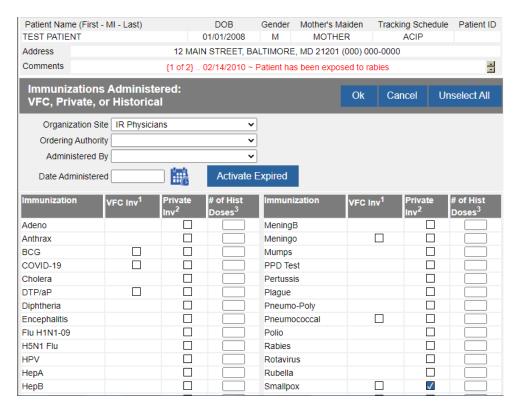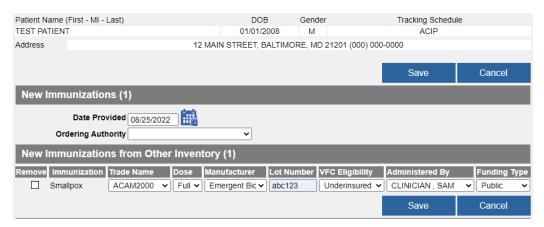| Vaccine Group	Date Administered	Series	Trade Name [Vaccine]	Dose	Owned?	Reaction	Hist?	Edit
DTP/aP	07/01/2009	1 of 5	DAPTACEL®	Full	No			✎
	01/01/2010	2 of 5	Pentacel®	Full	No			✎
	05/01/2010	3 of 5			No		Yes	✎
	01/25/2011	4 of 5	DT®	Half	No			✎
HepA	03/09/2010	1 of 2			No		Yes	✎
	03/01/2011	2 of 2			No		Yes	✎
HepB	01/02/2008	1 of 3			No		Yes	✎
	01/02/2011	2 of 3	Engerix-B Peds®	Full	No			✎
	03/23/2011	3 of 3	Engerix-B Peds®	Full	No			✎
	05/08/2012		Engerix-B Peds®	Full	No			✎
Hib	05/01/2008	1 of 2			No		Yes	✎
	01/01/2010	2 of 2	Pentacel®	Full	No			✎
Influenza	11/15/2010	1 of 2	Flu-Mist®	Full	No			✎
	01/02/2011	2 of 2	Fluarix p-free®	Full	No			✎
Measles	01/25/2011		Measles®	Full	No			✎
MMR	05/01/2009	1 of 2	MMR II®	Full	No			✎
	05/08/2012	2 of 2	MMR II®	Full	No			✎
Pneumococcal	04/01/2008	1 of 3	Prevnar 7®	Full	No			✎
	07/15/2009	2 of 3	Prevnar 7®	Full	No			✎
	03/23/2011	3 of 3	Prevnar 13®	Full	No			✎
Polio	01/01/2010	1 of 3	Pentacel®	Full	No			✎
	04/29/2010	2 of 3	IPOL®	Full	No	Yes		✎
Rabies	02/14/2010	1 of 4	RABAVERT®	Full	No			✎
Smallpox	08/25/2022	NOT VALID	ACAM2000®	Full				✎

Scenario 2 – MPX Inventory that is NOT in ImmuNet (while not required, it is recommended for LHDs to add their inventory into ImmuNet)

Locate **Smallpox** under the **Private Inv2** column and click in the corresponding checkbox.

Patient Name (First - MI - Last)			DOB	Gender	Mother's Maiden	Tracking Schedule	Patient ID
TEST PATIENT			01/01/2008	M	MOTHER	ACIP	
Address			12 MAIN STREET, BALTIMORE, MD 21201 (000) 000-0000				
Comments			{1 of 2} .. 02/14/2010 ~ Patient has been exposed to rabies				

Immunizations Administered: VFC, Private, or Historical — Ok | Cancel | Unselect All

Organization Site: IR Physicians
Ordering Authority:
Administered By:
Date Administered: [ ] **Activate Expired**

Immunization	VFC Inv[1]	Private Inv[2]	# of Hist Doses[3]	Immunization	VFC Inv[1]	Private Inv[2]	# of Hist Doses[3]
Adeno		☐	[ ]	MeningB		☐	[ ]
Anthrax		☐	[ ]	Meningo	☐	☐	[ ]
BCG	☐	☐	[ ]	Mumps		☐	[ ]
COVID-19	☐	☐	[ ]	PPD Test		☐	[ ]
Cholera		☐	[ ]	Pertussis		☐	[ ]
DTP/aP	☐	☐	[ ]	Plague		☐	[ ]
Diphtheria		☐	[ ]	Pneumo-Poly		☐	[ ]
Encephalitis		☐	[ ]	Pneumococcal	☐	☐	[ ]
Flu H1N1-09		☐	[ ]	Polio		☐	[ ]
H5N1 Flu		☐	[ ]	Rabies		☐	[ ]
HPV		☐	[ ]	Rotavirus		☐	[ ]
HepA		☐	[ ]	Rubella		☐	[ ]
HepB		☐	[ ]	Smallpox	☐	☑	[ ]

Click **Ok.**

Enter the **Date Provided** and select the **Ordering Authority** from the drop-down menu. Select the **Trade Name - JYNNEOS or ACAM2000** (the **Manufacturer** will auto-populate), **Dose**, and enter the **Lot Number**.

Patient Name (First - MI - Last)		DOB	Gender	Tracking Schedule	
TEST PATIENT		01/01/2008	M	ACIP	
Address		12 MAIN STREET, BALTIMORE, MD 21201 (000) 000-0000			

Save | Cancel

New Immunizations (1)

Date Provided: 08/25/2022
Ordering Authority: [ ]

New Immunizations from Other Inventory (1)

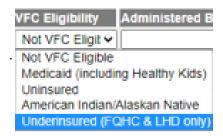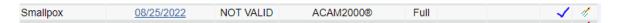| Remove	Immunization	Trade Name	Dose	Manufacturer	Lot Number	VFC Eligibility	Administered By	Funding Type
☐	Smallpox	ACAM2000	Full	Emergent Bic	abc123	Underinsured	CLINICIAN , SAM	Public

Save | Cancel

Select the appropriate **VFC Eligibility** description.

Select the **Administered By** from the drop-down menu and finally select the **Funding Type** as **Public**.

Click **Save**.

Enter the **Body Site** and **Administered Route** by clicking the pencil/paper icon and the end of the row.
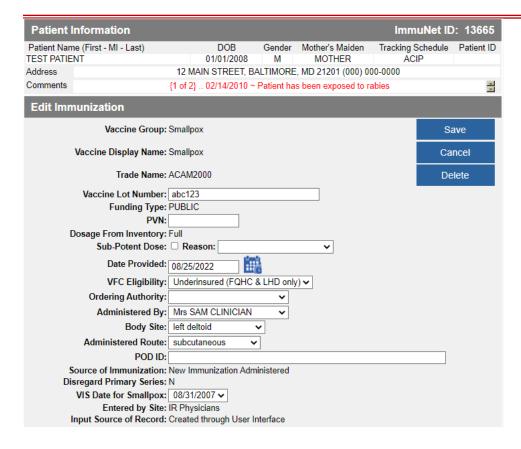

Select the appropriate **Body Site** and **Administered Route.**

Click **Save**.

The immunization now displays in the patient's record.

NOTE: Under Series, ImmuNet displays Pending or NOT VALID; the vendor has not added the series information to ImmuNet yet. It will automatically be corrected once they have implemented the update.

Patient Information — ImmuNet ID: 13665

Patient Name (First - MI - Last)	DOB	Gender	Mother's Maiden	Tracking Schedule	Patient ID
TEST PATIENT	01/01/2008	M	MOTHER	ACIP	

Address	12 MAIN STREET, BALTIMORE, MD 21201 (000) 000-0000
Comments	{1 of 2} .. 02/14/2010 ~ Patient has been exposed to rabies

Patient Notes (0) *view or update notes*

History	Add Immunization	Patient Demographics	Patient Reports	Blood Lead	Print	Print Confidential

Vaccine Group	Date Administered	Series	Trade Name [Vaccine]	Dose	Owned?	Reaction	Hist?	Edit
DTP/aP	07/01/2009	1 of 5	DAPTACEL®	Full	No			
	01/01/2010	2 of 5	Pentacel®	Full	No			
	05/01/2010	3 of 5			No		Yes	
	01/25/2011	4 of 5	DT®	Half	No			
HepA	03/09/2010	1 of 2			No		Yes	
	03/01/2011	2 of 2			No		Yes	
HepB	01/02/2008	1 of 3			No		Yes	
	01/02/2011	2 of 3	Engerix-B Peds®	Full	No			
	03/23/2011	3 of 3	Engerix-B Peds®	Full	No			
	05/08/2012		Engerix-B Peds®	Full	No			
Hib	05/01/2008	1 of 2			No		Yes	
	01/01/2010	2 of 2	Pentacel®	Full	No			
Influenza	11/15/2010	1 of 2	Flu-Mist®	Full	No			
	01/02/2011	2 of 2	Fluarix p-free®	Full	No			
Measles	01/25/2011		Measles®	Full	No			
MMR	05/01/2009	1 of 2	MMR II®	Full	No			
	05/08/2012	2 of 2	MMR II®	Full	No			
Pneumococcal	04/01/2008	1 of 3	Prevnar 7®	Full	No			
	07/15/2009	2 of 3	Prevnar 7®	Full	No			
	03/23/2011	3 of 3	Prevnar 13®	Full	No			
Polio	01/01/2010	1 of 3	Pentacel®	Full	No			
	04/29/2010	2 of 3	IPOL®	Full	No	Yes		
Rabies	02/14/2010	1 of 4	RABAVERT®	Full	No			
Smallpox	08/25/2022	NOT VALID	ACAM2000®	Full				