

# Creating a Vaccine Order Tip Sheet

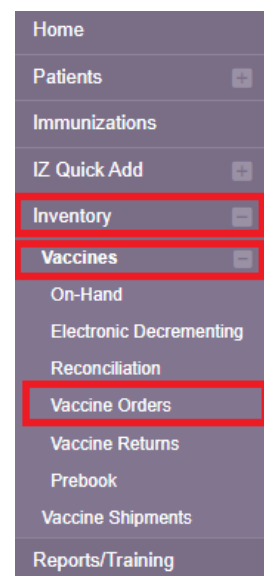
## Requirements to place a Vaccine Order:

- A vaccine reconciliation completed within the last 14 days.
  - To view the clinic’s most recent reconciliation:
    - On the DelVAX homepage, select the clinic name.
    - Select “Inventory,” then select “Vaccines.”
    - Choose “Reconciliation.”
    - Select the Inventory Location.
    - Click “search”
    - This will generate a list of reconciliations. Verify that a reconciliation has been completed within the last 14 days. If not, complete a reconciliation prior to ordering vaccine.
- Digital Data logger downloads must be submitted to the Bureau of Immunizations, following the placement of a new order. Submit downloads from the date of last reconciliation/order through the date of the current order. Recent digital data logger reports should be submitted to [immunizedph@delaware.gov](mailto:immunizedph@delaware.gov).
  - Ensure the clinic PIN number is included on the submitted downloads so the correct practice can be identified.
- Ensure the annual “You Call the Shots” training is up-to-date for staff members required to complete the training (Primary and Back up coordinators).

**Vaccine orders will not be processed if the above requirements are not met.**

## Steps for Creating a Vaccine Order:

1. From the DelVAX homepage, select the clinic name.
2. On the sidebar/main navigation menu, select “Inventory.” Then select “Vaccines” and finally select “Vaccine Orders.”
3. Select the clinic name and then select “Search.” Search to see if there is an existing open order.
  - a. An existing open order will be listed as “In Work” under Order Status.
    - i. If there is an open order, select this order to continue adding/editing or contact the Bureau of Immunizations to delete the order.
      1. The open order must be completed and submitted, or deleted, as no additional orders may be submitted until this is resolved.



Search

Clinic: **QUALITY INSIGHT PEDIATRICS** | Order Status: **(ALL)** | Order Type: **(ALL)**  
 Order Date Range: From: 05/23/2022 Through: 08/23/2022 | Date Submitted to VTrckS Date Range: From: MM/DD/YYYY Through: MM/DD/YYYY

Order Number	Order Date	Order Status	Order Type	Date Submitted to VTrckS	Order Detail
<b>QUALITY INSIGHT PEDIATRICS - 000001</b>					
2022080100000101	08/01/2022	SUBMITTED FOR APPROVAL			<input type="button" value="View"/>
2022072700000101	07/27/2022	SUBMITTED FOR APPROVAL			<input type="button" value="View"/>
2022072000000101	07/20/2022	SUBMITTED FOR APPROVAL			<input type="button" value="View"/>
2022071800000101	07/18/2022	APPROVED	INFLUENZA	07/18/2022	<input type="button" value="View"/>
2022060100000101	06/01/2022	APPROVED			<input type="button" value="View"/>
2022052500000101	05/25/2022	APPROVED			<input type="button" value="View"/>

- If there are no open orders, click “Add New Vaccine Order” in the top right hand corner to begin.
- Select the clinic name from the drop down.
- If the vaccine order will be an Influenza or a COVID-19 vaccine order, click the appropriate box or boxes below the clinic name.
  - If you are ordering COVID-19 or Influenza vaccine, these vaccines must be placed on their own individual orders.
- Click “Next.”

Add - Select Clinic

Clinic \*

Will this be an Influenza order?  Will this be a COVID-19 order?

- Verify that the primary shipping contact, address, and appropriate times to receive deliveries are correct.

- a. If the shipping information is incorrect, contact the Bureau of Immunizations.
- b. If the shipping information is correct, click the box beside the red font, to attest to your review then, choose “Next.”

Vaccine Order Pre-Check i

**Confirm Shipping Information**

✔ Clinic: QUALITY INSIGHT PEDIATRICS (000001)  
✔ Email: ANY@EMAIL.COM  
✔ Phone: 302-555-1234  
✔ **Primary Shipping Contact**  
     Name: PRIMARY CONTACT  
     Phone: 302-555-1234  
     Fax:  
     Email:

✔ **Shipping Address**  
 1234 ABCDE ST  
 DOVER, DE 19901-0000

✔ **Delivery Information**

	Delivery Time 1		Delivery Time 2	
	From	To	From	To
Monday	08:00	19:00		
Tuesday	08:00	19:00		
Wednesday	08:00	19:00		
Thursday	08:00	19:00		
Friday	08:00	19:00		
Saturday				
Sunday				

**Special Instructions:** NO SPECIAL INSTRUCTIONS  
I have reviewed the above shipping information and I certify the information is correct.

Cancel
Next


9. In the Vaccine | MFG | NDC box begin typing the name of the vaccine.
10. Choose the correct vaccine from the list.

**Vaccine | Mfg | NDC | Brand/Packaging**

TDAP, ADSORBED	PMC	49281-0400-10	ADACEL (0.5 ML X 10 VIALS)
DTaP (Daptacel) vials)	PMC	49281-0286-10	Daptacel (0.5 mL x 10 vials)
DTaP-Hib-IPV (Pentac vial)	PMC	49281-0510-05	Pentacel (0.5 mL x 5 vial)
Hib (PRP-T) vials)	PMC	49281-0545-05	Acthib (0.5 mL x 5 vials)
MCV4 (Menactra) vials)	PMC	49281-0589-05	Menactra (0.5 mL x 5 vials)
Polio-IPV vial)	PMC	49281-0860-10	IPOL (5.0 mL vial)
Td (adult), P-Free vial)	PMC	49281-0215-10	TENIVAC (10 pack- 1 dose vial)
Td (adult), P-Free syringe)	PMC	49281-0215-15	Tenivac (10 pack- 1 dose syringe)
Tdap, Adsorbed vials)	PMC	49281-0400-10	Adacel (0.5 mL x 10 vials)
Tdap, Adsorbed syr)	PMC	49281-0400-15	Adacel (0.5 mL x 5 syr)
Tdap, Adsorbed vials)	SKB	58160-0842-11	Boostrix (.50 mL x 10 vials)
Tdap, Adsorbed	SKB	58160-0842-52	Boostrix (.50 mL x 10 syr)

- In the intent box, select if this is "Pediatric" or "Adult" vaccine.
- Next, add the quantity of packages. \*Note: The doses per package and total doses will auto-populate. Once the quantity of packages has been entered, double check that the total doses are correct. Adjust the number of packages if the number of doses is incorrect.

**Vaccine | Mfg | NDC | Brand/Packaging**


TDAP, ADSORBED	PMC	49281-0400-10	ADACEL (0.5 ML X 10 VIALS)		
Intent	Quantity of Packages	Doses Per Package	Total Doses	Cost Per Package	Total Cost (\$)
PEDIATRIC	8	10	80	304.10	2432.80
Add To Order		Clear			
 <b>There are no vaccines in this order</b>					
				Total Doses	Total Cost
				0	\$0.00

- Select "Add to Order."

Vaccine | Mfg | NDC | Brand/Packaging

TDAP, ADSORBED | PMC | 49281-0400-10 | ADACEL (0.5 ML X 10 VIALS)

Intent	Quantity of Packages	Doses Per Package	Total Doses	Cost Per Package	Total Cost (\$)
PEDIATRIC	8	10	80	304.10	2432.80

 There are no vaccines in this order

Total Doses	Total Cost
0	\$0.00

14. Repeat this process to add additional vaccines.
15. Once all of the vaccines that need to be ordered have been added, click the dropdown arrow next to “update” in the top right hand corner.
16. Select “Submit to VFC Program.” The order is not complete until it has been submitted.

Vaccine Order [Learn More](#)

[View Vaccine Inventory Reconciliation](#)

