DEPARTMENT OF HEALTH

Client Search and Printing Immunization Records

MIIC USER GUIDANCE TRAINING RESOURCE

This guide describes how to search for a client, what a record contains, and how to print a client immunization record/report.

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Getting started

- 1. Log into MIIC using your organization code, username, and password.
- 2. Find the client search feature based on your MIIC-user type.
 - Most users will be able choose manage client.



• Read only users will choose find client.



Reports only users will choose view client report.



Client search

1. Use the Client Search Criteria screen to search for clients in MIIC.

Client Search Criter	I	
Last Name	Birth Date Fi	nd
First Name	Gender O M O F O N/A	ear
Middle Name	Phone	
Mother's Maiden Last	Chart #	
Mother's First Name	MIIC ID	

- 2. You need to search by a minimum of two fields of either a last name, first name, or birth date.
 - There is an exception if you have the MIIC ID number, you can search by that number alone. Each client in MIIC has a unique MIIC ID.
- 3. You must enter at least three characters of the last name or two characters of the first name or the birth date. The date format is MMDDYYYY (two-digit month, two-digit day, and four-digit year). MIIC automatically enters the slashes.
- 4. When searching, some results that may appear are:
 - Match to one record. If only one client in MIIC matches the criteria, you will go directly to the client information and immunizations screen.
 - Multiple possible client matches. You will see a list of possible matches if there is more than one potential match. You can click on anything in blue and underlined to go to the client information and immunizations screen.

Client Search	n Criteria										
Las	t Name			Bir	rth Date 09	9/21/2008		Find			
Firs	t Name]	Gender	nder OM OF ON/A			Clear		
Middle	e Name	e]	Phone	-	-				
Mother's Maid	r's Maiden Last]	Chart #							
Mother's Firs	's First Name		MIIC ID								
			Possible	Matches: 2							
Last Name	First Name	t Middle Birth e Name Date		Chart #	Mother's Maiden First	s Mother's Maiden Last	Gender	Phone	АКА		
DUCK	DON		09/21/2008				М	555-5555			
DUCK	DONALD		09/21/2008				М	555-5555	\checkmark		

Note: The column "AKA" means alias or "also known as". Clients listed with a nickname, misspelled first or last names, or incorrect date of births will show as a separate match or alias, indicated by a checkmark in the "AKA" column. Choosing either option will bring you to the same client profile.

• Your search found too many results. Refine your search criteria or add additional criteria to narrow the search.

Last Name	First Name	Middle Name	Birth Date	Chart #	Mother's Maiden First	Mother's Maiden Last	Gender	Phone	ака
Your search fou	ind too mai	ny (91) resu	ilts. Please	refine your	search crit	teria.			

• No clients were found for the requested search criteria.

Client Search Criter	a
Last Name	wh Birth Date Find
First Name	sn Gender O M O F O N/A Clear
Middle Name	Phone
Mother's Maiden Last	Chart #
Mother's First Name	MIIC ID
Firs	t Middle Birth Mother's Mother's
Last Name Nam	e Name Date Chart # Maiden Maiden Gender Phone AKA First Last
No clients were found	for the requested search criteria.

Note: There are also instances where too many clients meet the criteria and will display the same message. If you only used the first 2-3 letters of the first and/or last name, consider adding additional letters or search criteria.

Interpreting a MIIC immunization record

A MIIC Immunization Record includes the following:

Client In	formation								MIIC	ID: 901	16085
Client Nan	ne (First - MI - Last)		DOB	Gender	Mother	s Maiden	Tra	cking S	chedul	C e Nu	hart Imber
DONALD (QUACK DUCK	02/02/1950	М				ACI	Р			
Address		4321 ANY STREET, DISNEYLAND, CA 55303 (421) 124-4211									
Comments											×
History)	Ad	ld Immunizatio	n Edi	t Client	Reports	F	Print	Print	Confide	ential
Vaccine Group	Date Administe	red Seri	es \	/accine	Trade N	ame]		Dose	Owne	d? His	t? Edit
HepA	02/01/200	<u>5</u> 1 of	2 Hep/	A-Ped 2 D	ose [Havri	ix-Peds ®]		Full			1
НерВ	06/18/200	8 1 of	3 ⊦	lepB-Adult	t [HepB-A	dult ®]		Full			1
Influenza	08/28/200	9 Boos	ter Flu, trivale	nt, live att	enuated [®]	FluMist triv	alent	Full	No		1
MMR	06/18/200	8 1 of	2 R	ubella-Mu	mps (Biav	ax II ®]		Full			1
Td/Tdap	06/18/200	8 1 of	4 Td-Pres	ervative fr	ee [Deca	vac 7+ yrs	®]	Full			- 14
Tetanus	<u>11/01/201</u>	7	Tetanus	toxoid, ad	sorbed [T	T adsorbed	1®]		No	Ye	is 🧳
Current A	ge: 70 years, 8 mont	hs, 5 days									
Vaccine	s Recommended	/ Selected	Tracking Sci	hedule					A	dd Sel	ected
Select	Vaccine Group	Earliest	Date Re	comme	nded Dat	te Ov	/erdu	ie Dat	e L	.atest	Date
\checkmark	HepA	08/01/2	005	08/01/	2005		03/01	/2006			
\checkmark	HepB	07/16/2	800	07/16/	2008		09/10	/2008			
✓	Influenza	09/25/2	009	07/01/	2020		08/28	/2010			
	MMR				Ma	ximum Ag	e Exc	eeded			
\checkmark	Pneumo-poly	02/02/2	015	02/02/	2015		02/02	/2016			
~	Td/Tdap	07/16/2	008	07/16/	2008		09/10	/2008			
~	Zoster/shingles	02/02/2	000	02/02/	2000		02/02	/2002			
6											

- 1. **Client Information**: The area at the top of the screen displays client contact information (e.g., name, address, and phone number), depending on what has been previously entered. Client comments indicate that there is some additional information pertaining to immunizations. This would include, for example, a history of chickenpox or a refusal of an immunization.
- 2. **Immunization History**: The middle section lists vaccine groups alphabetically, along with the actual date the immunization was administered and the sequence of doses as entered in MIIC (plus the trade name if entered). **Owned** or **Hist** indicates how the immunization was entered in MIIC.
- Recommended Vaccines: At the bottom of the screen is the MIIC forecaster. This will forecast what immunizations are due for the client based on the client's age and the immunization history already in MIIC. Please refer to <u>Interpreting a MIIC Vaccination Record</u> <u>(www.health.state.mn.us/people/immunize/miic/train/interpret.html)</u> for more information on how to interpret the forecaster.

Printing a record

1. To print a record for a client, most users can select the **Reports** button on the client's record.

Note: Read Only users can select "Print MIIC Immunization Report" to open a separate window, showing a full MIIC Immunization Report (see step 3).

2. This will bring you to the report page. Click on the MIIC Immunization Report button.



3. This will open a separate window, showing a full MIIC Immunization Report that you can save as either a PDF or print.

DEPARTMENT OF HEALTH HINNEDSTA I MARENZATION NOTAMATION CONNECTION	Minnesota II	mmur	ization F	Report			
Name (L, F M): SOM	ERSET, ALMA SOLANIO				MIIC ID: 90160		
Date of Birth: 04/09/2019	Age: 3 yea	rs. 11 month	s. 18 davs1 dav	Gender: F	Org ID: N		
This report contains immunizal vaccinations. This report shoul Immunization History	tions submitted to MIIC. Provide d be acceptable to use as proof	r participation i of immunizatio	n MIIC is voluntary. Ple in for child care, school	ase check with your he , and other purposes.	althcare provider if you notice miss		
Vaccine Type	Dose Number	Date	Vaccine (Trade N	ame)			
DTP/aP	1015	06/09/2019	DTaP/Polio/Hib (Pent	anal #1			
DTP/aP	2 of 5	08/09/2019	DTaP/Polio/Hib [Pen	acel ®1			
DTP/aP	3 of 5	10/09/2019	DTaP/Polio/Hib [Pent	acel @]			
DTP/aP	4 of 5	04/09/2020	DTaP/Polio/Hib [Pen	acel ®]			
Hib	1 of 4	06/09/2019	DTaP/Polio/Hib [Pent	acel ®]			
Hib	2 of 4	08/09/2019	DTaP/Polio/Hib (Pent	acel ®I			
Hib	3 of 4	10/09/2019	DTaP/Polio/Hib [Pent	acel ®I			
Hib	4 of 4	04/09/2020	DTaP/Polio/Hib [Pent	acel ®I			
Polio	1 of 5	06/09/2019	DTaP/Polio/Hib [Pent	acel ®			
Polio	2 of 5	08/09/2019	DTaP/Polio/Hib [Pent	acel ®]			
Polio	3 of 5	10/09/2019	DTaP/Polio/Hib [Pent	acel ®I			
Polio	4 of 5	04/09/2020	DTaP/Polio/Hib [Pent	acel ®I			
Not Valid = According to the ni and may need to be repeated I Immunization Comments	ational immunization schedule a lo ensure proper immunity. Plea	nd FDA license ise check with y	indications, this vaccir your healthcare provide Immunizations Re	ne dose was given outs r if you have commended	Recommended Indications		
Nees		Date	Vaccine Column 40		Keconiniended Date		
190110			DTD/-D		04/00/2019		
			D1P/aP 04/09/2023				
			HepA 04/09/2020				
			Hepb 0409/2019				
			Influenza COMPLETE				
			MMD		04/09/2020		
			Desume and				
			Polio		04/00/2022		
			Varicella		04/09/2020		

MIIC help

For assistance with searching for clients and/or printing client immunization records, contact the MIIC Help Desk using the "Help Desk" button on MIIC for any additional questions or use the light bulb icon to access additional user guidance resources.



Minnesota Department of Health Minnesota Immunization Information Connection (MIIC) PO Box 64975, St. Paul, MN 55164-0975 health.miichelp@state.mn.us | www.health.state.mn.us/miic

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To obtain this information in a different format, call: 651-201-5207.