

Standard 3.5 - Recording, Reporting and Releasing Immunization Information

3.5.1 - Recording Immunization

Immunization is an increasingly complex process. Not only are there multiple vaccines used to prevent the same disease, but immunization schedules can vary from one jurisdiction to another and even from one person to another. Practitioners maintain immunization records for a number of reasons:

- they provide important information about the care (vaccines) the patient has received, and as such provides a degree of information about the client's/patient's immunity against disease;
- they help inform future immunization decisions;
- it may be specifically required by legislation;
- it is a professional requirement and maybe described in professional practice standards; and
- it may be required by organization policy.

In addition to vaccine administration information, any information about serological test results, adverse events following immunization or information related to contraindications or deferrals of future doses of vaccines should be recorded. Refer to Policy 2.6 – *Consent for Immunization* for more detailed information about the documentation required as a part of the consent process.

3.5.2 - Reporting Immunization

Regulation 2009-136 under the *Public Health Act* requires that those who administer a publicly funded vaccine report information to the Minister within one week of administration of the vaccine.

There are three systems in place to report individual level information directly to the Minister:

1. The Public Health Information Solution (PHIS) is a web-based Communicable Disease Surveillance and Management system which includes an Immunization Management component. This component helps in planning, delivering, and tracking of immunizations. The system also monitors adverse reactions, precautions, contraindications, and exemptions.
2. New Brunswick Medicare Program - through unique service codes, data is captured on immunization provided by physicians. This information is entered into PHIS through integration with the two systems.
3. New Brunswick Prescription Drug Program, Plan I – captures data of pharmacists for the administration of seasonal influenza vaccine given to specific eligible groups at the request of the Office of the Chief Medical Officer of Health.

Immunization providers **must maintain client records** that include (at a minimum) the information required by the regulations:

- the name and address of the person to whom the vaccine or biological preparation was administered;
- the Medicare number of the person;
- the date of birth and the gender of the person;
- the date on which the vaccine or biological preparation was administered;
- the name and lot number of the vaccine or biological preparation; and
- the name of the person who administered the vaccine or biological preparation.

3.5.3 - Release of Immunization Records (to individuals and to health-care providers)

In addition to requiring that practice records be maintained, Regulation 2009-136 under the *Public Health Act* requires that those who administer a vaccine to a person give that person a record of the immunization. Personal immunization records are available from local Public Health offices. Refer to Appendix 4.6 and Appendix 4.7.