



# State-Supplied Vaccine (SSV) Training

**Rhode Island Department of Health  
Office of Immunization**

Revised: June 2023

# Information to Review

## State-Supplied Vaccine Program Enrollment

## State-Supplied Vaccine and Eligibility (Adult and Pedi)

### Flu Season

### Reservation

- Products
- Reporting
- Delivery

### OSMOSSIS

- Weekly Ordering (Flu)
- Inventory and Transfers
- Waste and Returns

### Communications to Providers

- Immunization Representatives
- Advisory's

### Data Loggers

- Temperature Excursions
- Daily Login and Audits
- Excursion Process
- Storage and Handling

# SSV Enrollment



## Flu ordering ends May 31

## Reconcile previous flu season

- All doses administered during the previous season must be reported in OSMOSSIS before June 16.
- All flu reserve dose numbers must be submitted before July 1 of the enrollment year. A reservation does NOT constitute an order.

## Enrollment opens **June 1-30**

- Enrollment must be completed by July 1 in order to continue ordering vaccines.

# Vaccine Eligibility



## Pediatric Supply

- Due to agreements with bordering states, there are no restrictions for administering vaccines to children (<19 years).

## Adult Supply

- $\geq 19$  years
- Eligibility: Ask two questions
  1. Are you a Rhode Island resident?  
Yes = eligible. No = ask next question.
  2. Do you receive health benefits through a Rhode Island employer? Yes = eligible. No = not eligible.
- Insurance status:
  - Insured: Free vaccine, bill insurer for administration only.
  - Uninsured: Free vaccine, waive admin fees (optional).

**SSV use for non-eligible patients is prohibited.**

# State-Supplied Vaccines (non-Flu)



- Can be ordered monthly.
- Special order vaccines require RIDOH permission due to limited supply or other circumstances.
- Vaccines are purchased with specific funding types and must be used for the intended age group.

Pediatric Vaccines	
MenQuadfi (MCV4)	Rotarix (Rota)
<b>Prevnar 13 (PCV 13)</b>	Boostrix (TDaP)
Infanrix (DTaP)	PedvaxHib (Hib)
Vaxelis (DTaP/He B/IPV/Hib)	Gardasil (HPV9)
Kinrix (DTaP/IPV)	MMR II
Havrix (Hep A)	Proquad (MMRV)
Engerix-B (Hep B)	Varivax
Bexsero (MenB)	

Adult Vaccines
Bexsero (MenB)
MMR II (MMR)
Gardasil (HPV9)
Varivax
Prevnar 20 (PCV20)
TD
Adacel (Tdap)
MenQuadfi (MCV4)
Havrix (Hep A)
Hep B

Special Order Pediatric Vaccines
TD
IPOL (EIPV)
<b>Pneumovax23 (PPV23)</b>
Menveo (MCV4)



# 2022-2023 Flu Vaccine Products

<u>Vaccine (Funded use)</u>	<u>Manufacturer/ Distributor</u>	<u>NDC</u>	<u>Quadrivalent/ Trivalent</u>	<u>Pkg</u>	<u>P Free</u>	<u>Latex Free</u>
Flulaval 0.5ml (6 mos – 18 yrs)	GlaxoSmithKline	19515-0814-52	Quad	Syr	Yes	Yes
Fluarix 0.5ml (6 mos – 18 yrs)	GlaxoSmithKline	58160-0909-52	Quad	Syr	Yes	Yes
FluMist 0.5ml (2-18 yrs)	AstraZeneca	66019-0310-10	Quad	Spray	Yes	Yes
Flucelvax 0.5ml (6mos+)	Seqirus	70461-0323-03	Quad	Syr	Yes	Yes
Fluzone 0.5ml (19+)	Sanofi Pasteur	49281-0423-50	Quad	Syr	Yes	Yes
Fluzone HD 0.7ml (65+ yrs)	Sanofi Pasteur	49281-0123-65	Quad	Syr	Yes	Yes
Fluad 0.5ml (65+ yrs)	Seqirus	70461-0123-03	Quad	Syr	Yes	Yes

- You must track usage based on the age groups being administered for each of the vaccines.
- You can order flu vaccine every five business days or after delivery of the previous order (whichever comes later), based on RIDOH supply.

# Flu Vaccine – Delivery Schedule



## Pediatric and Adult vaccine order allocation

- Same process as last year.
- RIDOH will group supply based on **age group**.
- RIDOH will fill orders based on **age group need** with any available product purchased for that age group.
- Exception:
  - FluMist - Available to 2-18 years of age
- This process helps eliminate reservation and product delivery issues.

## Manufacturer release schedule:

- 50% by end of September
- 100% by first week of December

# Flu Vaccine – Delivery Schedule



## First orders

- Dependent on manufacturer releases and inventory amounts received.
- Minimum 20% (per age group) RIDOH pre-book supply available for distribution.

## All subsequent orders

- Will be filled based on supply
- If RIDOH has received 35% of the total season's allocation, the provider may order up to 35% of their season's reserve.
- As RIDOH supply increases, so will provider order availability.



# OSMOSSIS



## Rhode Island online vaccine ordering

- Ocean State Management of State-Supplied Immunizations System =OSMOSSIS)

## Orders must be submitted online

- Two sections: Non flu routine vaccines (monthly) and flu (every 5 business days)

## Ordering process

1. Provider submits order.
2. Order is approved or denied by RIDOH within two business days.
3. Order is processed (submitted to CDC) within one business day of approval.
4. If your order is placed on hold, the timeline above will change until the issue is resolved and the order is released from hold.

***For monthly order quantities more than a 90-day on-hand supply, orders will be adjusted to a 90-day on-hand supply. We do not encourage ordering larger amounts of vaccines if the vaccine is to have on hand and not needed for a specific reason. Should a temperature excursion happen, less vaccine to be spoiled. Vaccine can be ordered monthly. If you need the additional vaccine for a specific reason, please note that in your order.***

# Weekly Ordering (Flu)



## Weekly Flu ordering module

- Report doses administered:
  - By age group: 6-35 months, 2-18 years (Mist), 3-18 years, 19+ years (including 65+ not enhanced), 65+ enhanced vaccine (Fluzone HD and Fluvad only).
  - Pregnant women and healthcare workers.
- Report inventory on hand, by product and lot number.
- Storage unit temperature tracking for period of time since last order.
  - SSV-supplied logger – viewed by RIDOH from cloud
  - Privately purchased logger – upload logger temperature report with order
  - Email – only temporary if data logger has an issue and waiting for Immunization Team Rep to follow-up.

## Orders will be shipped:

- The same week if order is **approved** on a Monday or Tuesday.
- The following week if order is **approved** Wednesday through Friday.
- Based on available supply and provider's allowable delivery dates.

# Inventory and Transfers



## **On-hand inventory must be reported with each order**

- Combined total of all storage units.
- Administered total will be calculated by OSMOSSIS.

## **Transferring SSV**

- Allowed **only** with Rhode Island SSV-enrolled locations.
- Vaccines purchased for pediatric population can only be transferred for pediatric use. The same applies for adult vaccine.
- Products may **not** be transferred across state lines.
- Transfers **must** be entered into OSMOSSIS and accepted within 48 hours.

# Waste and Returns



**Must be reported through OSMOSSIS within 48 hours of event.**

- **Return** – expired or spoiled vaccine in its original condition (original package) and may be returned as such.
- **Waste** – vaccine no longer in its original condition (pre-drawn, damaged, reconstituted, etc.) must be entered as waste

Please refer to the OSMOSSIS Self-Study if you need instructions.

**If you choose OTHER as the reason, you must provide a reason for the return or waste.**

# Waste and Returns (continued)



## RIDOH approves returns as needed (upload file)

- Bi-weekly or monthly(middle and end of month)
- When RIDOH uploads the “returns” file to CDC, OSMOSSIS generates an email to the **vaccine contact**.

## Return labels

- Within 24 hours of the OSMOSSIS-generated email, a UPS return label will be emailed from **McKesson Specialty Care Dist [mailto:pkginfo@ups.com]** to the **vaccine contact**.
- The email’s subject will be: **“UPS Label Delivery, <Label tracking number>.”**

# Waste and Returns (continued)

- **Contact RIDOH if you do not receive an email from McKesson within 48 hours of the OSMOSSIS notification email.**
- Return labels are valid for **30 days**. Returns must be done within 30 days of receiving email
- Returns need to be collected at the SSV PIN shipping address if UPS does not make regular stops, you can bring to a UPS drop off site.

## Packaging returns

- Place returns in a plain box for courier pick-up.
- No cold chain required.
- Include OSMOSSIS packing slip in the shipping container.
- Attach shipping label from McKesson.

## UPS pick-up or drop-off

- No charge for facilities with regular pick-up/drop-off UPS service.
- \$5 pick-up fee for facilities without UPS service.
- Drop off at UPS store and ship at no cost.

# Waste and Returns (continued)



## End-of-season returns

- RIDOH will notify SSV enrollees when flu vaccines can be returned
- If you need assistance, please contact your immunization representative

## Wasted product

- Enter in OSMOSSIS.
- Discard “live” vaccines with medical waste.
- All other vaccines may be discarded with regular waste.
  - Regulation DEM-OWM-MW-1-2009 (Chapter 23-19.12 sect. 2.3 and 2.4)

# Communications to Providers



Primary channels:

1. Immunization Representative
2. Provider Advisory

## Immunization Representative

- Listed in the SSV menu header
- Calls or emails practices

## Advisory

- Sender is: “Rhode Island Department of Health”, on occasion from **your Immunization Representative**
- **PLEASE READ ALL ADVISORIES** - Often contains time-sensitive information and program updates
- Can be found on RIDOH website on immunization page under “For Providers”.



# Communications to Providers

## Sample Vaccine Return Email



Subject: Vaccine Return Label Notification  
From: Rhode Island Vaccine Manager <[DOH.vaccine@health.ri.gov](mailto:DOH.vaccine@health.ri.gov)>  
Date: Apr 13, 2018, 10:02 AM  
To:

Dear SSV Provider,

RIDOH processed a batch of **VACCINE RETURNS** today and you should receive a return label (within 48-hours) with the return label included. Below is an example of the return label you should expect to see in your Spam/Junk/Clutter folders for the email. If the email arrives in your Spam/Junk/Clutter folders, please right click on the email and choose MOVE TO INBOX. This process will ensure the email is delivered to your inbox. This process will deliver the email to your inbox (unless your network administrator disallows the email).

Please follow each of the steps required in the UPS information below. Failure to retrieve and use the label within 30-days of the email is at the provider's expense.

Please include the OSMOSSIS Packing Slip that is now available in your Vaccine Ordering Menu page.

Should your label not be delivered within 48-hours of this email please follow up.

Thank you for your cooperation in this matter.

RIDOH Immunization Team

===== Below is an SAMPLE of a label notification from McKesson Specialty Care Dist =====

From: McKesson Specialty Care Dist [<mailto:pkginfo@ups.com>]  
Sent: Friday, July 28, 2017 11:45 AM  
To: [SSV Practice Vaccine Contact Email]  
Subject: [EXTERNAL] : UPS Label Delivery, 1Z2R43839092909524

ym1f\_\_\_\_\_



### UPS Returns Label Delivery

This notice tells you that a UPS shipper has sent you an electronic label.

You can print and use this label to include in your outbound shipment, or send it to the consignee. The label will be available for 30 days.

Note: When retrieving your label below, we will provide you with both a UPS Returns Label and Commercial Invoice if the invoice was prepared by the original shipper.

[View UPS Returns Documentation Instructions](#)

[Retrieve Your Shipment Label.](#)

[Schedule a Pickup.](#)

[Get the Receipt.](#)

[Find the Closest Service Location.](#)

[Find Out More About Returning Your Shipment.](#)

# Communications to Providers Advisory Sample



March 19, 2019

## OSMOSSIS Blackout

Due to CDC's renewal of Childhood Vaccine Contracts on April 1, 2019, tracking system (VTrckS) and OSMOSSIS will be down starting at noon system will resume on April 2 at 9:00 a.m.

Any orders placed after the noon deadline on March 27 will be declined, and any incomplete orders will be deleted from OS

If you have any questions, please contact

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April 15, 2019

## Important Message Regarding Vaccine Providers and Inventory

We are aware that a company called VaxStability, Inc. has been reaching out to state-supplied vaccine providers like you and offering a pilot program to monitor vaccine inventory, so we would like to clarify some claims in this messaging that are misleading or inaccurate.

**Rhode Island Department of Health**

[EXTERNAL] : [Test] Important Message Regarding Vaccine Providers and Inventory  
April 15, 2019 Important Message Regarding Vaccine Providers and Inventory We

Fri 4/12

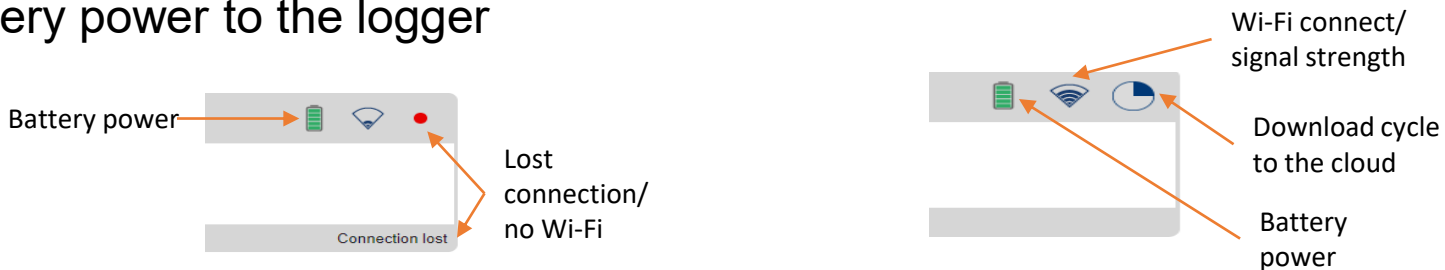
Fri 4/12/2019 4:37 PM

Rhode Island Department of Health <chenelle.chin@health.ri.gov>  
[EXTERNAL] : [Test] Important Message Regarding Vaccine Providers and Inventory

# Data Logger Requirements



- Log into the Cloud daily to view temperatures, confirm Wi-Fi connection and battery power to the logger



- You must put your initials in the comment field in the **table view** near an audit when you log into the cloud once a day
- Twice daily audit checks
- When your WI-FI changes, notify your Immunization Rep to prevent disruption
- If your practice is closing, you must make arrangements to have the data logger picked up and all vaccines transferred out.
- If the data logger is damaged, misplaced or lost, you will be responsible to replace it
- **Contact your Immunization Representative for assistance**

# Temperature Excursion Reporting Process



## If your data logger identifies a temperature excursion, you must:

1. Mark vaccine DO NOT USE and notify all practice staff that the vaccines cannot be used until it is determined by RIDOH that they are safe for use.
2. Complete the [Temperature excursion response worksheet](#) and email it to your Immunization Rep within 48 hours of excursion.
  - The worksheet is located on the Immunization Resource Manual ([IRM](#)).
  - If there are **Merck** vaccines involved in the excursion, before submitting the excursion worksheet, the provider must contact Merck directly for each vaccine to determine viability. Merck will send the provider a report stating if the vaccines are viable or non-viable. Please submit a copy of Merck's findings along with the excursion worksheet to your Immunization Rep.
3. Your Immunization Rep will determine the viability of the vaccine(s) based on manufacturer data.

# Temperature Excursion Reporting Process (cont.)



4. Enter any vaccine loss as returns in OSMOSSIS.
5. Based on the worksheet, RIDOH will assess if the practice must bear any financial burden of replacing the vaccine loss, as described in the RIDOH [Vaccine Replacement Policy](#).
  - The Replacement Policy is available on the IRM.
6. If practice replacement is not required, the practice will be allowed to place a new order.

# Temperature Excursion Response Worksheet



- Requires all pertinent information to decide on vaccine viability, safety, and financial responsibility.
- Fillable PDF - Completed electronically is recommended.
- **Both pages are required to be completed and signed.**

**Temperature Excursion Response Worksheet**  
Please complete as many pages as necessary to report all affected vaccines per incident.

SSV PIN:  Practice Name:   
Contact Name:  Phone:

**Reporting a Temperature Excursion**

1. Store the vaccines at appropriate temperatures. Make sure the refrigerator/freezer is working properly or move the vaccines to a unit that is.
2. Do not discard the affected vaccines. Separate or mark the vaccines so that the potentially compromised vaccines can be easily identified.
3. Print an Inventory Report from OSMSOISS to have a record of the vaccines in the refrigerator/freezer during the event.
4. Email completed Temperature Excursion Response Worksheet to your Immunization Rep (IR). Your IR will contact the manufacturers to determine status of the affected vaccines. Your IR will contact you with the status of the vaccines once manufacturer guidance is reviewed.

Do you currently use a state-supplied Lascar Data Logger?  **Select...** If no, please enter type of logger used:   
Is the data logger online currently in the center of the storage unit?  **Select...**  **Select...**  **Select...**  
Prior to this event, was the vaccine exposed to temperatures outside the recommended range?  **Select...** If yes, enter dates:   
At the time of the event were water bottles in the refrigerator?  **Select...** Ice packs in the freezer?  **Select...**  
Air temperature of room where affected storage unit is located:

Vaccines Stored in Refrigerator (Appropriate temp. range: 38° to 48°F or 3° to 8°C)							RIDOH USE ONLY
Vaccine	Manufacturer	NDC #	Lot #	Expiration Date	# of Doses	Mfg. Case Number	Meets Guidance?

Vaccines Stored in Freezer (Appropriate temp. range: -58° to 5°F or -50° to -15°C)							RIDOH USE ONLY
Vaccine	Manufacturer	NDC #	Lot #	Expiration Date	# of Doses	Mfg. Case Number	Meets Guidance?

Note: Practices must use a continuous monitoring data logger (thermometer) to track refrigerator and freezer temperatures over time. Practices must visually check storage unit(s) twice daily as part of the agreement to participate in the SSV program. Practices must check cloud data at least once every 24 hours (once per day).

If you have any questions, please contact your IR (contact info located on your SSV Practice Menu screen in OSMSOISS). By providing your name and electronic signature below you confirm that all data entered on this form is accurate and that upon notification from RIDOH you will follow any additional recommended guidance and procedures.

**IMPORTANT!** Due to the potential of financial responsibility of the practice for vaccine loss, signature below must be that of the Medical Director or Lead Vaccine Provider on file with RIDOH for the practice's participation in the SSV program.

LVP Name:  Signature:  Date:

**RIDOH USE ONLY**

The information below is to be recorded by the RIDOH ITR assigned to this excursion. The data will be captured from the Lascar cloud-based data logger or logger documentation uploaded with the order for providers not utilizing Lascar loggers.

Refrigerator temperature: current:  max:  min:  Date of Excursion:   
Freezer temperature: current:  max:  min:  Start Time of Excursion:   
Estimated time temperature was outside acceptable range: Refrigerator: hrs  min  Freezer: hrs  min

April 6, 2018 Page 1 of 2

**Temperature Excursion Practice Narrative** (choose one)  Refrigerator  Freezer Page 2 of 2

Use this form to document any unacceptable vaccine storage event, such as exposure of refrigerated vaccines to temperatures that are outside the manufacturers' recommended storage ranges.

Date & Time of Event If multiple, related events occurred, see Description of Event below.	Storage Unit Temperature at the time the problem was discovered	Room Temperature at the time the problem was discovered	Person Completing Report
Start Date: <input type="text"/>	Temp when discovered: <input type="text"/>	Temp when discovered: <input type="text"/>	Name: <input type="text"/>
Time: <input type="text"/>	Minimum temp: <input type="text"/> Maximum temp: <input type="text"/>	SSV Pin: <input type="text"/>	Title: <input type="text"/> Date: <input type="text"/>
<b>Description of Event</b>			
<ul style="list-style-type: none"> <li>• General description of what happened</li> <li>• Identify the storage unit involved in the event and the type of Data Logger (make, model, and calibration date) that was in the unit to monitor the temperatures. If RIDOH supplied logger in use just state "RIDOH LOGGER".</li> <li>• Inventory of affected vaccines, must be identified on page 1 of this report.</li> <li>• Include any other information you feel might be relevant to understanding the event.</li> <li>• Was the practice's vaccine emergency preparedness plan used for response to this event?</li> <li>• If multiple, related events occurred, list each date, time, and length of time out of storage.</li> </ul>			
<b>Action Taken</b> (Document thoroughly. This information is critical to determining whether the vaccine might still be viable)			
<ul style="list-style-type: none"> <li>• When were the affected vaccines placed in proper storage conditions?</li> <li>• (Note: Do not discard the vaccine. Store exposed vaccine in proper conditions and label it "do not use" until after you can discuss with your IR at RIDOH and/or the manufacturer(s))</li> <li>• Who was contacted regarding the incident? (For example, supervisor, medical director, RIDOH, manufacturer—list all.)</li> <li>• <b>IMPORTANT!</b> What steps did you put in place to prevent a similar problem from occurring in the future?</li> </ul>			
<b>Results (To be completed by RIDOH IR only)</b>			
<ul style="list-style-type: none"> <li>• Is the vaccine still viable? If NO, have provider enter vaccines into OSMSOISS as Return.</li> </ul>			

RIDOH Immunization Program 3 Central Hill Providence RI 02908 DISTRIBUTED BY THE  
www.HEALTH.rhodeisland.gov/immunization

# Vaccine Storage and Handling Unit



CDC makes the following recommendations for vaccine storage units:

- Use pharmaceutical-grade or purpose-built units designed to either refrigerate or freeze (can be compact, under-the-counter style or large units).
- If a pharmaceutical-grade built-in unit is not available, use a stand-alone household-grade unit.
- If you must use a combination refrigerator/freezer unit, using only the refrigerator compartment to store vaccines - a separate stand-alone freezer must then be used to store frozen vaccines. **Use of the freezer compartment of a household combination unit is not allowed.**

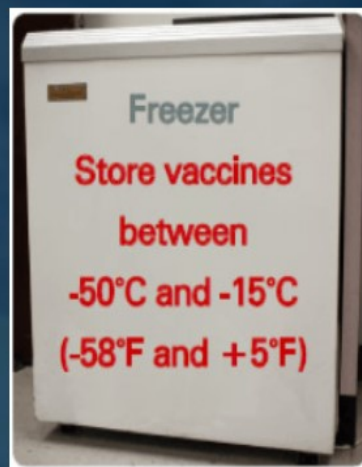


# Vaccine Storage and Handling Unit



To fully ensure the safety and effectiveness of vaccines, the following equipment is recommended:

- ♦ Stand-alone refrigerator(s) with enough space to accommodate your maximum inventory without crowding
- ♦ Stand-alone freezer(s) with enough space to accommodate your maximum inventory without crowding
- ♦ Digital data logger (DDL) with a current and valid Certificate of Calibration Testing for each unit and at least one backup in case of a broken or malfunctioning device



Source: Centers for Disease Control and Prevention





# Vaccine Storage and Handling Unit (cont'd)

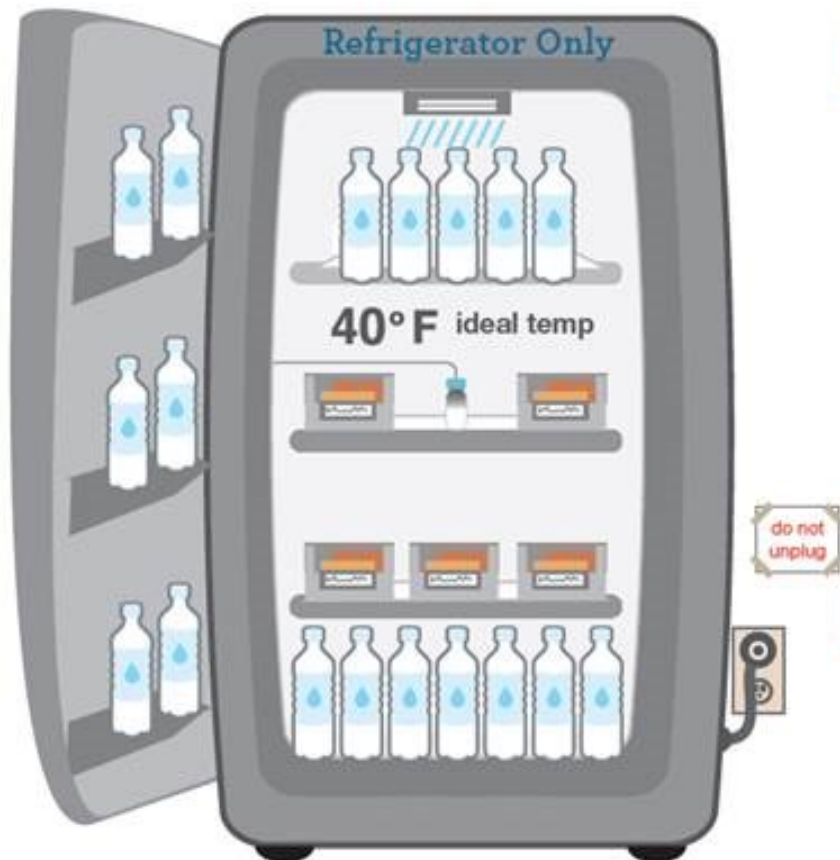


Think of your storage and monitoring equipment as an insurance policy to protect your patients from inadvertent administration of compromised vaccine and your facility against costs of revaccination, replacement of expensive vaccines, and loss of patient confidence in your practice. For the best protection, your facility needs appropriate equipment that is set up correctly and maintained and repaired as needed.

## Proper Vaccine Storage Temperatures

- ♦ Refrigerators should maintain temperatures between 2° C and 8° C (36° F and 46° F).
- ♦ Freezers should maintain temperatures between -50° C and -15° C (-58° F and +5° F).
- ♦ Refrigerator or freezer thermostats should be set at the factory-set or midpoint temperature, which will decrease the likelihood of temperature excursions.

# Storage and Handling Refrigerator



## DO

- ✓ Do make sure the refrigerator door is closed!
- ✓ Do replace crisper bins with water bottles to help maintain consistent temperature.
- ✓ Do label water bottles "Do Not Drink."
- ✓ Do leave 2 to 3 inches between vaccine containers and refrigerator walls.
- ✓ Do post "Do Not Unplug" signs on refrigerator and near electrical outlet.

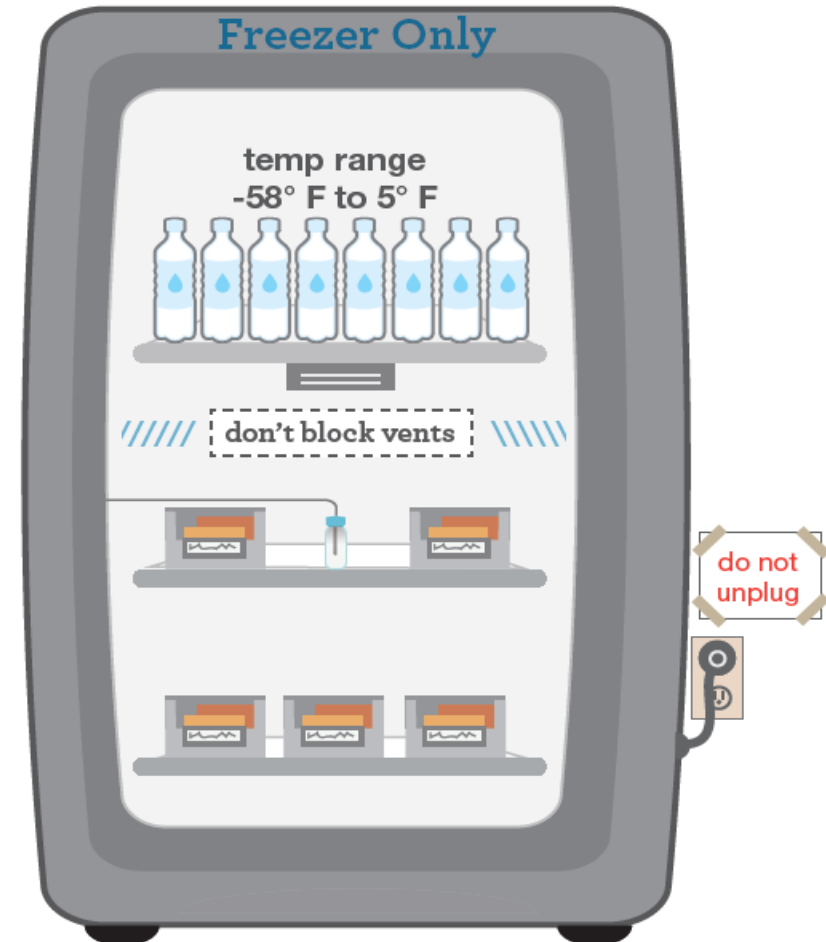
## DON'T

- ✗ Don't use dormitory-style refrigerator.
- ✗ Don't use top shelf for vaccine storage.
- ✗ Don't put food or beverages in refrigerator.
- ✗ Don't put vaccines on door shelves or on floor of refrigerator.
- ✗ Don't drink from or remove water bottles.

# Storage and Handling Freezer



- A chest-style freezer is acceptable but not required.
- Frozen water bottles for vaccine transport can be stored with vaccines OR in a separate freezer.





# OSMOSSIS

Ocean State Management of State-Supplied Immunizations System

## **Online Self-Study Program**

Revised: June 2023

# Self-Study Program



A practice that orders State-Supplied Vaccines (SSV) must complete the following Self-Study Program. The Self-Study must be completed by the practice's listed **Vaccine Contact and Office Contact**.

## Process

1. Review slides on various topics, including Inventory Reporting, Ordering, Temperature Logs, Delivery, Receiving Shipments, Activating Lot #s, Returns/Waste, Transfers, Order History, etc.
2. Answer summary/review questions at the end in order to receive OSMOSSIS access
3. Log into OSMOSSIS by entering the practice PIN number and License number.

# Logging In (1/2)



SSV Login: <https://kidsnet.health.ri.gov/llr-practice-prod/ssv/portal.jsf?cid=28>

The screenshot shows the State of Rhode Island Department of Health website. The header includes the department logo and name. The main content area is titled "Welcome to Immunize for Life" and provides instructions for logging into the SSV system. It lists two options: KIDSNET Login and SSV Login, each with specific steps. A note at the bottom provides contact information for enrollment or login issues.

State of Rhode Island  
**Department of Health**

**Welcome to Immunize for Life**

Welcome to the Immunize for Life, State-Supplied Vaccine (SSV) Program Enrollment. There are two ways to access the SSV Program for enrollment, updating Practice information, and Seasonal Influenza dose reporting/ordering:

- 1. KIDSNET Login** (KIDSNET authorized users only)
  - Log in using individual KIDSNET user Id and password
  - Click on SSV Practice Menu in left hand menu
  - Click on the appropriate menu choice

If you are having difficulty logging into KIDSNET, please call the Help Desk 222-5960 or your KIDSNET Provider Relations Representative.

**OR**

- 2. SSV Login**
  - Log in using SSV PIN number and lead physician/medical director's license number
  - Click on the appropriate menu choice

If your practice/facility has never been enrolled in any SSV program, it has been longer than one year since you last enrolled in any SSV program, or you are having a problem logging in, please call Deb at 222-7876.

[KIDSNET Login](#) OR [SSV Login](#)


Steps:

1. Click the above link
2. Enter the SSV system through the KIDSNET or SSV Login portal

*If you have a KIDSNET User ID it is recommended that you go through the KIDSNET portal. All others should use the SSV portal.*

# Logging In (2/2)



 State of Rhode Island  
**Department of Health**

### SSV Login Page

**News and Alerts**

★ This is the message of the day: Today is a good day to order vaccine!!!

Welcome to the Immunize for Life, State Supplied Vaccine (SSV) Program log-in page. Log in using your SSV PIN number and your lead vaccine provider, physician or medical director's license number. If you have trouble logging into the system call 401-222-7876.

**By logging on the user agrees to the terms stated on this page.**


If your practice/facility has not been previously enrolled, or it has been longer than 1 year since you last enrolled in any vaccine program, you will need to call 401-222-7876 where you will be assigned your PIN number and password. In proceeding beyond this point, the user:

- Agrees that they are authorized by the Lead Vaccine Provider or Medical Director to enter through this web portal in order to complete enrollment, update practice information and/or place vaccine orders on behalf of the practice;
- Agrees to the Terms and Conditions related to this enrollment on behalf of the practice or facility.

By logging on the user agrees to the terms stated on this page

**PIN: \***

**License No.: \***

 **HEALTH**  
Rhode Island Department of Health  
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Steps:

1. Once on the **SSV Login Page**, enter your practice's SSV PIN and Medical Director/Lead Prescriber's license number
2. Once you fill in the required Login information you will be directed to the **SSV Practice Menu** page

# SSV Practice Menu Screen



State of Rhode Island  
Department of Health

Navigation Menu  
Immunization Resource Manual & Form  
Logoff

### SSV Practice Menu

Practice:	RIDOH	Enrollment Year:	2021
Alpha Name:	RI DEPARTMENT OF HEALTH -RIDOH	Lead LVP Lic.:	MD13022
PIN:	1600 <b>Family Practice</b>	Vaccine Contact:	HEIDI WALLACE 401-644-6321 <a href="mailto:heidi.wallace@health.ri.gov">heidi.wallace@health.ri.gov</a>
Logged in as:	1600	Pandemic Vaccine Contact:	Lauren Piluso 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Practice Contact:	TRAVIS VENDETTI 401-222-4786 <a href="mailto:TRAVIS.VENDETTI@HEALTH.RI.GOV">TRAVIS.VENDETTI@HEALTH.RI.GOV</a>	Backup Pandemic Vaccine Contact:	Meaghan Joyce 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>
Immunization Rep:	Heidi Wallace 401-222-4631 <a href="mailto:Heidi.Wallace@health.ri.gov">Heidi.Wallace@health.ri.gov</a>		

HAPPY SPRING!! Influenza vaccine ordering for the 2020-2021 season will end on May 31, 2021. Final doses administered report must be submitted by June 18, 2021. Starting on June 1, practices may return unused influenza vaccine if they feel they have completed vaccinating their patients for the season. All flu vaccine expires June 30, 2021.

Welcome to the Enrollment site for State Supplied Vaccine.  
[Instructions Guide](#)

- Enroll annually for the state fiscal year (July 1 - June 30) in which you wish to order vaccine.
- Each Medical Practice location must enroll separately.
- All pages of enrollment must be completed.
- Read and print the Enrollment Confirmation page.
- Follow any required steps if indicated on the Enrollment Confirmation page in order to complete the enrollment process.

**Navigation**

- DO NOT USE THE FORWARD or BACK ARROW of your internet browser
- Use the NEXT button to save data and move to the next page.
- Use PREVIOUS button to return to a page.
- When RETURN TO MENU is used, data on that page is not saved.

### Maintain Practice Information Links

Enroll 2022 - (Available 06/01/2021)

- [View Practice Profile](#)
- [View Influenza Vaccine Supply Reservation Page](#)
- [Medical Information](#)
- [Delivery Instructions](#)
- [Contact Information](#)
- [Licensed Vaccine Provider List](#)
- [Vaccine Storage Emergency Preparedness Plan \(VSEPP\)](#)
- [View Vaccine Storage Emergency Preparedness Plan \(VSEPP\)](#) (uploaded 09/12/2013)

[Click here to be directed to RIDOH's Resource Manual for Providers](#)

### Ocean State Management of State Supplied Immunizations System (OSMOSSIS)

[Enter OSMOSSIS](#) (Vaccine Ordering Module)

OSMOSSIS Self Study  
[Data Logger Cloud Login](#)

For issues involving vaccine order or delivery, contact:  
[Heidi.Wallace@health.ri.gov](mailto:Heidi.Wallace@health.ri.gov) 401-222-4631  
[Lauren.Piluso@health.ri.gov](mailto:Lauren.Piluso@health.ri.gov) 401-222-4639

Please note the following:

- Practice name and PIN
- Practice and Vaccine Contact info
- Assigned RIDOH Immunization Rep

## Features

- Update practice information
- Offer RIDOH the ability to view activity on your computer screen in real time
- Access the Office of Immunization's Resource Manual, which contains important forms and resources

Click the OSMOSSIS link to begin the vaccine management process



# Attestation



### Navigation Menu

- Immunization Resource Manual & Form
- Logoff

### Practice Attestation

Practice:	RIDOH		
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Enrollment Year:	2023
PIN:	1600 <b>Family Practice</b>	Lead LVP Lic.:	MD08265
Logged in as:	Larsen	Vaccine Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Office Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Immunization Rep:	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>

Once you click the **OSMOSSIS** link you will be brought to the **Practice Attestation** page where you will be asked to attest to being one of the authorized agents of the practice available to place a vaccine order. Authorized agents include:

- Lead Physician
- Practice Contact
- Vaccine Contact
- Pandemic Contact

Select your name from the list and then click **Yes, Continue**. You will then be brought to the **Vaccine Order Menu** page.

**Practice Attestation**

NICOLE SELEMA

LAUREN PILUSO

MEAGHAN JOYCE

JAMES MCDONALD

I attest that I am the person identified by the checkbox above and that I am authorized to order State Supplied Vaccine on behalf of RI DEPARTMENT OF HEALTH -RIDOH

*If your name does not appear on this screen, you have not been authorized to order vaccines on behalf of the practice. See your Practice or Vaccine Contact for approval.*

# Vaccine Ordering Menu (1/3)



State of Rhode Island  
**Department of Health**

**Navigation Menu**

- ▶ Immunization Resources Manual & Forms
- ▶ Logout

<b>Practice:</b> RIDOH	<b>Enrollment Year:</b> 2023	
<b>Alpha Name:</b> RI DEPT OF HEALTH/THE WELLNESS COMPANY	<b>Lead LVP Lic.:</b> MD08265	
<b>PIN:</b> 1600 <b>Family Practice</b>	<b>Vaccine Contact:</b> LAUREN PILUSO 401-222-4639 lauren.pilus@health.ri.gov	
<b>Logged in as:</b> Larsen	<b>COVID Pandemic Contact:</b> LAUREN PILUSO 401-222-4639 lauren.pilus@health.ri.gov	
<b>Office Contact:</b> NICOLE SELEMA 401-222-4631 nicole_selema@health.ri.gov	<b>Backup COVID Pandemic Contact:</b> MEAGHAN JOYCE 401-222-1580 meaghan.joyce@health.ri.gov	
<b>Immunization Rep:</b> Lauren Piluso 401-222-4639 Lauren.Pilus@health.ri.gov		

**OSMOSSIS Vaccine Ordering Menu**

**MONTHLY Vaccine**

Order ID: 83050  
Next Order Dates: NOW  
Order Status: New

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Product Lot Expiration Report

There are currently 2 expired lot numbers that need to be removed from your supply immediately.  
There is currently 1 lot number expiring within the next 120 days.

**INFLUENZA Vaccine**

Order ID: F83934  
Next Order Dates: NOW  
Order Status: New

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

**COVID-19 Vaccine**

COVID-19 vaccine provider enrollment information is available at [Rhode Island COVID-19 Vaccine Information for Healthcare Providers webpage](#). One requirement for vaccine ordering is the completion of COVID-19 training. You have attested that you have completed the required CDC COVID-19 Vaccine Training and will monitor the CDC COVID-19 site for updates.

It is important that you monitor the CDC COVID-19 site for updated information on an ongoing basis.

PRINT OUT Current Inventory Lot# Report

Submit COVID-19 Vaccine Order

Transfer Vaccine to Another Practice  
(Please review your pending outgoing transfers)

Accept/Reject Transfers from Another Practice

\*mouse-over (type) for more info

Status	ID	Type *	Doses	Expiry
PEND	#18186	(COVID-19)	24	
PEND	#18187	(COVID-19)	90	
PEND	#18191	(COVID-19)	30	

Enter Vaccine Return or Waste Information

Order ID: C88599  
Next Order Date: 05/10/2021  
Ordering Disabled Reason: Not yet next order date.

Receive Shipment from Distributor

View Order History

Generate Returns Packing List

Return to SSV Menu

On the **Vaccine Ordering Menu** page, choose an option from the available list.

Note: certain options are not always available. For example, **Place Vaccine Order** is only available when:

- MONTHLY vaccine – a minimum of 30 days has passed since your last monthly order
- INFLUENZA vaccine – a minimum of 5 days has passed since your last influenza vaccine order
- COVID-19 – COVID certified providers only

Options may also be unavailable if there are still outstanding processes that need to be completed (e.g. transfers, receiving shipments, etc.)

Each of the buttons within the box are associated with that vaccine order type (**Monthly, Influenza or COVID-19**).

The options at the bottom of the screen are *provider-specific*, not order-specific.

# Vaccine Ordering Menu (2/3)



## SSV Practice Menu

<b>Navigation Menu</b> Immunization Resource Manual & Form Logoff	Practice:	RIDOH	Enrollment Year:	2023
	Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Lead LVP Lic.:	MD08265
	PIN:	1600 <b>Family Practice</b>	Vaccine Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
	Logged in as:	Larsen	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
	Office Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>
Immunization Rep:	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>			

## OSMOSSIS Vaccine Ordering Menu

### MONTHLY Vaccine Order

Order ID: 29975  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Product Lot Expiration Report

### INFLUENZA Vaccine Order

Order ID: F29637  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Receive Shipment from Distributor

View Order History

Generate Returns Packing List

Return to SSV Menu

Information on this page includes:

Practice identifiers based on the information submitted during the annual enrollment period:

- Practice Name
- Alpha Name (created and used by DOH)
- Practice SSV PIN
- Practice Contact (name and phone)
- Vaccine Contact (name and phone)
- Pandemic/backup Pandemic (name and phone)
- Lead Physician License #
- Assigned Immunization Representative

**Order ID:** each time you sign in to the Vaccine Ordering Menu a new Order ID is created

**Next Order Date:** shows the next available date for your practice to order vaccines. Once that date has passed, "NOW" will be displayed

**Order Status:** current order status can be: New, Incomplete, Submitted, Approved/Declined/Held, In Process, Shipped, or Received

# Vaccine Ordering Menu (3/3)



**SSV Practice Menu**

Practice: RIDOH  
Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY  
PIN: 1600 **Family Practice**  
Enrollment Year: 2023  
Lead LVP Lic.: MD08265  
Vaccine Contact: LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov  
COVID Pandemic Contact: LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov  
Backup COVID Pandemic Contact: MEAGHAN JOYCE 401-222-1580 meaghan.joyce@health.ri.gov

Logged in as: Larsen

Office Contact: NICOLE SELEMA 401-222-4631 nicole.selema@health.ri.gov

Immunization Rep: Lauren Piluso 401-222-4639 Lauren.Piluso@health.ri.gov

## Active vs. Inactive Buttons

Choose an option from the available list of active links/buttons.

If you hover your mouse over an option and get a red circle with a line through it, it means that option is currently unavailable. Options that are available will be a darker shade and display a finger point cursor when hovered over.

As mentioned, restrictions may be based on processes that have not yet been completed, such as Transfers, Receiving a Shipment, eligible order date not yet reached, etc.

### OSMOSSIS Vaccine Ordering Menu

**MONTHLY Vaccine Order**

Order ID: 29975  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Product Lot Expiration Report

**INFLUENZA Vaccine Order**

Order ID: F29637  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Receive Shipment from Distributor

View Order History

Generate Returns Packing List

Return to SSV Menu

# Inventory Lot# Report



State of Rhode Island  
**Department of Health**

**SSV Practice Menu**

Navigation Menu  
▶ Immunization Resource Manual & Form  
▶ Logoff

Practice:	RIDOH	Enrollment Year:	2023
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Lead LVP Lic.:	MD08265
PIN:	1600 <b>Family Practice</b>	Vaccine Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Logged in as:	Larsen	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Office Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>
Immunization Rep:	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>		

**OSMOSSIS Vaccine Ordering Menu**

**MONTHLY Vaccine Order**

Order ID: 29975  
Next Order Date: NOW  
Order Status: New

[PRINT OUT Current Inventory Lot# Report](#)

[Place Vaccine Order](#)

[Transfer Vaccine to Another Practice](#)

[Enter Vaccine Return or Waste Information](#)

[Product Lot Expiration Report](#)

**INFLUENZA Vaccine Order**

Order ID: F29637  
Next Order Date: NOW  
Order Status: New

[PRINT OUT Current Flu Inventory Lot# Report](#)

[Submit Dose Admin Report / Flu Vaccine Order](#)

[Transfer Vaccine to Another Practice](#)

[Enter Vaccine Return or Waste Information](#)

[Receive Shipment from Distributor](#)

[View Order History](#)

[Generate Returns Packing List](#)

[Return to SSV Menu](#)

The first link on the Vaccine Ordering Menu page for both Monthly and Influenza orders is the **PRINT OUT Current Inventory Lot# Report**.

Click this link to get a printout of all the Lot #s that the system recognizes as part of your current vaccine inventory. Bring the form to your storage unit to record the vaccine quantities on hand for each Lot #. This information will be needed for the inventory section of your vaccine order.

The Lot # form is **print only**. You cannot enter data into the fields of this form on the computer.

# Lot# Printout (Sample)



**Product Lot Inventory Report: Nov-16-2012**

**!** Please report only state-supplied vaccine. Do NOT report privately purchased vaccines.

**Adult Vaccine Inventory**

Vaccine Type	NDC Code	Brand	Doses per Pkg	Unit Presentation	Lot Quantity
<b>PNEUMO</b>					
	00006-4943-00	Pneumovax	10	PPV23; SDV; 10-PACK	
					0811AA: <input type="text"/>
					1138AA: <input type="text"/>
					1170AA: <input type="text"/>
<b>TDAP AD</b>					
	49281-0400-15	Adacel	5	5X1 DOSE SYRINGE-ADULTS	
					U3486CA: <input type="text"/>
					U3486DA: <input type="text"/>
					U3874BA: <input type="text"/>

**Adult Special Initiative Vaccine Inventory**

Vaccine Type	NDC Code	Brand	Doses per Pkg	Unit Presentation	Lot Quantity
<b>HEP AB</b>					
	58160-0815-52	Twinrix	10	HEP AB; SYR; 10-PACK	
					AHABB227BA: <input type="text"/>

**Pediatric Vaccine Inventory**

Vaccine Type	NDC Code	Brand	Doses per Pkg	Unit Presentation	Lot Quantity
<b>DTAP</b>					
	58160-0810-51	Infanrix	5	DTAP-INFANRIX-5 X 1 DOSE PF SYRINGE	
					AC14B121BB: <input type="text"/>
	58160-0810-52	Infanrix	10	CDC INFANRIX SYR 0.5 mL 10/PAC	
					AC14B126BA: <input type="text"/>

## Current Inventory Lot# Printout (Sample)

This is a sample of what the Lot # printout will look like. Bring it to your storage unit and fill in the quantities for each Lot # listed on the report.

Vaccine information included on form:

- Vaccine type (grouped by the “short name”)
- National Drug Code (NDC)
- Brand
- Doses per package/carton
- Unit Presentation (short description)
- Lot number
- Lot quantity (on-hand inventory) field

If you do not have any inventory of a certain Lot #, the system will require you to enter a zero (0) in the field. Once you enter zero quantity of a Lot # it will no longer appear in your inventory (effective next order).

# Activate Lot #



The screenshot shows an inventory management interface with a table of products and a modal dialog box. The table lists various vaccine lots under categories like HEP A, HEP A-AD, HEP B-A, PNEUMO, and TDAP. The modal dialog box, titled "Reactivate/Add Product Lot", contains the following fields:

- Contract Type: Adult
- Vaccine Type: HEP A
- Vaccine Brand: Havrix
- Package Type: PREFILLED SYRINGE
- NDC Code: 58160-0825-51
- Lot # / Exp. Date: #AV0064-5 -- 01/01/2013 \*
- Quantity: 2

Buttons for "Cancel" and "Activate" are visible at the bottom of the dialog. Below the dialog, there are navigation buttons: "Previous", "Save & Continue Later", and "Next".

You may need to reactivate a Lot # in the event that you forget to report a vaccine or accidentally indicated zero inventory in your previous inventory reports.

By clicking **Activate Product Lot** at the bottom of your Adult/Pediatric Inventory Report pages, an active window will open for you to enter the specific information about the product you wish to activate. Complete the information required for each dropdown category and click **Activate**. The product will immediately show up in your inventory report.

# Vaccine Ordering Wizard



State of Rhode Island  
**Department of Health**

SSV Practice Menu

Navigation Menu

- Immunization Resource Manual & Form
- Logoff

Practice:	RIDOH	Enrollment Year:	2023
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Lead LVP Lic.:	MD08265
PIN:	1600 <b>Family Practice</b>	Vaccine Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Logged in as:	Larsen	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Office Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>
Immunization Rep:	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>		

MONTHLY Vaccine Order

Order ID: 29975  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Product Lot Expiration Report

INFLUENZA Vaccine Order

Order ID: F29637  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Receive Shipment from Distributor

View Order History

Generate Returns Packing List

Return to SSV Menu

Once you have completed the **Current Inventory Lot# Report**, you are ready to start the vaccine ordering process.

**Place Vaccine Order** – click this link to start the Order Wizard process.

The first step in the process is entering any **Returns/Wasted** vaccines. If it is your first time in the system, select “No” for this option since your on-hand inventory has not yet been established in the system. In future reports you will be able to complete the Returns/Waste section of the wizard (Returns/Waste will be discussed later in this tutorial).

Note: the next few slides will address **Monthly Vaccine Orders** only. Influenza ordering will be covered later.



# Starting the Wizard



State of Rhode Island  
Department of Health

Navigation Menu  
Immunization Resource Manual & Form  
Logoff

Practice: RIDOH  
Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY Enrollment Year: 2023  
PIN: 1600 **Family Practice** Lead LVP Lic.: MD08265  
Logged in as: Larsen Vaccine Contact: LAUREN PILUSO 401-222-4639 [lauren.piluso@health.ri.gov](mailto:lauren.piluso@health.ri.gov)  
Office Contact: NICOLE SELEMA 401-222-4631 COVID Pandemic Contact: LAUREN PILUSO 401-222-4639 [lauren.piluso@health.ri.gov](mailto:lauren.piluso@health.ri.gov)  
Immunization Rep: Lauren Piluso 401-222-4639 Backup COVID Pandemic Contact: MEAGHAN JOYCE 401-222-1580 [meaghan.joyce@health.ri.gov](mailto:meaghan.joyce@health.ri.gov)

• A **RETURN** is a product that has expired or spoiled due to storage and handling issues and can be returned to the manufacturer.  
• A **WASTE** is a product that is in a condition other than its original condition, such as pre-drawn vaccines, or re-drawn vaccines.

**Vaccine Order Wizard**

Before entering your order information, do you have any Vaccine Returns or Waste to report first?

Enter Vaccine Waste or Return Information

Action Type:  Return  Waste  
Order Type: Select...  
Vaccine Type:   
Vaccine Brand:   
Package Type:   
NDC Code:   
Lot Number / Exp. Date:   
Reason: Select "Return" or "Waste" before selecting a reason  
Quantity: 0

After selecting “No” to **Returns/Wasted** reporting you will be directed to the appropriate vaccine reporting pages.

If your practice only offers adult vaccines you will be directed to the **Report Adult Vaccine Inventory** page.

If your practice only offers pediatric vaccines the system will bypass the adult portion of the ordering process.

If your practice offers both adult and pediatric vaccines, you will be required to complete both the **Adult** and **Pediatric** sections of the order process.

These steps are decided based on your Practice Profile when you enrolled in the SSV program.

For this demonstration, we will proceed as a family practice offering both adult and pediatric vaccines.

**\*\*Note: Do not use the Back or Forward arrows of your internet browser. If you use these buttons you will be kicked out of the OSMOSSIS system and your data will not be saved.\*\***

# Inventory Reporting (1/2)



State of Rhode Island  
Department of Health

SSV Practice Menu

Navigation Menu  
Immunization Resource Manual & Form  
Logoff

Practice: RIDOH  
Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY Enrollment Year: 2023  
PIN: 1600 Family Practice Lead LVP Lic.: MD08265  
Logged in as: Larsen Vaccine Contact: LAUREN PILUSO 401-222-4639 lauren.pilus@health.ri.gov  
Office Contact: NICOLE SELEMA 401-222-4631 nicole.selema@health.ri.gov COVID Pandemic Contact: LAUREN PILUSO 401-222-4639 lauren.pilus@health.ri.gov  
Immunization Rep: Lauren Piluso 401-222-4639 Lauren.Pilus@health.ri.gov Backup COVID Pandemic Contact: MEAGHAN JOYCE 401-222-1580 meaghan.joyce@health.ri.gov

**!** Please report only state-supplied vaccine. Do NOT report privately purchased vaccines.

On this page you are required to enter in the amount of vaccine you have in your storage unit that is available to be administered to patients. The numbers you enter on this page will affect your order amounts, therefore they need to be an actual count, not a best guess.

Adult Vaccine Inventory

Vaccine Type	NDC Code	Brand	Doses per Pkg	Unit Presentation	Lot Quantity
HEP A - AD	00006-4096-09	Vaqta	6	6-pack SYR	J001396: <input type="text"/> J007781: <input type="text"/>
HEP B - AD	00006-4094-09	Recomblivax HB	6	06 doses	J006245: <input type="text"/> J007299: <input type="text"/>
VAR	00006-4827-00	Varivax	10	VAR; ADULT; SDV; 10-PACK	K006134: <input type="text"/>

Adult Special Initiative Vaccine Inventory

Vaccine Type	NDC Code	Brand	Doses per Pkg	Unit Presentation	Lot Quantity
HEP AB	58160-0815-52	Twinvix	10	HEP AB; SYR; 10-PACK **Available for PAP facilities only.**	B457F: <input type="text"/> 5JR7T: <input type="text"/>

Navigation buttons: Previous, Save & Continue Later, Next

On the **Report Adult Vaccine Inventory** page you will be required to enter the number of **DOSES** for each state-supplied vaccine NDC and Lot # that you currently have stored in your practice. If you no longer have any doses of a particular Lot #, you need to report a zero (0) quantity in the field, in order for that Lot # to be removed from your inventory for future reporting.

Use the information gathered from the **Lot # Print Out** form to complete the inventory sections.

Only report state-supplied vaccines on the inventory reports; **DO NOT** include privately purchased vaccines.

**Page Navigation** – use the **Previous** and **Next** buttons to navigate through each page of the order process. Use the **Save & Continue Later** button if you have to leave the system for any period of time.

# Inventory Reporting (2/2)



**Navigation Menu**

- Immunization Resource Manual & Form
- Logoff

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**SSV Practice Menu**

Practice: RIDOH  
 Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY Enrollment Year: 2023  
 PIN: 1600 **Family Practice** Lead LVP Lic.: MD08265  
 Logged in as: Larsen Vaccine Contact: LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov  
 Office Contact: NICOLE SELEMA 401-222-4631 nicole.selema@health.ri.gov COVID Pandemic Contact: LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov  
 Immunization Rep: Lauren Piluso 401-222-4639 Lauren.Piluso@health.ri.gov Backup COVID Pandemic Contact: MEAGHAN JOYCE 401-222-1580 meaghan.joyce@health.ri.gov

## Report Pediatric Vaccine Inventory

Please report only state-supplied vaccine. Do NOT report privately purchased vaccines.

**Pediatric Vaccine Inventory**

Vaccine Type	NDC Code	Brand	Doses per Pkg	Unit Presentation	Lot	Quantity
<b>DTAP</b>						
	58160-0810-51	Infanrix	5	DTAP-INFANRIX-5 X 1 DOSE PF SYRINGE	AC1481218B:	0
	58160-0810-52	Infanrix	10	CDC INFANRIX SYR 0.5 mL 10/PAC	AC1481578A:	0
					AC1481558A:	0
					AC1481548A:	0
					AC1481498A:	0
					AC148149AA:	0
					AC1481408A:	0
					AC148146AA:	0
					AC1481268A:	0
<b>DTAP-IPV</b>						
	58160-0812-46	Kinrix	5	KINRIX, PKG 5 SINGLE DOSE SYRINGES	AC20B167FA:	0
	58160-0812-11	Kinrix	10	KINRIX, PKG 10 SINGLE DOSE VIALS	AC20B179DA:	0

**Special Pediatric Vaccine Inventory**

Vaccine Type	NDC Code	Brand	Doses per Pkg	Unit Presentation	Lot	Quantity
<b>EIPV</b>						
	49281-0860-10	IPOL	10	IPV; MDV10; 1-PACK	H13401:	0
					H13301:	0

[Activate Product Lot](#)

On the **Report Pediatric Vaccine Inventory** page, you will be required to enter the number of **DOSES** for each state-supplied vaccine NDC and Lot # that you currently have stored in your practice. If you no longer have any doses of a particular Lot # you need to report a zero (0) quantity in the field, in order for that Lot # to be removed from your inventory for future reporting.

Use the information gathered from the **Lot # Print Out** form to complete the inventory sections.

Once again, only report state-supplied vaccines on the inventory reports; **DO NOT** include privately purchased vaccines.

# Vaccine Ordering – Adult



SSV Practice Menu

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	<b>Alpha Name:</b>	RI DEPT OF HEALTH/THE WELLNESS COMPANY	<b>Lead LVP Lic.:</b>	MD08265
	<b>PIN:</b>	1600 <b>Family Practice</b>	<b>Vaccine Contact:</b>	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.pilus@health.ri.gov">lauren.pilus@health.ri.gov</a>
	<b>Logged in as:</b>	Larsen	<b>COVID Pandemic Contact:</b>	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.pilus@health.ri.gov">lauren.pilus@health.ri.gov</a>
	<b>Office Contact:</b>	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	<b>Backup COVID Pandemic Contact:</b>	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>
<b>Immunization Rep:</b>	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Pilus@health.ri.gov">Lauren.Pilus@health.ri.gov</a>			

## Place Adult Vaccine Order

Practices are allowed to order vaccine no more than once during any 30-day period. Please order enough vaccine so that you do not run out of supply before you receive delivery of your next order. It is recommended that when you order you should order enough vaccine for your practice to be able to operate for at least 30-days plus any anticipated delivery time of your next order. For example; if you plan on ordering vaccine every 30-days you should order enough vaccine to cover at least 60 days of operations, ordering every 60-days should order 90 days of inventory, and so on.

Indicate in the fields below the number of doses you will need until your next order can be placed and delivered, as described above.

### Adult Vaccine Order Entry

Vaccine Type	NDC Code	Brand	Doses per Package	Description	Order Quantity (by dose)
<b>PNEUMO</b>	On-Hand: 0				
	00006-4943-00	Pneumovax	10	PPV23; SDV; 10-PACK	0
<b>TDAP AD</b>	On-Hand: 0				
	49281-0400-15	Adacel	5	SX1 DOSE SYRINGE-ADULTS	0

**!** Only providers who currently participate in Adult Special Initiatives are eligible to order the following vaccines at this time. If you are not currently enrolled in the Hepatitis, HCW, or HPV initiatives please do not order any of the vaccines listed below.

### Adult Special Initiative Vaccine Order Entry

Vaccine Type	NDC Code	Brand	Doses per Package	Description	Order Quantity (by dose)
<b>HEP AB</b>	On-Hand: 0				
	58160-0815-52	Twinrix	10	HEP AB; SYR; 10-PACK	0
<b>HEP B-A</b>	On-Hand: 0				
	58160-0821-52	Enderix	10	ENDERIX-B PFS 20MCG/ML 1ML 10/PAC -CDC	0
<b>HEPA-AD</b>	On-Hand: 0				

On the **Place Adult Vaccine Order** page, enter the amount of each vaccine that you wish to order. Please note that vaccines are to be ordered by **Dose Quantity** and must be multiples of the “Doses Per Package”. For example, if the dose per package is 5 - order in multiples of 5, if dose per package is 10 - order in multiples of 10, etc.

Orders should include the number of doses you will need in order to maintain *at least a 30-day supply of vaccine beyond your next order date*. For example, if you order every 30 days, order enough vaccine for 60 days; if you order every 60 days, order enough vaccine for 90 days, etc.

**Adult Special Initiative** vaccines are only to be ordered by practices that have received permission by RIDOH for special initiative projects.

All **Order Quantity** fields must include a value. If you are not ordering a specific vaccine, please indicate so by entering a zero (0) in the order field.

# Vaccine Ordering – Pediatric

## (1/2)



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- Logoff

Practice:	RIDOH		
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Enrollment Year:	2023
Pin:	1600 <b>Family Practice</b>	Lead LVP Lic.:	MD08265
Logged in as:	Larsen	Vaccine Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Office Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Immunization Rep:	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>

### Place Pediatric Vaccine Order

Practices are allowed to order vaccine no more than once during any 30-day period. Please order enough vaccine that you do not run out of supply before you receive delivery of your next order. It is recommended that when you order you should order enough vaccine for your practice to be able to operate for at least 30-days plus any anticipated delivery time of your next order. For example; if you plan on ordering vaccine every 30-days you should order enough vaccine to cover at least 60 days of operations, ordering every 60-days should order 90 days of inventory, and so on.

Indicate in the fields below the number of doses you will need until your next order can be placed and delivered, as described above.

Mouse-over message icon when displayed below for more information

#### Pediatric Vaccine Order Entry

Vaccine Type	NDC Code	Brand	Doses per Package	Description	Order Quantity (by dose)
DTAP-IPV	On-Hand: 0 CDA: 20 KRDA: 0	<b>Kinrix</b>	10	Kinrix DTaP/IPV 0.5ml Pfl Tplck Syr 10pk	<input type="text" value="0"/>
DTAP-IPV-HEPB	On-Hand: 0 CDA: 0 KRDA: 0	<b>Pediarix</b>	10	CDC PEDIARIX SYR TIPLOCK 10/PAC	<input type="text" value="0"/>
HEP A	On-Hand: 0 CDA: 20 KRDA: 0	<b>Havrix</b>	10	HAVRIX Tiplck NO NDL No Pres 5ml 10 pkg	<input type="text" value="0"/>
HEP B	On-Hand: 0 CDA: 20 KRDA: 0	<b>Engerix</b>	10	CDC ENGERIX B - HEP B (PED) SYR 10/PAC	<input type="text" value="0"/>
HIB	On-Hand: 0 CDA: 0 KRDA: 0	<b>PedvaxHIB</b>	10	Haemophilus Influenzae, Type B - PedvaxHIB	<input type="text" value="0"/>
HPV9	On-Hand: 0 CDA: 0 KRDA: 0	<b>Gardasil</b>	10	HPV9	<input type="text" value="0"/>
MCV4	On-Hand: 0 CDA: 10 KRDA: 0	<b>Menactra</b>	5	MCV4; SDV; 5-PACK	<input type="text" value="0"/>
MENB	On-Hand: 0 CDA: 0 KRDA: 0	<b>Bexsero</b>	10	Mening B	<input type="text" value="0"/>
MMR	On-Hand: 0 CDA: 0 KRDA: 0	<b>MMR II</b>	10	MMR; SDV; 10-PACK	<input type="text" value="0"/>
MMRV	On-Hand: 0 CDA: 0 KRDA: 0	<b>Proquad *</b>	10	MMRV	<input type="text" value="0"/>

The instructions for placing pediatric vaccine orders are the same as for adult orders:

On the **Place Pediatric Vaccine Order** page, enter the amount of each vaccine that you wish to order. Please note that vaccines are to be ordered by **Dose Quantity**, and must be multiples of the “Doses Per Package”. For example, if the dose per package is 5 - order in multiples of 5, if dose per package is 10 - order in multiples of 10, etc.

Orders should include the number of doses you will need in order to maintain *at least a 30-day supply of vaccine beyond your next order date*. For example, if you order every 30 days, order enough vaccine for 60 days; if you order every 60 days, order enough vaccine for 90 days, etc.

**\*\*NEW:** KRDA represents the KIDSNET Reported Doses Administered amount of each vaccine reported since the last order date. This number should be compared to the Calculated Doses Administered (CDA). The envelope icon will appear if the 10% allowed variance is exceeded.\*\*

# Vaccine Ordering – Pediatric

## (2/2)



Special Pediatric Vaccine Order Entry

Vaccine Type	NDC Code	Brand	Doses per Package	Description	Order Quantity (by dose)
<b>DT</b>	On-Hand: 0				
	49281-0225-10	DT	1	DT; SDV; Must have scheduled appt within 30-days in order request vaccine	<input type="text" value="0"/>
<b>EIPV</b>	On-Hand: 0				
	49281-0860-10	IPOL	10	IPV; MDV10; 1-PACK	<input type="text" value="0"/>
<b>MENHIB</b>	On-Hand: 0				
	58160-0801-11	MenHiberix	1	Available for Tomorrow Fund ordering only	<input type="text" value="0"/>
<b>PNEUMOP</b>	On-Hand: 0				
	00006-4943-00	Pneumovax	1	PNUEMO 10 X 0.5 ML, VIALSD, 10 DOS	<input type="text" value="1"/>
<b>TD</b>	On-Hand: 0				
	49281-0215-15	Tenivac	10	TD; SYR; 10-PACK	<input type="text" value="0"/>

[Send note to HEALTH about this order](#)  
(You may send more than one note)

**Special Pediatric** vaccines are vaccines that should be ordered only if regular vaccines cannot fill a need due to patient-specific medical reasons. These vaccines may require special circumstances for order approval and may delay the order approval process.

If you have any special requests or instructions regarding your order, please **DO NOT** send a separate email concerning your order. It may not be reviewed before your order is processed. Instead, please include a note by selecting the “**Send note to RIDOH about this order**” link. This note will be displayed on the order for RIDOH to review before approving the order.

All **Order Quantity** fields must include a value. If you are not ordering a specific vaccine, please indicate so by entering a zero (0) in the order field.

# Temperature Reporting



**SSV Practice Menu**

Practice:	RIDOH		
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Enrollment Year:	2023
PIN:	1600 <b>Family Practice</b>	Lead LVP Lic.:	MD08265
Logged in as:	Larsen	Vaccine Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Office Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Immunization Rep:	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>

### Temperature Log/Email Address



You must submit a temperature log that represents the most recent thirty days of temperatures.

**Temperature Log**

Temperature log submitted by:

Upload Non-State Supplied Data Logger File

State Supplied Data Logger (LASCAR)

**Contact Email Address**

An email will be sent to LAUREN PILUSO, the Vaccine Contact for your practice, at [lauren.piluso@health.ri.gov](mailto:lauren.piluso@health.ri.gov). To add additional recipients for emails about this order, enter those email address(es) in the box below, separated by a semi-colon (;).

Storage unit temperatures can be reported in two ways:

- 1. Upload Temperatures** - non-state supplied data logger
- 2. Cloud (state supplied data logger)**- if you have a Cloud-Based Logger supplied by RIDOH, the temperatures will be retrieved automatically through the cloud account

Temperature information is **required** for an order to be approved. If unable to choose an option above and if discussed and agreed upon with your Immz Rep, temperature logs can be faxed to 222-1442. Failure to submit temperature information within 5 days of order submission will incur an **Order Declined** decision.

An email will be sent to the Vaccine Contact on record when it is submitted, approved, and shipped. If you wish to receive notifications at additional email addresses, enter them on this page.

# Delivery Information



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SSV Practice Menu

Practice:	RIDOH	Enrollment Year:	2023
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Lead LVP Lic.:	MD08265
PIN:	1600 <b>Family Practice</b>	LAUREN PILUSO	401-222-4639
Logged in as:	Larsen	Vaccine Contact:	<a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Office Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Immunization Rep:	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>

A practice is required to report the delivery address and office hours that are available for vaccine delivery each time an order is placed. Please plan accordingly for vacations or holidays. Practices are responsible to have staff in the practice on the days identified on the **Delivery Instructions** page.

Delivery Instructions

**\*\* P.O. Box is not a valid delivery address \*\***

Delivery Instructions

\* Required Fields

Address Line1: \* 123 MAIN STREET

Address Line2: \*

City: \* PROVIDENCE

State: \* RI

Zip Code: \* 22222

Available Delivery Days and Hours

Please **CHECK** the times when you can accept shipments. You **MUST** check delivery hours for at least two days.

Hours	Tuesday	Wednesday	Thursday	Friday
9am-12noon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1pm-4pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OR				
9am-4pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Special Delivery Instructions

Please indicate any special delivery instructions, such as "Deliver to RN". Special Delivery instructions can be no more than 14 characters.

NONE

← Previous Save & Continue Later Next →

Please note that a **PO BOX address** is not an acceptable delivery address.

You must select at least **two** delivery times for the week. This information must be updated with every order.

**Special Delivery Instructions** should only be used if you need to identify a specific area of the practice for delivery, e.g. back door, front desk, etc. These instructions must not exceed 14 characters (including spaces). **CHANGING THE HOURS OF OPERATION FOR A SPECIFIC DAY OTHER THAN OPTIONS ABOVE WILL NOT BE HONORED IF LISTED IN THIS BOX. PROVIDER MUST BE AVAILABLE DURING HOURS SELECTED.**



# Order Summary



**SSV Practice Menu**

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- Immunization Resource Manual & Form
- Logoff

Practice: RIDOH  
 Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY Enrollment Year: 2023  
 PIN: 1600 **Family Practice** Lead LVP Lic.: MD08265  
 Logged in as: Larsen Vaccine Contact: LAUREN PILUSO  
 401-222-4639  
[lauren.piluso@health.ri.gov](mailto:lauren.piluso@health.ri.gov)  
 Office Contact: NICOLE SELEMA COVID Pandemic Contact: LAUREN PILUSO  
 401-222-4631  
[nicole.selema@health.ri.gov](mailto:nicole.selema@health.ri.gov) 401-222-4639  
[lauren.piluso@health.ri.gov](mailto:lauren.piluso@health.ri.gov)  
 Immunization Rep: Lauren Piluso Backup COVID MEAGHAN JOYCE  
 401-222-4639 Pandemic Contact: 401-222-1580  
[Lauren.Piluso@health.ri.gov](mailto:Lauren.Piluso@health.ri.gov) [meaghan.joyce@health.ri.gov](mailto:meaghan.joyce@health.ri.gov)

**!** Please review your order carefully. You will not be able to make any changes to this order once you submit it. To make changes, use the previous button at the bottom of the page.

## Adult Vaccine Order Summary

Vaccine Type/ Line Item	NDC Code	Brand	Pkg	Doses per Package	Description	Order Quantity
<b>PNEUMO</b>	On-Hand: 0					
1	00006-4943-00	Pneumovax	SDV	10	PPV23; SDV; 10-PACK	0
<b>TDAP AD</b>	On-Hand: 0					
2	49281-0400-15	Adacel	SYR	5	SX1 DOSE SYRINGE-ADULTS	20

## Adult Special Initiative Vaccine Order Summary

Vaccine Type/ Line Item	NDC Code	Brand	Pkg	Doses per Package	Description	Order Quantity
<b>HEP AB</b>	On-Hand: 0					
3	58160-0815-52	Twinrix	SYR	10	HEP AB; SYR; 10-PACK	0
<b>HEP B-A</b>	On-Hand: 0					
4	58160-0821-52	Engerix	SYR	10	ENGERIX-B PFS 20MCG/ML 1ML 10/PAC -CDC	0
<b>HEPA-AD</b>	On-Hand: 0					
5	58160-0826-52	Havrix	SYR	10	HEP A (ADULT); SYR; 10-pack	0
<b>HPV AD</b>	On-Hand: 0					
6	00006-4045-41	Gardasil	SDV	10	HPV; SDV; 10-PACK	0
<b>MCV4 AD</b>	On-Hand: 0					
7	49281-0589-05	Menactra	SDV	5	MCV4; SDV; 5-PACK	0
<b>MMR AD</b>	On-Hand: 0					
8	00006-4681-00	MMR II	SDV	10	MMR; SDV; 10-PACK	0
<b>TD AD</b>	On-Hand: 0					

The **Vaccine Order Summary** page allows you to review your order before you submit it.

Should you need to make any changes, click on the **Previous** or **Next** buttons to navigate to the page on which you need to make changes.

**\*\*As a reminder, do not use the Back or Forward arrows of your internet browser. If you use these buttons you will be kicked out of the OSMOSSIS system and your data will not be saved.\*\***

# Order Summary / Submit Order



Order Summary (continued)

Once you have reviewed your order, click the **Submit Order** button to send your order to RIDOH for processing.

Vaccine Type/ Line Item	NDC Code	Brand	Pkg	Doses per Package	Description	Order Quantity
<b>DTAP</b>	On-Hand: 0					
11	58160-0810-52	Infanrix	SYR	10	CDC INFANRIX SYR 0.5 mL 10/PAC	0
<b>DTAP-IPV</b>	On-Hand: 0					
12	58160-0812-52	Kinrix	SYR	10	Kinrix DTaPIPv 0.5ml Pfl Tplock Syr 10pk	0
<b>DTAP-IPV-HEPB</b>	On-Hand: 0					
13	58160-0811-52	Pediarix	SYR	10	CDC PEDIARIX SYR TIPLOCK 10/PAC	0
<b>HEP A (PED)</b>	On-Hand: 0					
14	58160-0825-52	Havrix	SYR	10	HAVRIX TipLok NO NDL No Pres 5ml 10 pkg	0
<b>HEP B (PED)</b>	On-Hand: 0					
15	58160-0820-52	Engerix	SYR	10	CDC ENGERIX B - HEP B (PED) SYR 10/PAC	0
<b>HIB</b>	On-Hand: 0					
16	00006-4897-00	PedvaxHIB	SDV	10	Haemophilus Influenzae, Type B - PedvaxHIB	0
<b>HPV PED</b>	On-Hand: 0					
17	00006-4045-41	Gardasil	SDV	10	HPV; SDV; 10-PACK	0
<b>MCV4</b>	On-Hand: 0					
18	49281-0589-05	Menactra	SDV	5	MCV4; SDV; 5-PACK	0
<b>MMR</b>	On-Hand: 0					

### Special Pediatric Vaccine Order Summary

Vaccine Type/ Line Item	NDC Code	Brand	Pkg	Doses per Package	Description	Order Quantity
<b>DT</b>	On-Hand: 0					
24	49281-0225-10	DT	SDV	1	DT; SDV; 10-pack	0
<b>EIPV</b>	On-Hand: 10					
25	49281-0860-10	IPOL	MDV	10	IPV; MDV10; 1-PACK	0
<b>PNEUMOP</b>	On-Hand: 0					
26	00006-4943-00	Pneumovax	SDV	10	PNUEMO 10 X 0.5 ML, VIALSD 10 DOS	0
<b>TD</b>	On-Hand: 0					
27	49281-0215-15	Tenivac	SYR	10	TD; SYR; 10-PACK	0

# Submission Confirmation



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### SSV Practice Menu

Practice:	RIDOH	Enrollment Year:	2023
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Lead LVP Lic.:	MD08265
PIN:	1600 <b>Family Practice</b>	Vaccine Contact:	LAUREN PILLUSO 401-222-4639 <a href="mailto:lauren.pilluso@health.ri.gov">lauren.pilluso@health.ri.gov</a>
Logged in as:	Larsen	COVID Pandemic Contact:	LAUREN PILLUSO 401-222-4639 <a href="mailto:lauren.pilluso@health.ri.gov">lauren.pilluso@health.ri.gov</a>
Office Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>
Immunization Rep:	Lauren Pilluso 401-222-4639 <a href="mailto:Lauren.Pilluso@health.ri.gov">Lauren.Pilluso@health.ri.gov</a>		

## Vaccine Order Confirmation

The following order has been submitted to HEALTH for processing on Monday December 17, 2012 03:35PM.

Once your order is APPROVED by HEALTH it should be delivered within 10 business days.

Check your order history to get a copy of your APPROVED order.

Exit Order Wizard

Upon submission of your order you will see the **Vaccine Order Confirmation** page. This page verifies that your order has been submitted to RIDOH for approval.

RIDOH will review the submitted order and may make modifications if necessary. You will receive an email once your order has been approved, at which time you will be able to see the approved order on your **Order History** screen.

If all required documentation has been received, barring extenuating circumstances RIDOH should make a decision on your order within 2 business days.

## Vaccine Delivery

- **Monthly Vaccine** order – up to 10 business days from the date **approved**
- **Influenza Vaccine** order – up to 5 business days from the date **approved**

# ORDER CONFIRMATION



Upon submission of your order, you will see the **Vaccine Order Confirmation** page. This page verifies that your order has been submitted to RIDOH for approval.

RIDOH will review the submitted order and may make modifications if necessary. You will receive an email once your order has been approved; at which time you will be able to see the approved order on your **Order History** screen.

You may also receive an email that your order has been placed on HOLD or has been DECLINED. The reasons for the HOLD or DECLINE will be listed in the note section of the email.

## Reasons for HOLD:

- Temperatures out of range (temperature excursion)
- Past 30 days of temperatures not recorded or submitted
- Not conducting twice daily required audit checks
- Not logging in the cloud one daily to review past 12-24hrs of temps and entering initials in the table view
- All temperature monitoring requirements not met

## Reasons for DECLINED:

- If any of the above HOLD issues are not rectified within 5 business days, vaccine inventory has changed, and all orders must be declined and reordered.

If all required documentation has been received, barring extenuating circumstances RIDOH should make a decision on your order within 2 business days.

# Receiving Refrigerator Shipments (1/4)



**MONTHLY Vaccine**

Order ID: 10574  
Next Order Date: 11/25/2016  
Ordering Disabled Reason: **There are shipments to receive**

**INFLUENZA Vaccine**

Order ID: F10575  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Product Lot Expiration Report

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Receive Shipment from Distributor

Order Id	Shipped	Tracking Information	Packing Slip Delivery #
10574	10/29/2016	<a href="#">1ZX1228Y10574</a> UPS	<a href="#">#10574</a>
10574	10/29/2016	<a href="#">2DX1228Y10574</a> UPS	N/A (Direct-Ship)

View Order History

Generate Returns Packing List

Once an order has been approved, it will be transmitted to CDC for shipment. Upon release of the product from the Distribution Center your **Vaccine Order Menu** will be updated to show that there is a shipment to receive. The information will include both the shipment date and a tracking number. Once the product is delivered, you will need to “receive it into OSMOSSIS”.

Click the **Packing Slip Delivery #** to view shipment details, where you can receive the product when it arrives.

Click the **Tracking #** to access the website of the shipping company where you can view the status of your delivery.

If shipping details are available but you have not received the delivery at your facility, you **MUST CONTACT RIDOH WITHIN 4-10 DAYS**. Anything after that time frame, the order will not be replaced, and a new order will need to be submitted..

# Receiving Refrigerator Shipments (2/4)



## Receive Vaccine Shipment

For Tracking Number: 1ZX1228Y10574 (UPS)

Date Shipment Received: \*

Vaccine arrived within the allowable temperature ranges?: \*

Yes  No

### Packing Slip Delivery #10574

#### Adult Vaccine Shipment Summary

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>HEP B-A</b>					
1	58160-0821-52	Engerix	102893840	100	100
<b>HEPA-AD</b>					
2	58160-0826-52	Havrix	102893840	100	100
<b>HPV9</b>					
3	00006-4119-03	Gardasil	102893840	10	10
<b>MCV4 AD</b>					
4	49281-0589-05	Menactra	102893840	10	10

#### Pediatric Vaccine Shipment Summary

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>DTAP-IPV</b>					
12	58160-0812-52	Kinrix	102893840	100	100
<b>DTAP-IPV-HEPB</b>					
13	58160-0811-52	Pediarix	102893840	100	100
<b>HEP A</b>					
14	58160-0825-52	Havrix	102893840	100	100

Save & Continue Later

Receive Shipment

Cancel

In this example, the page to the left will open when you click **Packing Slip Delivery #10574** to receive products shipped by McKesson Specialties.

Fill in the date the shipment was received at your facility and verify that the vaccine arrived within the acceptable temperature ranges by looking at the temperature strips included in the package.

Once shipment arrives, immediately receive the product into inventory. Contact RIDOH immediately at 401-222-4639 if the product in the container does not match that on the packing slip, or if the shipping temperature is out of acceptable range.

Shipping errors must be reported to RIDOH within **4 hours of delivery** to receive credit for reporting shipping errors.

# Receiving Refrigerator Shipments (3/4)



## Receive Vaccine Shipment

**For Tracking Number:** 1ZX1228Y10574 (UPS)

Date Shipment Received: \*

Vaccine arrived within the allowable temperature ranges?: \*  Yes  No

Once you enter the shipment delivery information, a box will appear instructing you to receive the products of the delivery; click **Return to form**.

**For Tracking Number:** 1ZX1228Y10574 (UPS)

Date Shipment Received: \* Oct 31, 2016

Vaccine arrived within the allowable temperature ranges?: \*  Yes  No

**Verify Dose Counts**

Verify that the amount in the Received Doses column is what you physically received. If it is not, please enter the correct amount.

Return to form

If you try to complete receipt of shipment without entering **Date Shipment Received** and answering the temperature range question, you will see an error box pop up requiring that you complete the data. Click **Return to form**.

**For Tracking Number:** 1ZX1228Y10574 (UPS)

Date Shipment Received: \*  Date required

Vaccine arrived within the allowable temperature ranges?: \*  Yes  No value is required

**Incomplete or Invalid Data**

The information cannot be submitted as entered. Note any error messages and fix all errors and omissions.

Return to form

# Receiving Refrigerator Shipments (4/4)



## Packing Slip Delivery #10574

Adult Vaccine Shipment Summary

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>HEP B-A</b>					
1	58160-0821-52	Engerix	102893840	100	<input type="text" value="100"/>
<b>HEPA-AD</b>					
2	58160-0826-52	Havrix	102893840	100	<input type="text" value="100"/>
<b>HPV9</b>					
3	00006-4119-03	Gardasil	102893840	10	<input type="text" value="10"/>
<b>MCV4 AD</b>					
4	49281-0589-05	Menactra	102893840	10	<input type="text" value="10"/>

Pediatric Vaccine Shipment Summary

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>DTAP-IPV</b>					
12	58160-0812-52	Kinrix	102893840	100	<input type="text" value="100"/>
<b>DTAP-IPV-HEPB</b>					
13	58160-0811-52	Pediarix	102893840	100	<input type="text" value="100"/>
<b>HEP A</b>					
14	58160-0825-52	Havrix	102893840	100	<input type="text" value="100"/>

Verify that the products you received match the products and quantities listed on the **Receive Shipments** page.

The next step is to confirm the quantity of vaccine that was delivered by product **Type**, **NDC Code**, and **Lot #**. The **Recv'd Doses** field will already be populated by the shipping file RIDOH received from McKesson. Verify that this number matches the quantity in the shipping container for each vaccine type. If product shipped does not match, change the quantity of **Recv'd Doses** accordingly.

**You must report any quantity discrepancy to RIDOH within 4 hours of delivery. Do not discard the packing slip; RIDOH will need it to verify the delivery discrepancy.**

Once you have made any necessary changes – or to receive the shipment as indicated – click **Receive Shipment**.

Note: OSMOSSIS will not allow you to place another vaccine order until all outstanding deliveries are “received into the system”.



# Receiving Frozen Shipments



**MONTHLY Vaccine**

Order ID: 10574  
Next Order Date: 11/25/2016  
Ordering Disabled Reason: **There are shipments to receive**

**INFLUENZA Vaccine**

Order ID: F10575  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Product Lot Expiration Report

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Receive Shipment from Distributor

Order Id	Shipped	Tracking Information	Packing Slip Delivery #
10574	10/29/2016	<a href="#">1ZX1228Y10574</a> UPS	#10574
10574	10/29/2016	<a href="#">2DX1228Y10574</a> UPS	N/A (Direct-Ship)

View Order History

Generate Returns Packing List

To receive frozen vaccine deliveries directly from Merck Pharmaceuticals, click **N/A (Direct-Ship)** in the **Receive Shipment from Distributor** section.

The receiving process is the same for frozen vaccines as for non-frozen, as indicated on the previous pages.

Be sure to enter **all** quantities in direct-ship boxes on this page. OSMOSSIS knows how many boxes are included in the shipment but does not know how many doses are in each box.

If shipping details are available but you have not received the delivery at your facility, you **MUST CONTACT RIDOH WITHIN 4-10 DAYS**. Anything after that time frame, the order will not be replaced, and a new order will need to be submitted..

# Receiving Damaged Shipments



Receive Vaccine Shipment

For Tracking Number: 1ZX1216Y10586 (UPS)

Date Shipment Received: Oct 31, 2016

Vaccine arrived within the allowable temperature range?  Yes  No

Packing Slip Delivery #10586

Adult Vaccine Shipment Summary

Vaccine Type/Line Item	NDC Code	Brand	Lot #	Shipped Doses	Rec'd Doses
HEP B-A	58160-0821-52	Engerix	102895521	10	10
MENB	46028-0114-01	Bersero	102895521	40	40
MMR AD	00006-4681-00	MMR II	102895521	10	10

Pediatric Vaccine Shipment Summary

Vaccine Type/Line Item	NDC Code	Brand	Lot #	Shipped Doses	Rec'd Doses
MCV4	49281-0589-05	Menactra	102895521	10	10

Save & Continue Later Receive Shipment Cancel

If a product is received out of acceptable temperature ranges (as indicated by the enclosed temperature strip) please contact RIDOH within 4 hours of delivery, **before** receiving the delivery into OSMOSSIS.

If it is decided that the product is no longer viable, select **No** in answering the question regarding whether the “Vaccine arrived within the allowable temperature ranges”. After selecting **No**, you will see the **Verify Dose Count** message appear. Click **Return to form**.

You will still need to verify that all products indicated on the packing slip, in the package, and on the shipping summary file uploaded to OSMOSSIS match.

Once all product quantities are verified or adjusted, select **Receive Shipment** and another pop-up message will appear confirming that you want to continue with the return of vaccine that was shipped inappropriately.

All products in the order must be “received” before an automatic replacement order will be created. Automatic return will not be created until the replacement order is approved by RIDOH.

Receive Vaccine Shipment

For Tracking Number: 1ZX1216Y10586 (UPS)

Date Shipment Received: Oct 31, 2016

Vaccine arrived within the allowable temperature range?  Yes  No

Packing Slip Delivery #10586

Adult Vaccine Shipment Summary

Vaccine Type/Line Item	NDC Code	Brand	Lot #	Shipped Doses	Rec'd Doses
HEP B-A	58160-0821-52	Engerix	102895521	10	10
MENB	46028-0114-01	Bersero	102895521	40	40
MMR AD	00006-4681-00	MMR II	102895521	10	10

Pediatric Vaccine Shipment Summary

Vaccine Type/Line Item	NDC Code	Brand	Lot #	Shipped Doses	Rec'd Doses
MCV4	49281-0589-05	Menactra	102895521	10	10

Save & Continue Later Receive Shipment Cancel

# Receiving Multiple Packages



## OSMOSSIS Vaccine Ordering Menu

### MONTHLY Vaccine

Order ID: 10567  
Next Order Date: 10/25/2016  
Ordering Disabled Reason: **There are shipments to receive**

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Product Lot Expiration Report

### INFLUENZA Vaccine

Order ID: F10566  
Next Order Date: 10/31/2016  
Ordering Disabled Reason: **There are shipments to receive**

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Receive Shipment from Distributor

Order Id	Shipped	Tracking Information	Packing Slip Delivery #
10567	09/27/2016	1ZX1166Y10567 UPS	#10567
10567	09/27/2016	2ZX1166Y10567 UPS	#200010567
10567	09/27/2016	3ZX1166Y10567 UPS	#300010567
10567	09/27/2016	2DX1166Y10567 UPS 3DX1166Y10567 UPS	N/A (Direct-Ship)

View Order History

Generate Returns Packing List

If a product shipment includes multiple boxes and packing slips for one order, you will need to receive each box/packing slip independently.

By clicking on the **Packing Slip Delivery #**, OSMOSSIS will open the receiving window for that packing slip only. Complete the entire receiving process for each individual packing slip before moving to the next one.

The example to the left shows a delivery of refrigerator-stable (non-frozen) vaccines in three boxes, and one delivery of frozen vaccines. As you can see, the order ID is the same for all shipments, indicating they are part of the same order.

# Multiple Packages (1/2)



Box #1 contains one vaccine that has two different lot numbers to fulfill the adult portion of the order

**Receive Vaccine Shipment**

**For Tracking Number:** 1ZX1166Y10567 (UPS)

---

Date Shipment Received: \*

Vaccine arrived within the allowable temperature ranges?:\*  Yes  No

**Packing Slip Delivery #10567**

**Adult Vaccine Shipment Summary**

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>HPV9</b>					
3	00006-4119-03	Gardasil	926152243	25	25
			B26152243	25	25

**Pediatric Vaccine Shipment Summary**

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>HPV9</b>					
17	00006-4119-03	Gardasil	926152243	100	100

Box #2 contains 25 more doses for the adult portion of the order

**Receive Vaccine Shipment**

**For Tracking Number:** 2ZX1166Y10567 (UPS)

---

Date Shipment Received: \*

Vaccine arrived within the allowable temperature ranges?:\*  Yes  No

**Packing Slip Delivery #200010567**

**Adult Vaccine Shipment Summary**

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>HPV9</b>					
3	00006-4119-03	Gardasil	926152243	25	25

# Multiple Packages (2/2)



Box #3 contains the final 25 doses for the adult portion of the order

**Receive Vaccine Shipment**

**For Tracking Number:** 3ZX1166Y10567 (UPS)

---

Date Shipment Received: \*

Vaccine arrived within the allowable temperature ranges?: \*  Yes  No

**Packing Slip Delivery #300010567**

**Adult Vaccine Shipment Summary**

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>HPV9</b>					
3	00006-4119-03	Gardasil	926152243	25	25

Box #4 contains the direct-ship (frozen) portion of the order. OSMOSSIS knows how many boxes are included in the shipment but does not know how many doses are in each box. Therefore, you must enter the total of **all** direct ship boxes on this page

**For Tracking Numbers:** 2DX1166Y10567 (UPS)  
3DX1166Y10567 (UPS)

---

Date Shipment Received: \*

Vaccine arrived within the allowable temperature ranges?: \*  Yes  No

**Packing Slip Delivery # N/A (Direct-Shipment)**

**This is a Direct-Ship multi-box shipment. Please enter the total quantities received from \*ALL\* boxes matching the displayed tracking numbers.**

**Adult Vaccine Shipment Summary**

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>VAR</b>					
11	00006-4827-00	Varivax	926152243	110	110

**Pediatric Vaccine Shipment Summary**

Vaccine Type/ Line Item	NDC Code	Brand	Lot #	Shipped Doses	Recv'd Doses
<b>VAR</b>					
27	00006-4827-00	Varivax	C26152243	60	60
			926152243	50	50

# Returns / Waste Report



State of Rhode Island  
**Department of Health**

## SSV Practice Menu

Practice:	RIDOH			
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY			
PIN:	1600	Family Practice	Lead LVP Lic.:	MD08265
Logged in as:	1600			
Practice Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	Vaccine Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>	
Immunization Rep:	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>	Pandemic Vaccine Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>	
Order ID:	83050	Backup Pandemic Vaccine Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>	
Order Status:	New	Next Order Date:	NOW	
		Ordered by:	LAUREN PILUSO	

Returned or wasted vaccine should be entered within 48 hours of event or expiring. Please complete the **Vaccine Return/Waste** information for each affected product and Lot #, quantity and reason.  
**REMINDER: Return reports are approved at the end of each month. Labels will be sent once approved. Return labels are valid for 30 days. Return vaccine to the manufacture within 30 days of receiving the label.**

Please note the differences between a **Return** and **Wasted** vaccine.

## Vaccine Return/Waste

- A **RETURN** is a product that has expired or spoiled due to storage and handling issues and can be returned to the manufacturer in its original condition for refund of the Excise Tax.
- A **WASTE** is a product that cannot be returned for credit due to the vaccine being in a condition other than its original state. Examples of waste include, broken/leaking vials, pre-drawn vaccines, or re-constituted vaccines.

Complete the following steps for a vaccine Return or Waste:

1. Select the **Return** or **Waste** Button
2. Select **Order Type**:
  - Pediatric or Pediatric Specialty
  - Adult or Adult Specialty

(From this point on the system will pre-populate your entries if there is only 1 choice available.)

3. Select vaccine type, vaccine brand, package type, NDC code, Lot #, and reason [for waste or return] from dropdown menus
4. Enter quantity of doses to be returned
5. Choose to **Add Another** return or waste, or click **Save** to complete the process.

## Enter Vaccine Waste or Return Information

Action Type:  Return  Waste

Order Type:

Vaccine Type:

Vaccine Brand:

Package Type:

NDC Code:

Lot Number / Exp. Date:

Quantity:

Reason:

Save and Add Another

Save

Cancel

# Transferring Vaccine (1/2)



The screenshot shows the OSMOSSIS Vaccine Ordering Menu. At the top, the State of Rhode Island Department of Health logo and name are displayed. Below this, a navigation menu includes "Immunization Resources Manual & Form" and "Log Off". The user is logged in as "1509 HEALTH12" with an Alpha Name of "Health 12" and a PIN of "1509 FAMILY". The Lead LVP Lic. is "MD12345" and the Vaccine Contact is "RHANIDA PENA". The Practice Contact is "MARK FRANCESCOINI" and the Vaccine Contact is "222-222-2222".

The main content area is titled "OSMOSSIS Vaccine Ordering Menu" and is divided into two columns: "MONTHLY Vaccine Order" and "INFLUENZA Vaccine Order".

**MONTHLY Vaccine Order** (Order ID: 10126, Next Order Date: NOW, Order Status: New):

- PRINT OUT Current Inventory Lot# Report
- Place Vaccine Order
- Transfer Vaccine to Another Practice** (highlighted with a green oval)
- Enter Vaccine Return or Waste Information
- Product Lot Expiration Report

**INFLUENZA Vaccine Order** (Order ID: F10164, Next Order Date: NOW, Order Status: Incomplete):

- PRINT OUT Current Flu Inventory Lot# Report
- Submit Dose Admin Report / Flu Vaccine Order
- Transfer Vaccine to Another Practice** (highlighted with a green oval)
- Enter Vaccine Return or Waste Information

At the bottom of the menu, there are buttons for "Receive Shipment from Distributor", "View Order History", and "Return to SSV Menu".

The footer includes the "HEALTH" logo, "Rhode Island Department of Health", "Copyright 2003-2010 Rhode Island Department of Health", and the URL "rel.gov". The version number "rel.2.3.116 20131011" is also present.

Vaccines may be transferred between 2 or more enrolled SSV practices.

Transferring vaccine is a 2-step process requiring initiation by the practice releasing the vaccine, and acceptance/rejection by the receiving practice.

This module operates similarly to the Return/Waste module, with additional information needed such as the practice to which the vaccine will be transferred.

# Transferring Vaccine (2/2)



## Vaccine Transfer



Transfers can only be completed between two actively enrolled SSV practices. Vaccines can only be transferred to practices that are approved to administer that type of vaccine. If you are trying to transfer vaccine to a practice that does not appear on the drop-down list please contact RIDOH at 401-222-4639.

### Enter Vaccine Transfer Information

Order Type:	<input type="text" value="Select..."/>
Vaccine Destination:	<input type="text"/>
Vaccine Type:	<input type="text"/>
Vaccine Brand:	<input type="text"/>
Package Type:	<input type="text"/>
NDC Code:	<input type="text"/>
Lot Number / Exp. Date:	<input type="text"/>
Quantity:	<input type="text"/>

<input type="button" value="Save and Add Another"/>	<input type="button" value="Save"/>	<input type="button" value="Cancel"/>
---	-------------------------------------	---------------------------------------

To transfer vaccine, select the appropriate option from each drop-down category: order type, vaccine destination (the practice the vaccine is being transferred to), other vaccine specifics, and the quantity of doses being released/transferred.

As mentioned previously, OSMOSSIS will pre-populate categories if there is only 1 answer choice available.

Once you **Save** the transfer request, the receiving practice will be notified and be required to accept the transfer, after which the inventory will be released from one practice and added to the other.

Follow pack out instruction when packing vaccines in cooler. All transferred vaccine must have a temperature monitoring devices



# Order History (1/3)



State of Rhode Island  
**Department of Health**

**SSV Practice Menu**

Navigation Menu  
Immunization Resource Manual & Form  
Logout

Practice:	RIDOH	Enrollment Year:	2023
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Lead LVP Lic.:	MD08265
PIN:	1600 <b>Family Practice</b>	Vaccine Contact:	LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov
Logged in as:	Larsen	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov
Office Contact:	NICOLE SELEMA 401-222-4631 nicole.selema@health.ri.gov	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1590 msashan.joyce@health.ri.gov
Immunization Rep:	Lauren Piluso 401-222-4639 Lauren.Piluso@health.ri.gov		

**OSMOSSIS Vaccine Ordering Menu**

**MONTHLY Vaccine**

Order ID: 88656  
Next Order Date: 06/07/2021  
Ordering Disabled Reason: **Not yet next order date**

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Product Lot Expiration Report

There are currently 4 lot numbers expiring within the next 120 days.

**INFLUENZA Vaccine**

Order ID: F85902  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

**COVID-19 Vaccine**

COVID-19 vaccine provider enrollment information is available at [Rhode Island COVID-19 Vaccine Information for Healthcare Providers](#) webpage. One requirement for vaccine ordering is the completion of COVID-19 training. You have attested that you have completed the required CDC COVID-19 Vaccine Training and will monitor the CDC COVID-19 site for updates.

**It is important that you monitor the CDC COVID-19 site for updated information on an ongoing basis.**

Order ID: C67246  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Inventory Lot# Report

Submit COVID-19 Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

The **View Order History** link will allow you to follow the status of a current order being processed as well as view previous orders.



# Order History (2/3)



## SSV Practice Menu

### Navigation Menu

- ▶ Immunization Resource Manual & Form
- ▶ Logout

Practice: RIDOH

Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY Enrollment Year: 2023

PIN: 1600 **Family Practice** Lead LVP Lic.: MD08265

Logged in as: Larsen Vaccine Contact: LAUREN PILUSO  
401-222-4639  
lauren.pilus@health.ri.gov

Office Contact: NICOLE SELEMA COVID Pandemic Contact: LAUREN PILUSO  
401-222-4631  
nicole.selema@health.ri.gov  
401-222-4639  
lauren.pilus@health.ri.gov

Immunization Rep: Lauren Piluso Backup COVID: MEAGHAN JOYCE  
401-222-4639  
Lauren.Pilus@health.ri.gov  
401-222-1580  
meaghan.joyce@health.ri.gov

## Vaccine Order History

### Doses Administered

You reported the following Doses administered for the 2015-2016 influenza season.

6-35 Months	3-18 Years	19+ Years	Total 2015-2016 Doses Administered	Total 2016-2017 Doses Available for Order
123	1357	2140	3620	4350*

\* If your Pre-book total exceeds your Total allowance you will not be allowed to proceed to the next page.

### Pre-Book Dose Quantity - Patients & Staff

Last User Updated: mvf5988  
Last Date Updated: 08-19-2016

Product	6-35 Months Injectable	3-18 Years Injectable	19+ Years Injectable	Pre-Book Total
Fluzone PF 0.25ml (Ages 6-35 Mos)	240	N/A	N/A	240
PEDIATRIC Fluzone 0.5ml	N/A	300	N/A	300
ADULT Fluzone 0.5ml	N/A	N/A	500	500
PEDIATRIC Fluorix	N/A	300	N/A	300
ADULT Fluorix	N/A	N/A	500	500
Fluzone High Dose (65+ only)	N/A	N/A	500	500
<b>TOTAL DOSES</b>	<b>240</b>	<b>600</b>	<b>1500</b>	<b>2340</b>

## Order History

Recent Past 12

Monthly Order History					Flu Order History				
Order ID	Status	Status Date	Next Available Order Date	Flags	Order ID	Status	Status Date	Next Available Order Date	Flags
10599	New/Incomplete	12/28/2016	NOW		F10563	New/Incomplete	09/05/2016	NOW	
10417	Received	04/01/2016	04/27/2016		F10557	Received	09/02/2016	09/02/2016	
					F10421	Received	05/09/2016	05/09/2016	
					F10419	Received	04/04/2016	04/05/2016	
					F10415	Received	03/31/2016	04/01/2016	

Click **View Order History** to view current and past orders in a chronological sequence (newest to oldest).

Included on this page is seasonal influenza information, including the previous season's doses administered and current season "Reserve" quantities.

Select **Order ID** to view an order's information.

# Order History (3/3)



- Navigation Menu
- ▶ Immunization Resource Manual & Form
  - ▶ Logoff

Practice: RIDOH

Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY Enrollment Year: 2023

PIN: 1600 **Family Practice** Lead LVP Lic.: MD08265

Logged in as: Larsen Vaccine Contact: LAUREN PILUSO  
 401-222-4639  
[lauren.piluso@health.ri.gov](mailto:lauren.piluso@health.ri.gov)

Office Contact: NICOLE SELEMA COVID Pandemic Contact: LAUREN PILUSO  
 401-222-4631  
[nicole.selema@health.ri.gov](mailto:nicole.selema@health.ri.gov) 401-222-4639  
[lauren.piluso@health.ri.gov](mailto:lauren.piluso@health.ri.gov)

Immunization Rep: Lauren Piluso Backup COVID MEAGHAN JOYCE  
 401-222-4639 Pandemic Contact: 401-222-1580  
[Lauren.Piluso@health.ri.gov](mailto:Lauren.Piluso@health.ri.gov) [meaghan.joyce@health.ri.gov](mailto:meaghan.joyce@health.ri.gov)

Order Status History	
Status	Date
SUBMITTED	11/16/2012 11:03AM
APPROVED	11/16/2012 05:10PM
PROCESSING	11/16/2012 05:10PM
SHIPPED	11/16/2012 05:10PM
RECEIVED	11/16/2012 05:10PM

Order information includes dates for when the order was:

- Submitted by practice
- Approved by RIDOH
- Processed to CDC
- Shipped from the distributor
- Received by the practice

You can also review the vaccines that were ordered, approved, shipped, received, wasted, and returned.

**Adult Vaccines**

Order							Shipment			Received		Transfers		Wastes	Returns
Line #	Type	Brand	Pkg	INDC	Ord Qty	Aprv Qty	Lot #	Qty	Date	Qty	Date	In	Out		
1	PNEUMO	Pneumovax	SDV	00006-4943-00	90	90						0	0	0	0
2	TDAP AD	Adacel	SYR	49281-0400-15	90	90						0	0	0	0

**Pediatric Vaccines**

Order							Shipment			Received		Transfers		Wastes	Returns
Line #	Type	Brand	Pkg	INDC	Ord Qty	Aprv Qty	Lot #	Qty	Date	Qty	Date	In	Out		
11	DTAP	Infanrix	SYR	58160-0810-52	100	100						0	0	0	0
12	DTAP-IPV	Kinrix	SYR	58160-0812-52	100	100						0	0	0	0

[Return to List](#)

# Product Lot Expiration Report (1/2)



State of Rhode Island  
**Department of Health**

Navigation Menu  
Immunization Resource Manual & #  
Logout

Practice:	RIDOH	Enrollment Year:	2023
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Lead LVP Lic.:	MD08265
PIN:	1600 <b>Family Practice</b>	Vaccine Contact:	LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov
Logged in as:	Larsen	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov
Office Contact:	NICOLE SELEMA 401-222-4631 nicole.selema@health.ri.gov	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 meaghan.joyce@health.ri.gov
Immunization Rep:	Lauren Piluso 401-222-4639 Lauren.Piluso@health.ri.gov		

**MONTHLY Vaccine Order**

Order ID: 10126  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

**Product Lot Expiration Report**

**INFLUENZA Vaccine Order**

Order ID: F10164  
Next Order Date: NOW  
Order Status: Incomplete

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Receive Shipment from Distributor

View Order History

Return to SSV Menu

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Select **Product Lot Expiration Report** to view all vaccines currently in your inventory that have expired or will expire within the next 120 days.

This report should be reviewed frequently to make sure that your practice is not using expired vaccines. The way to prevent this is to **rotate vaccine inventory properly**. This means using older vaccines before using newer ones. Failure to rotate inventory properly is considered negligent and may result in the practice having to pay for replacement of expired vaccines.

# Product Lot Expiration Report (2/2)



Product Lot Expiration Report: Dec-26-2012

### Adult Vaccine Inventory

Vaccine Type	NDC Code	Brand	Doses per Pkg	Unit Presentation	Expiration Date
<b>PNEUMO</b>					
	00006-4739-00	Pneumovax	1	PNEUMOCOCCAL 23 VALENT 5-DOSE VIAL	0895AA: Nov-12-2012

### Pediatric Vaccine Inventory

Vaccine Type	NDC Code	Brand	Doses per Pkg	Unit Presentation	Expiration Date
<b>HIB</b>					
	00006-4897-00	PedvaxHIB	10	Haemophilus Influenzae, Type B - PedvaxHIB	1688Z: Nov-11-2012 0059AA: Nov-13-2012
<b>MMR</b>					
	00006-4681-00	MMR II	10	MMR; SDV; 10-PACK	1575Z: Nov-11-2012

After clicking **Product Lot Expiration Report**, you will see all the product information including NDC Code, Lot #, and Expiration Date.

If your practice feels that it will not be able to use all of a vaccine before it expires, please contact RIDOH and we will try to assist you in finding another practice that can use the vaccine. It is the responsibility of the practice to initiate this request and make all arrangements with any receiving practice that may be identified.

RIDOH cannot guarantee that it will be able to find a practice that is able to use the vaccine.

# Influenza Vaccine Order Menu



State of Rhode Island  
**Department of Health**

**Navigation Menu**  
Immunization Resource Manual & News  
Logout

Practice:	RIDOH	Enrollment Year:	2023
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Lead LVP Lic.:	MD08265
PIN:	1600 <b>Family Practice</b>	Vaccine Contact:	LAUREN PILUSO 401-222-4639 lauren.pilus@health.ri.gov
Logged in as:	Larsen	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 lauren.pilus@health.ri.gov
Office Contact:	NICOLE SELEMA 401-222-4631 nicole.selema@health.ri.gov	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 meaghan.joyce@health.ri.gov
Immunization Rep:	Lauren Piluso 401-222-4639 Lauren.Pilus@health.ri.gov		

The next few screens will discuss influenza vaccine ordering. They will address specific items for **Influenza Vaccine Orders** that are different than regular Monthly Orders.

Once you have completed the **Current Flu Inventory Lot# Report** printout, you are ready to start the vaccine order process.

**MONTHLY Vaccine Order**  
Order ID: 10126  
Next Order Date: NOW  
Order Status: New

PRINT OUT Current Inventory Lot# Report

Place Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Product Lot Expiration Report

**INFLUENZA Vaccine Order**  
Order ID: F10164  
Next Order Date: NOW  
Order Status: Incomplete

PRINT OUT Current Flu Inventory Lot# Report

Submit Dose Admin Report / Flu Vaccine Order

Transfer Vaccine to Another Practice

Enter Vaccine Return or Waste Information

Receive Shipment from Distributor

View Order History

Return to SSV Menu

Click **Submit Dose Admin Report / Flu Vaccine Order** to start the order process.

# Influenza Ordering



Navigation Menu

- Immunization Resource Manual & Form
- Logoff

Practice: RIDOH  
Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY Enrollment Year: 2023  
PIN: 1600 Family Practice Lead LVP Lic.: MD08265  
Logged in as: Larsen Vaccine Contact: LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov  
Office Contact: NICOLE SELEMA 401-222-4631 nicole.selema@health.ri.gov COVID Pandemic Contact: LAUREN PILUSO 401-222-4639 lauren.piluso@health.ri.gov  
Immunization Rep: Lauren Piluso 401-222-4639 Lauren.Piluso@health.ri.gov Backup COVID Pandemic Contact: MEAGHAN JOYCE 401-222-1580 meaghan.joyce@health.ri.gov

### Vaccine Return/Waste

- A **RETURN** is a product that has expired or spoiled due to storage and handling issues and can be returned to the manufacturer in its original condition for refund of the Excise Tax.
- A **WASTE** is a product that cannot be returned for credit due to the vaccine being in a condition other than its original state. Examples of waste include, broken/leaking vials, pre-drawn vaccines, or re-constituted vaccines.

#### Enter Vaccine Waste or Return Information

Action Type:  Return  Waste

Order Type:

Vaccine Type:

Vaccine Brand:

Package Type:

NDC Code:

Lot Number / Exp. Date:

Quantity:

Reason:

Buttons: Save and Add Another, Next →, Cancel

**Vaccine Order Wizard**

Before entering your order information, do you have any Vaccine Returns or Waste to report first?

Yes No

After completing or bypassing the **Returns/Waste** screen, the flu vaccine ordering process is very similar to that of monthly vaccines.

The main difference is that you must enter information about the influenza vaccine doses that were administered to patients on a weekly basis. This will be covered on the following pages.

# Inventory / Order Notes



State of Rhode Island  
Department of Health

Navigation Menu  
 Immunization Resources Manual & Form  
 Logout

Practice: RIDOH  
 Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY  
 PIN: 1600 **Family Practice**  
 Enrollment Year: 2023  
 Lead LVP Lic.: MD08265  
 Logged in as: Larsen  
 Vaccine Contact: LAUREN PILUSO  
 401-222-4639  
 lauren.piluso@health.ri.gov  
 Office Contact: NICOLE SELEMA  
 401-222-4631  
 nicole.selema@health.ri.gov  
 COVID Pandemic Contact: LAUREN PILUSO  
 401-222-4639  
 lauren.piluso@health.ri.gov  
 Immunization Rep: Lauren Piluso  
 401-222-4639  
 Lauren.Piluso@health.ri.gov  
 Backup COVID Pandemic Contact: MEAGHAN JOYCE  
 401-222-1580  
 meaghan.joyce@health.ri.gov

Practices are allowed to order influenza vaccine once every 7-days during the influenza season. Please order enough vaccine so that you do not run out of supply before you receive delivery of your next order. It is recommended that when you order you should order enough vaccine for your practice to be able to administer, please do not stockpile vaccines by ordering more than a 2-week supply. Orders will be filled based on a practices pre-book amounts and availability of supply from the vaccine manufacturers

Indicate in the fields below the number of doses you will need until your next order can be placed and delivered, as described above. "Max." order quantity in the grid below has been calculated based on your reported Doses Administered and available supply.

Adult Flu Vaccine Order Entry  
 new practice=true, first order=false

Vaccine Type	NDC Code	Brand	Doses per Package	Description	Order Quantity (Doses)
FLU AD	On-Hand: 13				
	58160-0900-52	Fluarix 0.5ml (>19 yrs)	10	Adult QIV A=40, B=100, C=40, D=50, E=33, F=40	<input type="text"/> (combined max. 40)
	33332-0013-10	Afluria	10	For Special order purposes only A=40, B=100, C=40, D=50, E=33, F=40	<input type="text"/> (combined max. 40)

[Send note to HEALTH about this order](#)  
 (You may send more than one note)

Previous Save & Continue Later Next

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The **Inventory Tracking** and **Vaccine Order** pages for both adult and pediatric influenza vaccine work the same as those for regular vaccines, covered earlier in the presentation.

Please remember that if you are ordering vaccine outside the norm (i.e. have a special request or instruction regarding your order) click "**Send Note to RIDOH about this order**" and describe the special request; do not send a separate email.

Any orders outside the norm *without a note* will be held until RIDOH can identify the special need by the provider's office, or will be processed without the special need being approved.



# Doses Administered Report (1/3)



Navigation Menu  
 > Immunization Resource Manual & Form  
 > Logout

Practice: RIDOH  
 Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY Enrollment Year: 2023  
 PIN: 1600 **Family Practice** Lead LVP Lic.: MD08265  
 Logged in as: Larsen Vaccine Contact: LAUREN PILLUSO 401-222-4639 [lauren.pilluso@health.ri.gov](mailto:lauren.pilluso@health.ri.gov)  
 Office Contact: NICOLE SELEMA 401-222-4631 [nicole.selema@health.ri.gov](mailto:nicole.selema@health.ri.gov) COVID Pandemic Contact: LAUREN PILLUSO 401-222-4639 [lauren.pilluso@health.ri.gov](mailto:lauren.pilluso@health.ri.gov)  
 Immunization Rep: Lauren Piluso 401-222-4639 [Lauren.Piluso@health.ri.gov](mailto:Lauren.Piluso@health.ri.gov) Backup COVID Pandemic Contact: MEAGHAN JOYCE 401-222-1580 [meaghan.joyce@health.ri.gov](mailto:meaghan.joyce@health.ri.gov)

**Report Influenza Doses Administered**

**!** Report ONLY State Supplied Vaccine doses administered after Sep-02-2016 10:19AM

Age Group Reporting

Mouse-over "Osmosis Calculated Doses Admin'd" numbers for additional detail

Product	Osmosis Calculated Doses Admin'd	6-35 mo	3-18 yrs	19+ yrs	Reported Doses Admin'd
PEDIATRIC Fluzone 0.25ml 49281-0516-25	1				
PEDIATRIC Fluzone 0.5ml 49281-0416-50	2				
PEDIATRIC Fluarix 58160-0905-52	0	N/A	<input type="text" value="0"/>	N/A	0
ADULT Fluzone 0.5ml 49281-0416-50	0	N/A	N/A	<input type="text" value="0"/>	0
ADULT Fluarix 58160-0905-52	50	N/A	N/A	<input type="text" value="50"/>	50
ADULT Fluzone HD 49281-0399-65	100	N/A	N/A	<input type="text" value="100"/>	100
<b>Total Doses</b>	185				185

**Vaccine Order Wizard**

**!** PLEASE NOTE: Your last Doses Administered Report was recorded on Sep-02-2016 10:19AM. On the next page, you will be asked to report only doses administered after this date and time.

After you click **Next** on the **Vaccine Order** page, you will arrive at the **Doses Administered** section of the report. A window will pop up showing the last date that vaccines were reported. Please make note of that date, and only report vaccines administered *after* that date to prevent duplicating reporting doses administered.

**IMPORTANT:** It is important to accurately report flu doses administered, because practices are allowed seasonal flu vaccine based on the amount of vaccine that was reported as administered during the *previous* flu season.

**Failure to report doses administered accurately will impact your flu vaccine supply the following year.**

# Doses Administered Report

## (2/3)



- Navigation Menu
- Immunization Resource Manual & Form
  - Logout

Practice: RIDOH

Alpha Name: RI DEPT OF HEALTH/THE WELLNESS COMPANY Enrollment Year: 2023

PIN: 1600 **Family Practice** Lead LVP Lic.: MD08265

Logged in as: Larsen Vaccine Contact: LAUREN PILUSO  
401-222-4639  
[lauren.piluso@health.ri.gov](mailto:lauren.piluso@health.ri.gov)

Office Contact: NICOLE SELEMA COVID Pandemic Contact: LAUREN PILUSO  
401-222-4631  
[nicole.selema@health.ri.gov](mailto:nicole.selema@health.ri.gov) 401-222-4639  
[lauren.piluso@health.ri.gov](mailto:lauren.piluso@health.ri.gov)

Immunization Rep: Lauren Piluso Backup COVID MEAGHAN JOYCE  
401-222-4639 Pandemic Contact: 401-222-1580  
[Lauren.Piluso@health.ri.gov](mailto:Lauren.Piluso@health.ri.gov) [meaghan.joyce@health.ri.gov](mailto:meaghan.joyce@health.ri.gov)

On the **Doses Administered** page you will be required to report doses administered by **age group** and **vaccine presentation** for both Pediatric and Adult patients.

**Report Influenza Doses Administered**

Report ONLY State Supplied Vaccine doses administered after Sep-02-2016 10:19AM

Age Group Reporting

Mouse-over "Osmosis Calculated Doses Admin'd" numbers for additional detail

Product	Osmosis Calculated Doses Admin'd	6-35 mo	3-18 yrs	19+ yrs	Reported Doses Admin'd
<b>PEDIATRIC</b> Fluzone 0.25ml 49281-0516-25	10	<input type="text" value="10"/>	N/A	N/A	10
<b>PEDIATRIC</b> Fluzone 0.5ml 49281-0416-50	25	N/A	<input type="text" value="25"/>	N/A	25
<b>PEDIATRIC</b> Fluarix 58160-0905-52	0	N/A	<input type="text" value="0"/>	N/A	0
<b>ADULT</b> Fluzone 0.5ml 49281-0416-50	0	N/A	N/A	<input type="text" value="0"/>	0
<b>ADULT</b> Fluarix 58160-0905-52	50	N/A	N/A	<input type="text" value="50"/>	50
<b>ADULT</b> Fluzone HD 49281-0399-65	100	N/A	N/A	<input type="text" value="100"/>	100
<b>Total Doses</b>	185				185

YTD Shipped	60
+ YTD Xfers In	0
- YTD Xfers Out	0
- YTD Wastes	0
- YTD Returns	0
- YTD DAR	40
- On-Hand Inv.	10
= CDA	10

Please note that all fields require data entry. If no vaccines were administered to an individual in any field you must enter zero (0).

In the **OSMOSSIS Calculated Doses Admin'd** column, hover your cursor over a number in the field and a pop-up window will appear showing how the system arrived at this number. If your data does not match that in the system, it is due to an entry error by the practice. Please compare the information in the table to ensure it matches your data records.

# Doses Administered Report (3/3)



## Doses Administered (continued):

**Priority Group Reporting** – indicate how many of the patients from the **Age Group Reporting** fall under any of the priority groups. If a patient falls under multiple priority groups please only include them in the first available option (e.g. a pregnant healthcare worker would be reported under **Pregnant Women**).

**Report Submit Option** – select whether you are:

- reporting doses administered and need additional flu vaccine
- reporting doses administered and **do not** need additional flu vaccine
- submitting a final report

Your answer will dictate which screen appears next – either the regular order process or a pop-up asking you to confirm your choice.

At the bottom of the screen, you will see a history of all flu vaccines that were reported as administered to date.

Once you have completed all the information, click **Next**.

<b>ADULT</b> Fluzone HD 49281-0399-65	100	N/A	N/A	100	100
<b>Total Doses</b>	185				185

**Priority Group Reporting**

Of the doses administered reported in the age groups above please identify how many doses were issued to individuals from each of the following Priority Groups. If an individual falls into multiple priority groups please include them in all groups.

Pregnant Women

Healthcare Workers

✓ All entries are valid

**Report Submit Option**

This practice is reporting doses administered and DOES require additional influenza vaccine

This practice is only reporting doses administered and DOES NOT require any influenza vaccine at this time

FINAL REPORT: This practice is no longer administering vaccines and does not require any additional vaccine for the season

← Previous    Cancel and Return to Menu    Next →

Doses Administered History for RIDOH (1600)										
Order ID	Date Submitted	Total Doses	6-35M Fluzone 0.25ml	3-18Y Fluzone 0.5mlQIV	3-18Y Fluartix	19+ Fluzone 0.5ml	19+ Fluartix	19+ Fluzone HD	Pregnant Women	Healthcare Workers
R10562	09/02/2016 10:19AM	660	40	100	100	100	150	170	0	0
F10557	08/26/2016 09:26AM	0	0	0	0	0	0	0	0	0
		660	40	100	100	100	150	170	0	0

# Temperature Log / Delivery Info / Summary / Confirmation



State of Rhode Island  
Department of Health

Practice:	RIDOH	Enrollment Year:	2023
Alpha Name:	RI DEPT OF HEALTH/THE WELLNESS COMPANY	Lead LVP Lic.:	MD08265
PIN:	1600 <b>Family Practice</b>	Vaccine Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Logged in as:	Larsen	COVID Pandemic Contact:	LAUREN PILUSO 401-222-4639 <a href="mailto:lauren.piluso@health.ri.gov">lauren.piluso@health.ri.gov</a>
Office Contact:	NICOLE SELEMA 401-222-4631 <a href="mailto:nicole.selema@health.ri.gov">nicole.selema@health.ri.gov</a>	Backup COVID Pandemic Contact:	MEAGHAN JOYCE 401-222-1580 <a href="mailto:meaghan.joyce@health.ri.gov">meaghan.joyce@health.ri.gov</a>
Immunization Rep:	Lauren Piluso 401-222-4639 <a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>		

Order ID:	<b>F00184</b>	Next Order Used:	<b>NO</b>
Order Status:	<b>Waiting for Approval</b>	Ordered by:	<b>MARK FRANCESCO</b>

## Vaccine Order Confirmation

The following order has been submitted to HEALTH for processing on Friday October 11, 2013 02:59PM

Once your order is APPROVED by HEALTH it should be delivered within 10 business days.

Check your order history to get a copy of your APPROVED order

Exit Order Wizard

HEALTH

Rhode Island Department of Health

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The Temperature Log, Delivery Information, and Summary pages work the same for flu vaccine as they do for regular monthly vaccines, as previously covered.

Please remember to click **Submit Order** at the bottom of the Summary Page. Failure to click this button will result in your order being listed as **incomplete**, and it will not be processed by RIDOH.

Once your order has been submitted you will see the confirmation page indicating date and time of submission. Please note this information along with the **Order ID** in case you need to contact RIDOH for assistance with this order.

Please note that all flu order IDs will begin with the letter "F".

# Contact Information



Name	Email	Phone	Title
Lisa Gargano	<a href="mailto:Lisa.Gargano@health.ri.gov">Lisa.Gargano@health.ri.gov</a>	222-5922	Chief
Lauren Piluso	<a href="mailto:Lauren.Piluso@health.ri.gov">Lauren.Piluso@health.ri.gov</a>	222-4639	Vaccine Manager
Meaghan Joyce	<a href="mailto:Meaghan.Joyce@health.ri.gov">Meaghan.Joyce@health.ri.gov</a>	222-1580	VFC/Quality Assurance Manager
Kathy Marceau	<a href="mailto:Kathy.Marceau@health.ri.gov">Kathy.Marceau@health.ri.gov</a>	222-4624	Outreach/Education Coordinator
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Tyler Paradis	<a href="mailto:Tyler.Paradis@health.ri.gov">Tyler.Paradis@health.ri.gov</a>	222-3366	Quality Assurance Representative
Stephen Young	<a href="mailto:Stephen.Young.CTR@health.ri.gov">Stephen.Young.CTR@health.ri.gov</a>	222-3329	Quality Assurance Representative

# Review / Exam



## Final Step:

- Now that you have completed the SSV/OSMOSSIS Self-Study presentation, the final step is completing a **Review/Exam**.
- Please click the link below to be directed to the SSV/OSMOSSIS Review/Exam. Once you complete the Review/Exam you will be directed on how to activate the OSMOSSIS link for your practice.
- Please click the link below to take exam.

<https://www.surveymonkey.com/r/BWGGC6N>



Thank you.

**Lauren Piluso**  
Vaccine Manager  
Office of Immunization  
401-222-4639  
[Lauren.Piluso@health.ri.gov](mailto:Lauren.Piluso@health.ri.gov)

**[www.health.ri.gov](http://www.health.ri.gov)**