

CAIR Mass Vaccination Module – Submitting Clinic Data

Monkeypox Vaccinations

CAIR CALIFORNIA IMMUNIZATION REGISTRY

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH – IMMUNIZATION BRANCH

1

Before you start...

- ✓ Make sure you have an account on CAIR. You must have an Org Code.
- ✓ Requires Internet access to add, update and store records.
- ✓ Organize your information. You can only submit records for one clinic at a time.
- ✓ Estimate how many records you will enter at that sitting. If you must stop early, submit the records you've entered.

- Go to: <https://massvac.cdph.ca.gov/>
- Enter your username and password. *(The Immunization Branch will provide new users with a password. Previous user passwords are valid.)*

2

Welcome to the CAIR Mass Vaccination website

E-Mail:

Password:

Sign On

Click "Sign On"

Click "Enter Monkeypox Records" to begin entering data. Be sure to enter doses on the correct tab!

3

Enter Covid Records

Enter monkeypox Records

4

If the Org Code is not pre-populated, select the correct code from the dropdown menu.

Org Code*	DOH ▾
Clinic Name	<input type="text"/>
Date of Administration*	mm/dd/yyyy

Type in your clinic name. (“Clinic Name” is an open field. You can add any identifying information here.)

Next, enter the date the vaccines were administered.

If the Org Code field is blank, and there is no dropdown menu to select a code from, **STOP!** Contact MassVax@cdph.ca.gov before entering data. If you submit data with a blank org code field, all your data will be lost!

5

Use the text fields and dropdown menus to enter patient information. Fields with an * are required.

Last Name*	First Name*	Date of Birth*	Gender*	Race*	Ethnicity*	Mother's First Name
<input type="text"/>	<input type="text"/>	mm/dd/yyyy	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

You can type in the date of birth or use the calendar. If you use the calendar, pay careful attention to the birth year.

6

Cell Phone (10-Digit)	Zip Code*	City*	E-Mail Address	Vaccine Eligibility*	Vaccine*	Lot Number	Body Site*	Vaccinator Full Name*	Title*
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Enter patient’s cell phone, zip code, city, email address, eligibility, vaccine type, lot number, body site, and vaccinator’s full name and title. (See the end of this guide for an explanation of titles in the dropdown menu.)

7

To delete a record, click “Delete” next to the record number.

To add blank records, click the “Blank” button.

Enter the desired number of records then click “Add Rows.”

#	Last Name*	First Name*
1		

Add Rows 1 rows Blank

Delete 1 mm/dd/yyyy

Add Rows 1 rows Blank Pre-populated (last vax info)

To pre-populate multiple records for the same clinic at one time, click the “Pre-populated” button. 

Enter the desired number of records then click “Add Rows.” Eligibility, vaccine, lot number, body site, and vaccinator name and title will be duplicated.

Edit the pre-populated record by clicking in the relevant box and entering new information.

#	Last Name*	First Name*	Date of Birth*	Gender*
1	Test	Patient	10/01/1940	Male
2			mm/dd/yyyy	
3			mm/dd/yyyy	
4			mm/dd/yyyy	

8

Once you are finished entering records, click the “Submit” button.

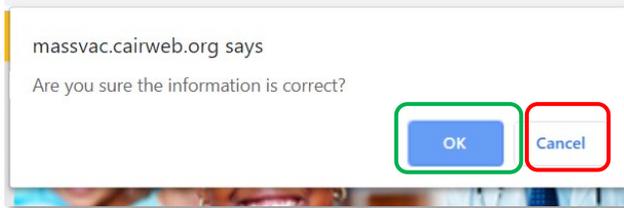
Submit

[View CDPH's privacy policy](#)

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9

A window will pop, asking if you are sure the information is correct.



Click "OK" to complete submission of your data. Click "Cancel" if you'd like to correct something before submitting.

 Fields with an * are required. If any required fields are blank, you will receive an error message. Your report will not be accepted until all required information has been provided.

* After submitting clinic data, you will be able to see the records in CAIR2.

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Click "Log out" once you're finished submitting records.

Notes:

 If you forget your password, email MassVax@cdph.ca.gov

! After 20 minutes of inactivity the system will time out. You will lose unsubmitted data.

 You cannot correct errors after the data has been submitted. If you realize an error after submission, email CAIRhelpdesk@cdph.ca.gov

? If you have questions, contact MassVax@cdph.ca.gov

Adding Email Addresses or Phone #s to Previous Submissions

1

To add an email address or phone number to a previous submission, click “Phone and Email Update” on the front page.



A list of your submissions with blank email address and phone # fields will be displayed.

Click the “Edit” button on the record you would like to update.

No	Last Name	First Name	Birth Date	Gender	Mother's Name	Phone	Email	Action
1	a	a	2019-11-11	F	a			Edit
2	a	w	2019-11-10	X	w			Edit

-  You cannot view or edit records submitted by another user.
- You cannot edit other fields in the record.

Welcome! **Patricia**

Search:

 *Helpful tip: If you are looking for a particular record, use the search function in the top righthand corner of the page. You can search on any field. Since names may be the same, check to make sure that you are editing the correct record.*

2

Enter the email address and/or phone number in the appropriate field.

Click “Update.”

This will take you back to the list of records where you can select another record to update.

Email address

Phone Number

Format: XXXXXXXXXXX (Numbers only)

[Update](#)

Viewing, Searching, and Printing Previous Submissions

1

To view your previous data submissions, click on “Batch History.”



Select the batch you want to view from the list by clicking on the Batch ID.

Submitted Batch History				
Batch ID	Org Code	Clinic Name	Vaccine Batch	Created Date
262	07CTEST	Antioch Popup Clinic	Monkeypox Vaccines	07-29-2022
261	07CTEST	Antioch Popup Clinic	Monkeypox Vaccines	07-29-2022

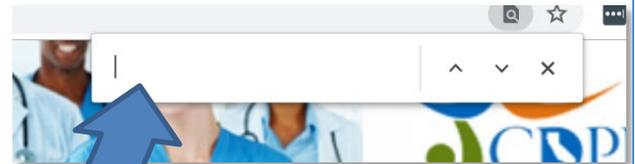


- You cannot view records submitted by another user.
- Previous season batches will be listed; however, batch details are only available for the current season.

2

To search for a particular record in a previous submission:

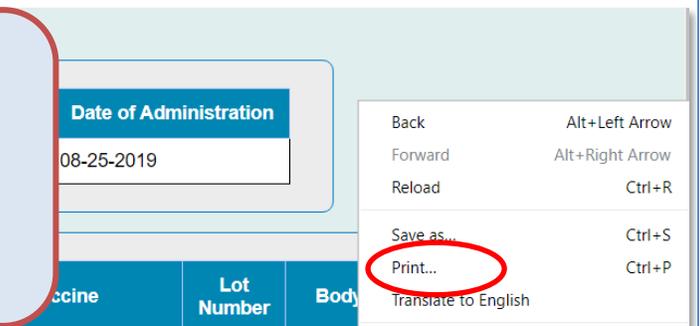
- First, select the batch.
- Then press Ctrl+F and enter your search term in the search field.



3

To print records:

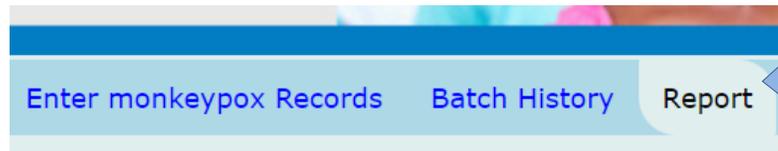
- Select the batch from the Submitted Batch History list.
- The “Batch Details” will pop up.
- Right click on the Batch Details report page and select “print.”



Generating a Provider Report

1

You can generate a report that lists the number of records submitted by users for a specific provider. To generate a provider report, click the “Report” tab.



2

On the “Provider Reports” page, select the provider’s Org Code from the dropdown menu.

Provider Reports

Org Code	01ADMIN	Users:	All Users
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Next, use the dropdown menu to select a particular user. If you do not select a particular user, your report will include all users for that provider.

3

Batch Entry Dates		Vaccines C	
From :	mm/dd/yyyy	To :	mm/dd/yyyy

Enter the date range for your report. You can use the calendar or enter the date by hand. Keep in mind:

- “From” and “To” dates reflect the date the record was created, NOT the vaccine administration date.
- If you hand enter the date, you must use the “mm/dd/yyyy” format or you will get an error message.

4

Use the dropdown menu to select the vaccine(s) you would like to include in your report.

5

Click "Submit" to generate your report.
The report will show the number of reports submitted by user for the selected provider.

Org Code	User First Name	User Last Name	Record Count
01ADMIN	Sree	Adama	4
01ADMIN	Cheryl	Scott	1
01ADMIN	Jag	Talluri	5

Description of Vaccinator (Shot Giver) Titles

Title	Description
DO	Doctor of Osteopathic Medicine
EMT-P	Emergency Medical Technician – Paramedic
FNP	Family Nurse Practitioner
LPN	Licensed Practical Nurse
LVN	Licensed Vocational Nurse
MA	Medical Assistant
MD	Doctor of Medicine
NP	Nurse Practitioner
PA	Physician Assistant
PHARMD	Doctor of Pharmacy
PHN	Public Health Nurse
RN	Registered Nurse
RPH	Registered Pharmacist
STU	Student (e.g., supervised medical, pharmacy or nurse)