



Documenting Varicella (Chickenpox) Immunity in the CIIS School Application

Screening questions to verify a student has history of Chickenpox disease

In cases where a parent reports the student had chickenpox disease but is not able to provide documentation of disease, a screening of chickenpox disease should be completed by a healthcare provider (MD, DO, RN, PA) and documented in the immunization record or Certificate of Immunization. Below are the screening questions which can be used to verify a student has history of chickenpox disease:

- 1) What were the symptoms your child experienced?
 - a) Typical signs and symptoms include rash, fever, cough, fussiness, headache, decreased appetite.
- 2) Describe the rash your child had.
 - a) Rash usually develops on the scalp and trunk of the body and then spreads to face arms and legs.
- 3) About how many lesions (pox) did your child have and describe the characteristics?
 - a) Typically 200 - 500 hundred pox form and they are itchy. They also appear in successive crops. Illness for about 5 - 10 days.
- 4) Did other children in the school, neighborhood, or community have chickenpox disease?
 - a) Chickenpox is very contagious. If the parent relates that their child was exposed to other kids with disease, this is helpful in screening for disease.

How to document History of Varicella in CIIS

Login to the CIIS School Application at <https://ciis.state.co.us/school/Login.aspx>

Step 1: To document varicella immunity for a student, you must first search for and find the student in CIIS. Next, select the desired student record by clicking on the corresponding radio button.

Step 2: Click the *Precautions/Contraindications* button below the student record, and you will be navigated to the Patient Precautions/Contraindications screen.

The screenshot shows the CIIS School Application interface. On the left is a navigation menu with options: Home, Patients (highlighted with a red box), Search, Demographics, Notes, Precautions/Contraindications, Exemptions, Immunizations, Education, Reports/Forms, and Settings. The main area is titled 'SCHOOL DISTRICT: TEST SCHOOL DISTRICT' and contains a 'Patient Search' section with a search bar and a 'Search' button. Below this is a 'Search Criteria' section with fields for Patient ID, Identifier Type, Identifier Value, Last Name, First Name, Middle Name, DOB, and Gender. A 'Search' button is at the bottom right of this section. Below the search criteria is a 'Search Results - 3 record(s)' table with columns for ID, Name, and DOB. The table contains three records: 445035 TEST, JILL (DOB 06/18/2010), 3938078 TEST, JIMMIE (DOB 12/31/2009), and 3938079 TESTER, JILLIAN (DOB 03/20/2015). The second record is selected with a blue radio button. Below the table are buttons for Demographics, Precautions / Contraindications, Notes, Immunizations, and Education. Two red callout boxes provide instructions: 'Step 1: Search for the patient in CIIS. Next, select the patient record by clicking on the corresponding radio button.' and 'Step 2: Click the Precautions/Contraindications button.'

Step 3: Click on *Add Precautions/Contraindications*.

SCHOOL DISTRICT: TEST SCHOOL DISTRICT SCHOOL: TEST SCHOOL

TEST, JIMMIE
ID: 3938078 DOB: 12/31/2009 AGE: 6Y 1M 12D GENDER: M

Patient Precautions / Contraindications

Click "View" to see the details of an existing record or "Add Precautions / Contraindications" to create a new record. Add Precautions / Contraindications

View

No records found

- Create a new record...

Step 3: Click on *Add Precautions/Contraindications*.

Step 4: The *Effective Date* field will automatically populate with today's date; however, this field can be edited (e.g., *Positive Screen Date*). Leave the *Expiration Date* field blank and verify the *Provider* field.

Step 5: In the *Precautions/Contraindications* field, select *History of Chickenpox Verified by Healthcare Provider* from the drop-down arrow.

Step 6: Click *Create* to save this information. Notice that once you select *History of Chickenpox Verified by Healthcare Provider* from the *Precautions/Contraindications* drop-down list, the system will display the *Associated Vaccine(s)* for that particular precaution/contraindication. The *Comments* field is optional.

SCHOOL DISTRICT: TEST SCHOOL DISTRICT SCHOOL: TEST SCHOOL

TEST, JIMMIE
ID: 3938078 DOB: 12/31/2009 AGE: 6Y 1M 12D GENDER: M

Patient Precautions / Contraindications

Click "Create"/"Update" to save the record or "Cancel" to return to the previous page.

Add

Author: TEST TESTER Effective Date: 02/12/2016 Expiration Date: [blank]

Provider: COLORADO SCHOOL DISTRICT

Precautions / Contraindications: HISTORY OF CHICKENPOX VERIFIED BY HEALTHCARE PROVIDER

Comments: [text area]

Associated Vaccine(s): VAR (Varivax)

Create Cancel

Step 4: The *Effective Date* field will automatically populate with today's date; however, this field can be edited. Leave the *Expiration Date* field blank and verify the *Provider* field.

Step 5: In the *Precautions/Contraindications* field, select *History of Chickenpox Verified by Healthcare Provider* from the drop-down arrow.

Step 6: Click *Create* to save this information.

Notice that once you select *History of Chickenpox Verified by Healthcare Provider* from the *Precautions/Contraindications* drop-down list, the system will display the *Associated Vaccine(s)* for that particular precaution/contraindication.

Notice: Before I documented this student's *History of Varicella* (Chickenpox) in CIIS, the system recommended the Varivax vaccine for the student.

The screenshot shows the CIIS Immunizations Home screen for patient Jimmie Test. The patient's information is: ID: 3938078, DOB: 12/31/2009, AGE: 6Y 1M 12D, GENDER: M. The 'View' section shows 'History of Varicella?' as 'NO'. Under 'Recommended Immunizations for today, 2/12/2016 (6Y 1M 12D)', 'VAR (Varivax)' is listed with a red arrow pointing to it. A red callout box contains the text: 'Notice on the patient's Immunizations Home screen, before a History of Varicella (chickenpox) was documented, the Varivax vaccine was recommended.'

After documenting this student's *History of Varicella* (Chickenpox) in CIIS, the system no longer recommends the Varivax vaccine for this student.

The screenshot shows the CIIS Immunizations Home screen for patient Jimmie Test after updating his history. The patient's information is: ID: 3938078, DOB: 12/31/2009, AGE: 6Y 1M 12D, GENDER: M. The 'View' section shows 'History of Varicella?' as 'YES' and 'Date of Varicella' as '02/12/2016'. Under 'Recommended Immunizations for today, 2/12/2016 (6Y 1M 12D)', only 'Influenza, Seasonal' is listed. A red callout box contains the text: 'After documenting that this patient has a History of Varicella (chickenpox) in CIIS, the system no longer recommends the Varivax vaccine for this patient.'

If you have questions, please contact the CIIS Help Desk at 303-692-2437, option 2.