ImmTrac2 Site Registration Through Syntropi Guide

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How to Begin the Registration Process

Currently, the following groups are utilizing the Syntropi system for registrations:

- TVFC/ASN program providers.
- Data exchange partners submitting data via (web) services bidirectional data exchange.
- Providers administrating disaster Antiviral Immunization and Medications (AIMS) during a declared disaster event.
- All other providers will continue registering via ImmTrac2.

To begin the ImmTrac2 registration process through Syntropi, go to the website: enrolltexasiz.dshs.texas.gov and select either Register on the blue navigation bar, or click in the "Vaccine Provider Registration" section.

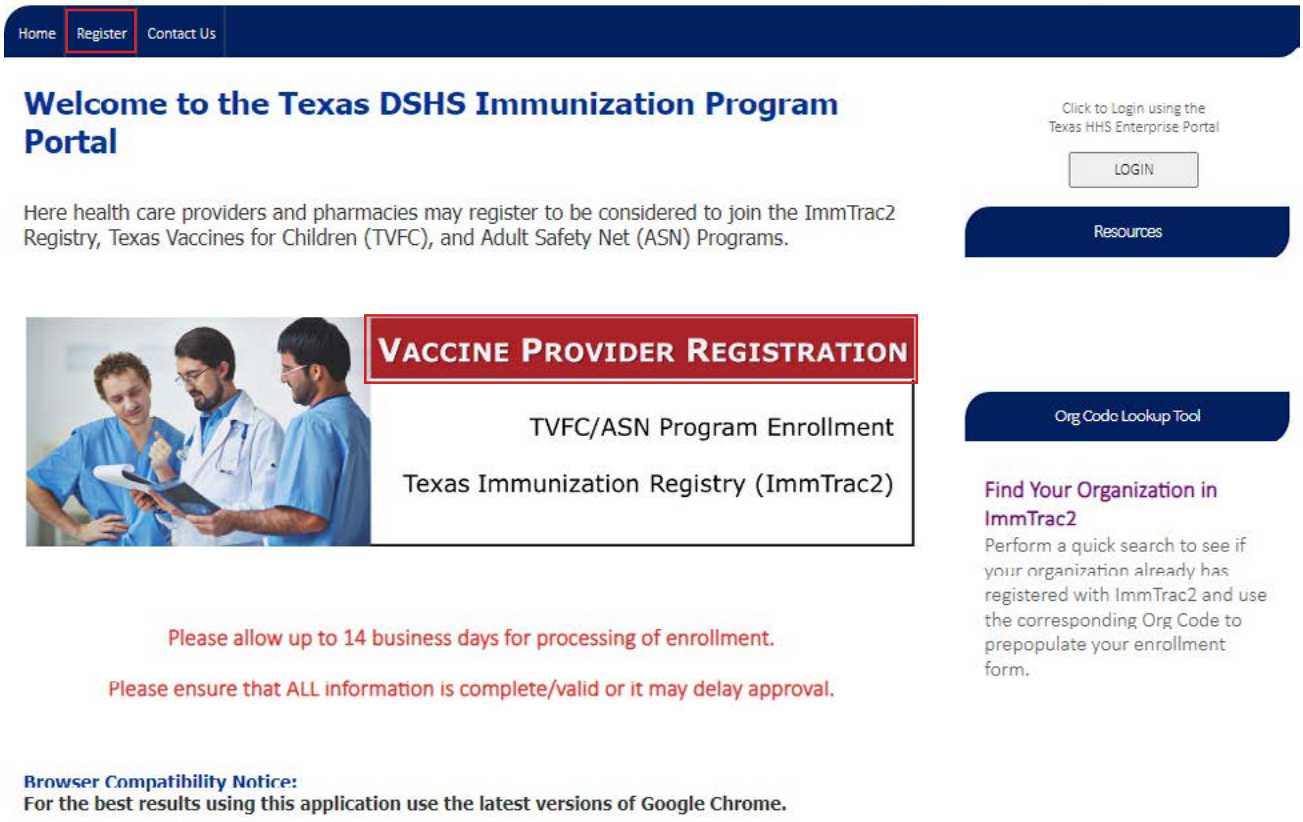


Figure 1: Start Registration

Step A1: Registration Type

Under “Registration Type” at the top of the blue navigation bar, select the type of organization you represent and click continue.

Types of Organizations

The information below outlines the different organization types and who should enroll using each option.

Texas Healthcare Providers – If you work for a healthcare provider and want to register with the Texas Immunization Registry (ImmTrac2). For example:

- Hospital
- Private Practice
- Clinic

Public Health Organizations – If you work in a publicly funded organization, use this option by selecting your type of organization below:

- Public Health Department
- Community Health Center
- State Agency

Pharmacies – If you work in a Pharmacy, use this option by selecting your type of organization below:

- Pharmacy

Schools – If you work in a school which is located in the state of Texas and want to have access to students’ immunization records from ImmTrac2, then select this option. For example:

- Public Schools
- Charter Schools
- Private Schools

EHR Vendors – If you work for an EHR Vendor and need access to the HL7 Testing tool, use this option. For example:

- Electronic Health Record (EHR)
- Electronic Medical Record (EMR)
- Health Information Exchange (HIE)

Child Care – If you work for a child care organization which is licensed to practice in the state of Texas and want to have access to immunization records in ImmTrac2, then use this option.
For example:

- Child care Center
- Daycare
- Academy
- Head Start

Heath Plan and Managed Care/Payor:

- Insurance Companies

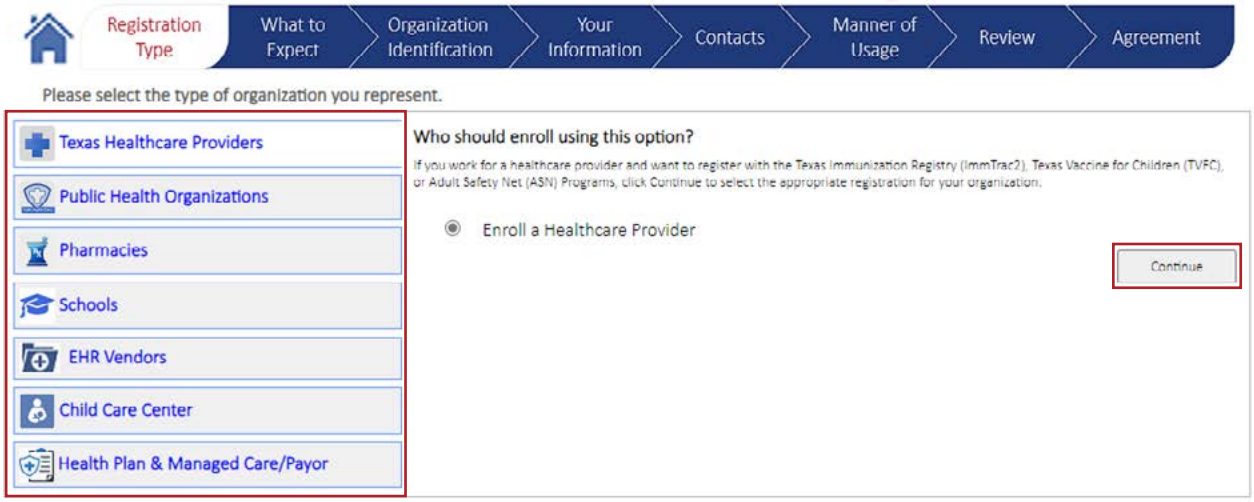


Figure 2: Registration Type

Step A2: What to Expect

As part of the Organization Registration, you will be asked to review the information.
After reviewing the information, click continue.

ImmTrac2 Participating Organizations

If your organization participates with the Texas Immunization Registry (ImmTrac2), you will need the ImmTrac2 Organization Code (Org Code). An Org Code can be searched through the Look Up Tool.
For additional information on how to navigate through the Look Up Tool, refer to page six in the manual.

TVFC Provider Organizations

If your organization previously enrolled with the Texas Vaccines for Children and Adult Safety Net program, you need your TVFC/ASN PIN. The TVFC/ASN PIN can be searched through the Look Up Tool.
For additional information on how to navigate through the Look Up Tool, refer to page six in the manual.

Information Needed to Complete Registration

Fields marked with an asterisk (*) are required.

1. Organization Name* (The actual name the organization does business as.)
2. Organization's Physical and Mailing Addresses* (Physical is the actual building address, mailing address is the address the business receives their USPS mail.)
3. Organization's Phone Number* (Main phone number.)
4. Organization's Fax Number
5. Your Contact information* (First Name, Last Name, Phone Number, and a unique email address. Per section two, Line M in the user agreement at the end of the application.)
6. Organization Point of Contact*: (First Name, Last Name, Phone Number, and a unique email address.)
7. Primary Registry Point of Contact: (First Name, Last Name, Phone Number, and a unique email address.)
8. Responsible Medical Provider: (First Name, Last Name, Phone Number, a unique email address, Texas Medical License, License Type, Individual National Provider Identification Number (NPI), Specialty, and Medicaid ID.)

Select continue.

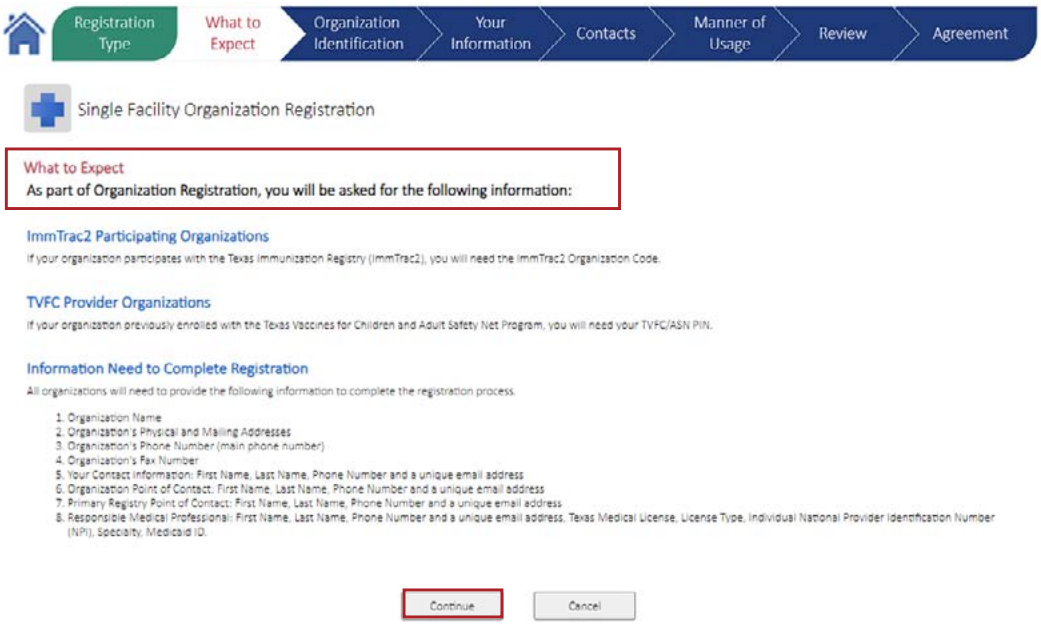


Figure 3: Information Needed to Complete Registration

Step A3: Organization Identification

Existing Organization Search

An organization who has previously registered in ImmTrac2 will select Yes. All other organizations will select No. To see if your organization is eligible to register through Syntropi, refer to How to Begin the Registration Process on page one of the manual. The Organization, ImmTrac2 Org Code, and TVFC/ASN PIN can be searched through the Look Up Tool. For additional information on how to navigate through the Look Up Tool, refer to page six in the manual.

Note that:

- The Texas Immunization Registry (ImmTrac2) Org Code contains four letters followed by four numbers.
- The TVFC or ASN PIN numbers contain six numbers.

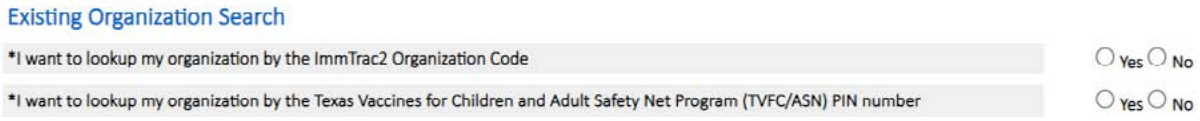


Figure 4: Existing Organization Search

Figure 5: ImmTrac2 Org Code

Figure 6: TVFC/ASN PIN

If No is selected in the Existing Organization Search fields, and you do not need to look up either the ImmTrac2 Organization Code and/or the TVFC/ASN PIN, select No to the question, you do not need to search and click continue.

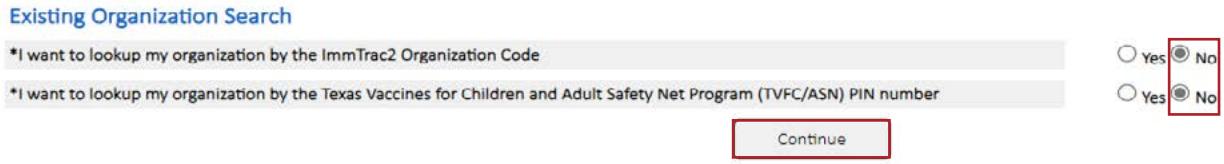


Figure 7: Without Org Code and/or TVFC/ASN PIN Look Up

Look Up Tool

If you are not sure if your organization is registered in ImmTrac2, you can check in the Look Up Tool by selecting “Search for ImmTrac2 Org Code”.

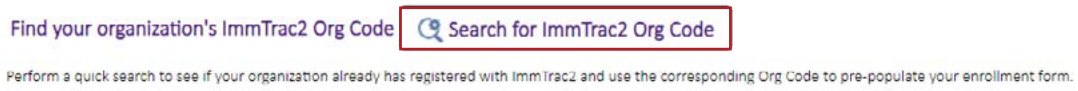


Figure 8: Search for ImmTrac2 Org Code

Find Your Organization in ImmTrac2

If you have a parent organization, but do not know the Texas Immunization Information System ID (TX IIS ID) for the parent site or your own site, after choosing the “Search for ImmTrac2 Org Code” in the Look Up Tool, you can filter your organizations by:

1. County
2. Org Code
3. PIN or
4. Organization Name

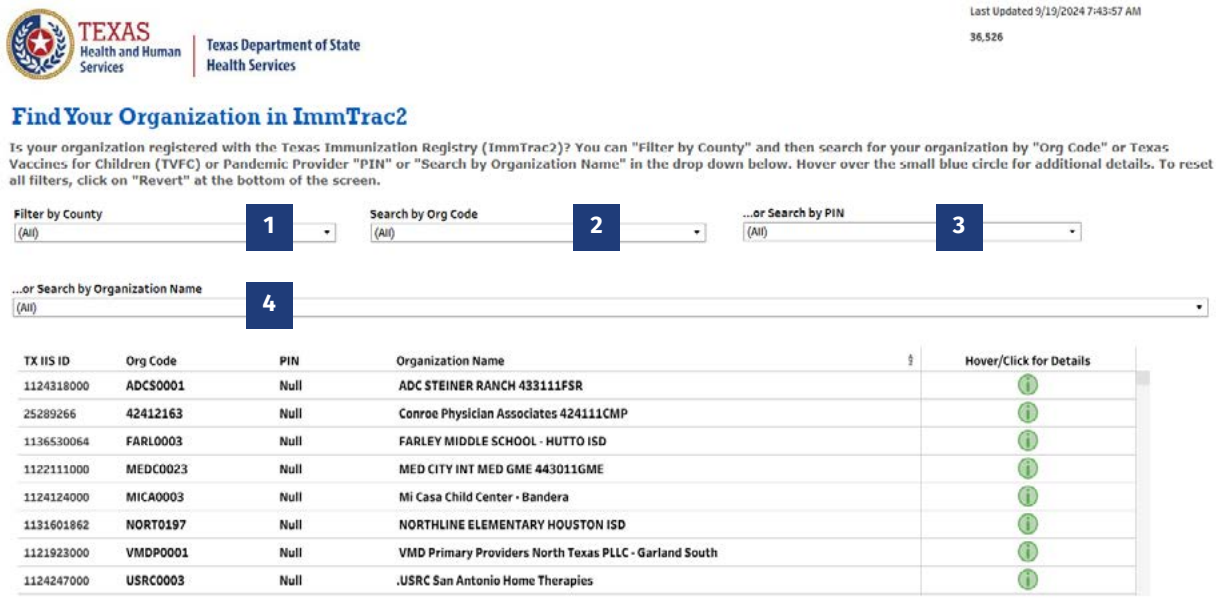


Figure 9: Find Your Organization in ImmTrac2

Below is an example of searching for organizations having “Austin ISD” in the name of the organization.

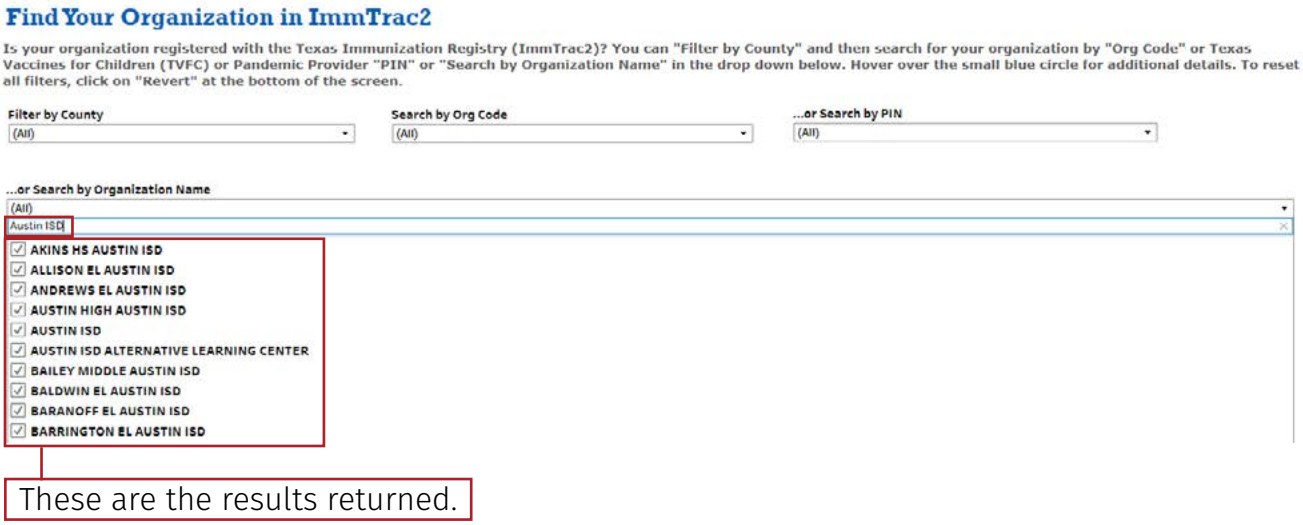


Figure 10: Example of Searching by Organization Name for AUSTIN ISD

Facility's Physical Address

Fields related to the organization include:

1. Organization Name* (the actual name the organization does business as.)
2. Doing Business As (Alternate Clinic Name- An alternate name for the organization.)
3. Address One* (physical address)
4. Suite # (suite number, building number, unit number, office name, etc.)
5. Zip Code* (standard five-digit zip code)
6. City* (the physical city that the organization is located in.)
7. County* (the physical county that the organization is located in.)
8. State* (the physical state that the organization is located in.)
9. Phone Number* (standard ten-digit phone number)
10. Fax (standard ten-digit fax number)
11. Organization Email Address* (the main email address for the site you are renewing.)

Reminder: Fields with asterisks (*) are required. City and county will auto-populate based on zip code entered.

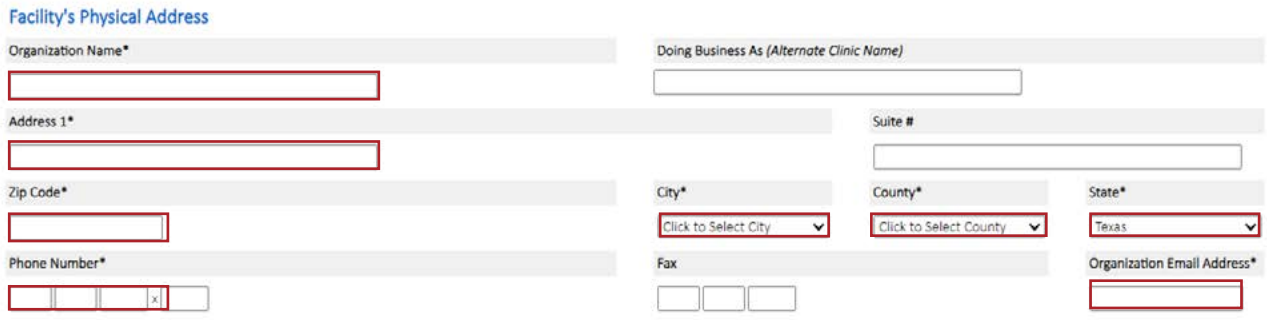


Figure 11: Facility's Physical Address

Mailing Address Question

*Is the mailing address for this organization the same as the facility's physical address displayed above? Yes or No?

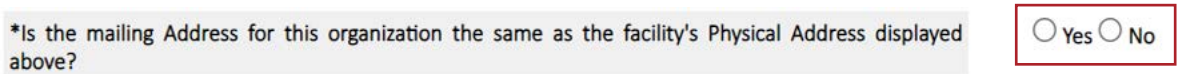


Figure 12: Mailing Address Question

If the mailing address and the facility's physical address (the physical address the site is located in) are not the same, choose No, and complete the required fields marked with an asterisk (*).

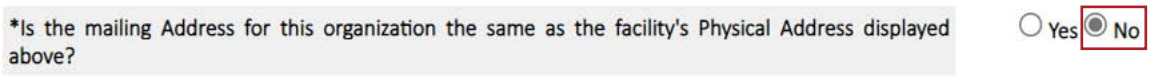


Figure 13: Mailing Address Not the Same as Physical Address

Figure 14: Facility Physical Address

Multi-Site Organization Questions

*Does another organization act as the parent organization for the organization you are enrolling? Yes, or No?

*Enter the Parent TX IIS ID. This is the Texas Immunization Information System ID. The TX IIS ID can be searched through the Look Up Tool, refer to page six in the manual.

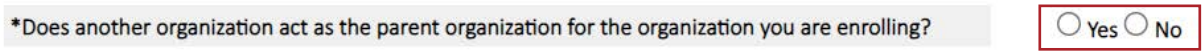


Figure 15: Parent Organization Question

Select Yes if:

- If your parent organization is currently registered in ImmTrac2.
- Enter the TX IIS ID for the parent organization.

Select No if:

- You are part of a larger multi-site organization, but the parent site is not registered in ImmTrac2.

Examples Of Organization Relationships

For examples of a parent/child organization relationship, see:

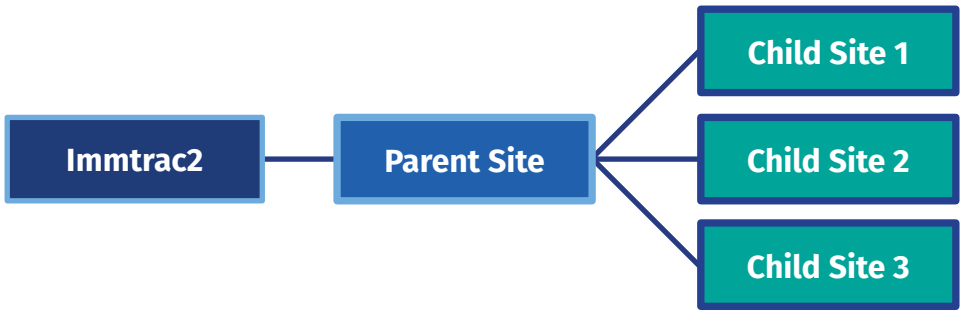


Figure 16: Example Diagram of a Parent/Child Relationship

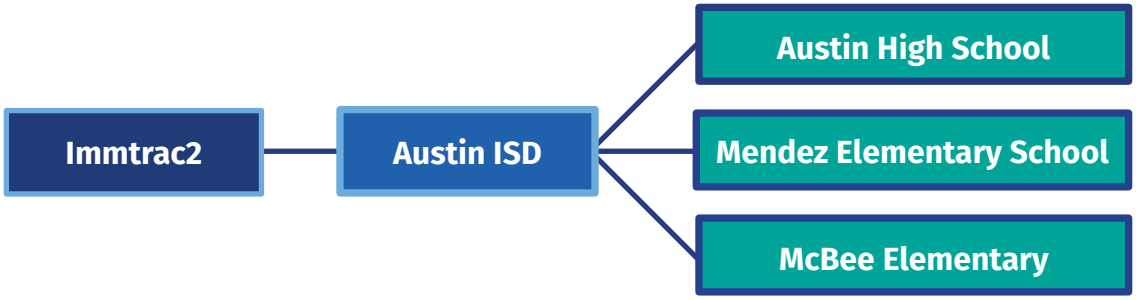


Figure 17: Example of a School Parent/Child Organization

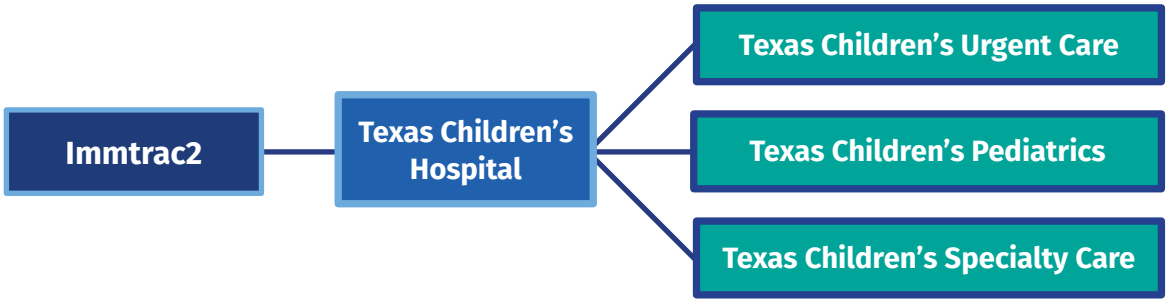


Figure 18: Example of a Hospital Parent/Child Organization

For examples of a stand-alone site.

Figure 19: Stand-Alone Site

Figure 20: Example of a Stand-Alone Site

Clinical Information

Type Of Organization

*Please select the type of organization you are enrolling. Select the type of organization that most closely represents your organization by using the drop-down box.

Figure 21: Type of Organization

Note: If registering a school, choose "school" in the drop-down list. If the school does not administer vaccinations, select No. Click Continue.

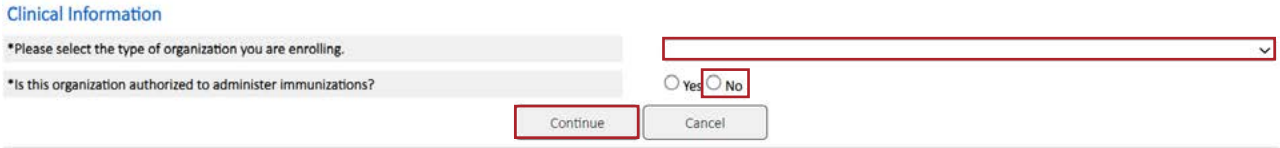


Figure 22: Type of Organization - Schools

Authorized To Administer Immunization Question

*Is this organization authorized by the State of Texas to administer immunizations? Yes or No?

Figure 23: Authorized to Administer Immunizations Question

Administering Immunizations Question

*Does your organization administer prescribed immunizations, antivirals, or prophylactic injections? Yes or No?

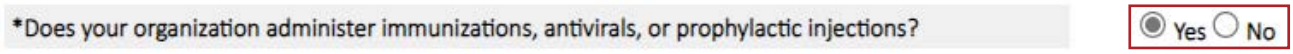


Figure 24: Administer Immunizations, Antivirals, or prophylactic Injections

Type of Vaccines Question

*Please select the type of vaccines that are given at the organization: Child, Adult, Travel. Click continue.

Note: The Travel option will be removed in future enhancements.

Figure 25: Type of Vaccines Question

Do You Currently Have an ImmTrac2 User Account?

If You Do Have An ImmTrac2 User Account:

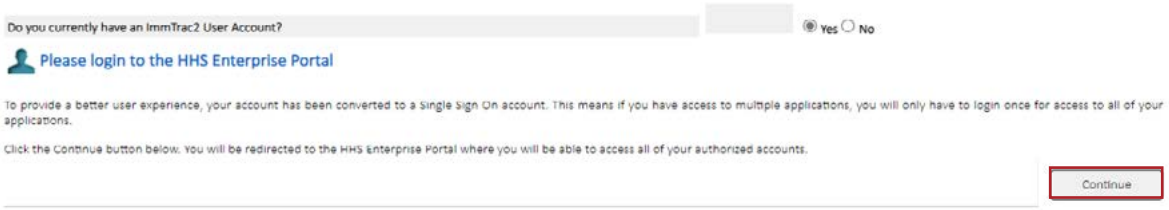


Figure 26: ImmTrac2 Users That Have an Existing Account

If you already have an ImmTrac2 user account, select Yes and click Continue.

Note: "Please login to the HHS Enterprise Portal" will be renamed to "Please login to the IAMOnline Portal" in a future enhancement.

You will be redirected to the IAMOnline portal. Use your 2-4-2 ImmTrac2 username to sign in. For example, Jane Smith uses JA1234SM. If you have forgotten your password or username, click the “Forgot Password” or “Forgot Username” links. ImmTrac2 offers immunization providers and other authorized organizations secure online access via the internet. There are also secure electronic data import options available to organizations with client encounter or electronic health record (EHR) systems.

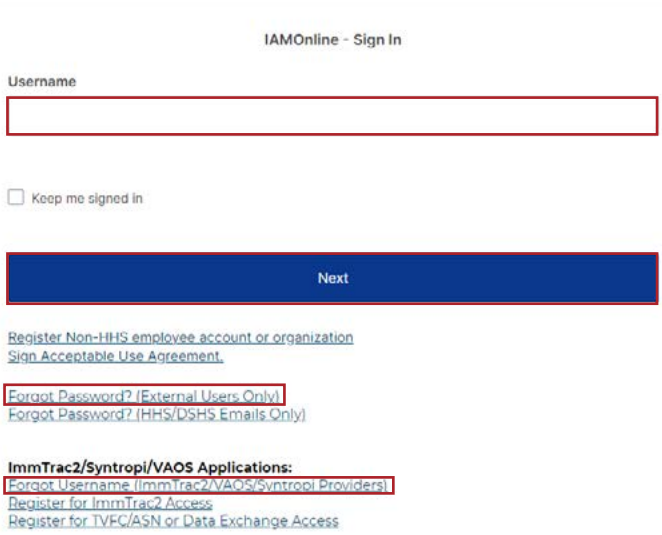


Figure 27: IAMOnline – Sign In

Once logged into IAMOnline, click the Syntropi icon to continue the site registration in Syntropi.

If You Do Not Have An ImmTrac2 User Account:

* Do you currently have an ImmTrac2 User Account? Yes, or No?

Figure 28: ImmTrac2 Users That Do Not Have an Existing Account

If you do not have a current ImmTrac2 User Account to login into ImmTrac2, select No, complete the following fields below, and click Continue.

If the organization registering for an ImmTrac2 user account is a nurse, use the drop-down arrow to choose the Nursing License Type (LVN or RN) and Texas Nursing License Number.

The Texas Nursing License Number is located in the field under the Texas nursing license type.

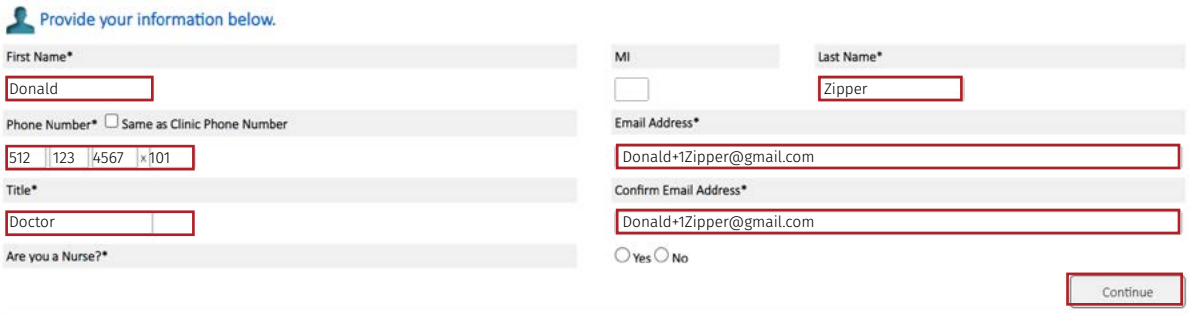


Figure 29: New User Account Information

Fields with an asterisk (*) are required.

- First Name*
- MI
- Last Name*
- Phone Number*
- Email Address*
- Title*
- Confirm Email Address*
  - Are you a Nurse?* Yes, or No?
    - If No, click Continue.
    - If Yes, select your Texas nursing license type* (LVN or RN), enter your Texas nursing license number, and click Continue.

You will receive an email that “Your Account Request has been submitted!”. Be advised, it may take up to 60 minutes to process the account request. You can continue the site registration while your user account request is being processed. Click Continue to proceed with registering your organization and not exiting. The registration continues with Step A5: Contacts.

Figure 30: Account Submitted

Step A4: Your Information Has been Saved

You will receive an email that your information has been saved.

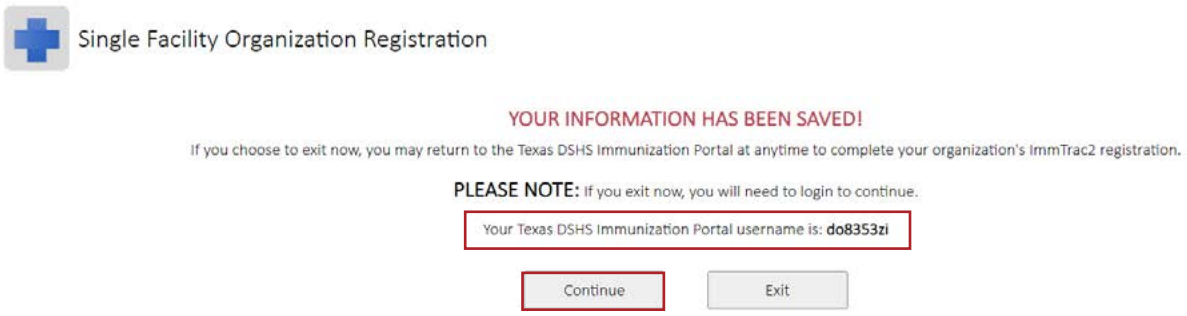


Figure 31: IAMOnline Temporary Username

What if I choose to exit the registration program now and complete it later?

If you choose to exit and complete your registration later, you may return to IAMOnline at any time to complete your organization's ImmTrac2 registration. Two emails will be sent:

1. An email with your temporary username and Org code (see below).
2. New users will receive a second email from the Texas IAMOnline portal with an "Activate Account" link. Once received, create your password, and acknowledge the acceptable use agreement (AUA).

Record your temporary IAMOnline username in a secure location for future reference. Click Continue.

You have been granted access to the Texas Immunization Registry (ImmTrac2) for organization: Pauls Pediatrics

New users will receive a second email from Texas HHS IAMOnline (IAMO) with an 'Activate Account' link which will allow you to create your password and acknowledge the Acceptable Use Agreement (AUA).

Below is your Username and Org Code you have been assigned.
Username: JO1234SM
Org Code: ABCD1234

Once logged into IAMO and you have created your password and completed the AUA, refresh your IAMO dashboard screen. You will then be able to click on the application tiles you have been authorized to access.

Access to ImmTrac2, Syntropi and/or VAOS is requested by the registered organization's listed point of contact (POC).

For secure email servers, please whitelist Do_Not_Reply_IAMOnline@partner.hhs.texas.gov if experiencing issues with receiving emails. Individual unique email addresses are required and are verified by HHS IAMOnline for account activation, multi-factor authentication and password changes. Please do not share login credentials.

If you have any questions or feel that you have been granted access to this organization in error, please contact ImmTrac2 Customer Support at 1-800-348-9158 or ImmTrac2@dshs.texas.gov.

Figure 32: Email Sent If Exit is Chosen

Step A5: Contacts

Review the contacts for this location and make updates as needed.

Organization Point of Contact (POC)

The Organization Point of Contact (POC) serves as the Organization's main POC for ImmTrac2. This individual is responsible for completing the ImmTrac2 registration/renewal and updating the organization's demographics and/or a user's profile. The Organization POC may be the assigned Registry and/or TVFC and ASN program contact and may assign individuals within their organization as Registry and/or TVFC contacts. This individual may also be the Authorized Signer with the ability to electronically sign the registration/renewal.

*Are you the Organization POC? If so, select Yes. If not, select No.

- Enter the Organization Point of Contact information below.
  1. Last Name*
  2. First Name*
  3. MI
  4. Title

*Is this Person a Nurse? If not, select No. If so, select Yes and complete the additional fields.

5. If the Organization Point of Contact is a nurse, use the drop-down arrow to choose the Texas Nursing License Type (LVN or RN)* and the Texas Nursing License Number.

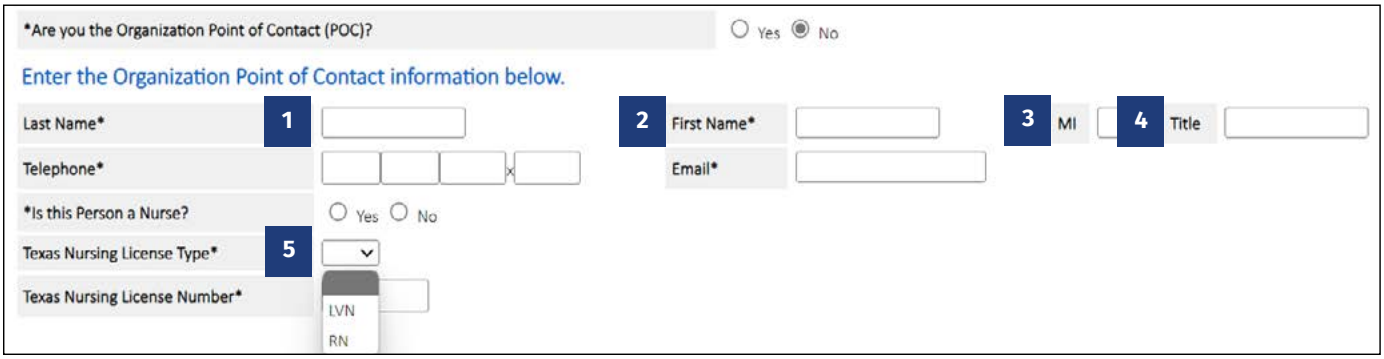


Figure 33: Organization Point of Contact (POC)

Primary Registry Contact

The Primary Registry contact (PRC) is the main point of contact for ImmTrac2 related matters and client immunization related items. The ImmTrac2 PRC may be the assigned Organization Point of Contact (POC) and/or TVFC and ASN contact. These roles may or may not be the same person.

Reminder: Fields with asterisks (*) are required.

*Is the Primary Registry contact same as above?

- If so, select Yes and Save and Continue.
- If not, select No.
- If entering a new PRC, you must enter their last name, first name, telephone number, and if they are a nurse (Yes or No).
  - If yes, enter their Texas Nursing License Type (LVN or RN) and their Texas Nursing License Number.

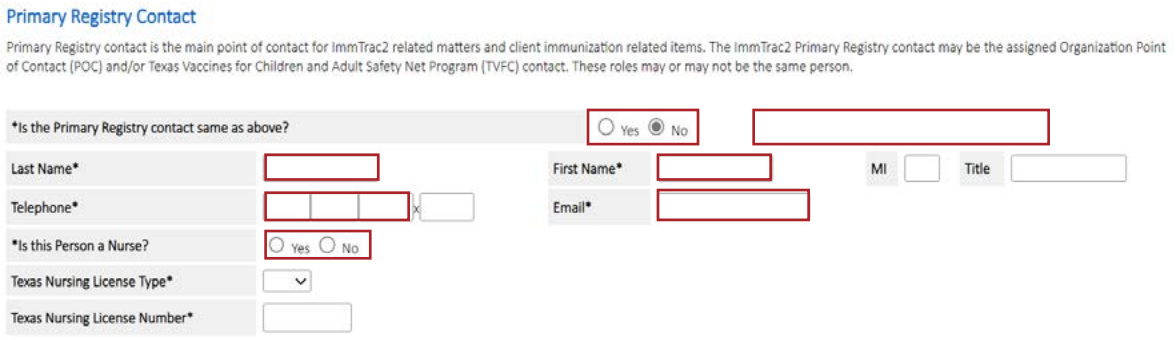


Figure 34: Primary Registry Contact

Responsible Medical Provider

Organizations must have a designated Chief Medical Officer or Senior Practicing Provider for the Responsible Medical Provider (RMP) section. They must be a Texas licensed medical provider and/or a licensed prescribing authority for organizations administering immunizations.

Complete the RMP section and choose to Save and Continue.

As a reference, below are the formats for license numbers:

- **APRN** (Advanced Practice Registered Nurse) Up to seven numbers. If there are less than seven, add leading zeroes to the front of the number. It does not require "AP" at the beginning. For example: 1234567.
- **MD** (Medical Doctor) = One letter followed by four numbers. For example: N5678.
- **PA** (Physician's Assistant) = "PA" followed by up to seven numbers. For example: PA0012345. If less than seven numbers, put leading zeroes in front of the numbers.
- **NPI** (National Provider Identity Number) = Ten numbers. For example: 1234567891.
- **DO** (Doctor of Osteopathy) = One letter followed by four numbers. For example: O5678 starting with a letter, such as the letter "O" or "P" etc.
- **NP** (Nurse Practitioner) = Up to seven. If there are less than seven, add leading zeroes to the front of the number. It does not require "NP" at the beginning. For example: 1234567.
- **CNM** (Certified Nurse Midwife) = Up to seven numbers. If there are less than seven, add leading zeroes to the front of the number. It is numeric as for example: 1234567.
- **CPM** (Certified Professional Midwife) = Up to seven numbers. If there are less than seven, add leading zeroes to the front of the number. It is numeric as for example: 1234567.
- **PharmD** (Doctor of Pharmacy) = Up to seven numbers. If there are less than seven, add leading zeroes to the front of the number. It is numeric as for example: 1234567.
- **RPH** (Registered Pharmacist) = Up to seven numbers. If there are less than seven, add leading zeroes to the front of the number. It is numeric as for example: 1234567.
- **DPM** (Podiatrist) = Up to seven numbers. If there are less, than seven, add leading zeroes to the front of the number. It is numeric for example, 1235467.

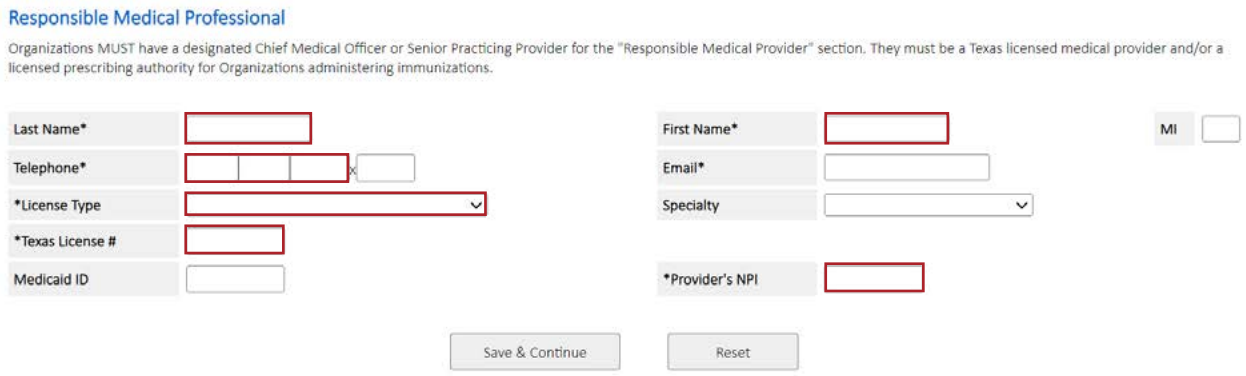


Figure 35: Responsible Medical Provider

Add New Provider

Review the prescribing authorities in the list. The NA in the “Remove” column means the person is the RMP. The RMP cannot be removed until a new RMP has been approved. In the example below, NA in the “Remove” column means that the current RMP is Sammy Julie.

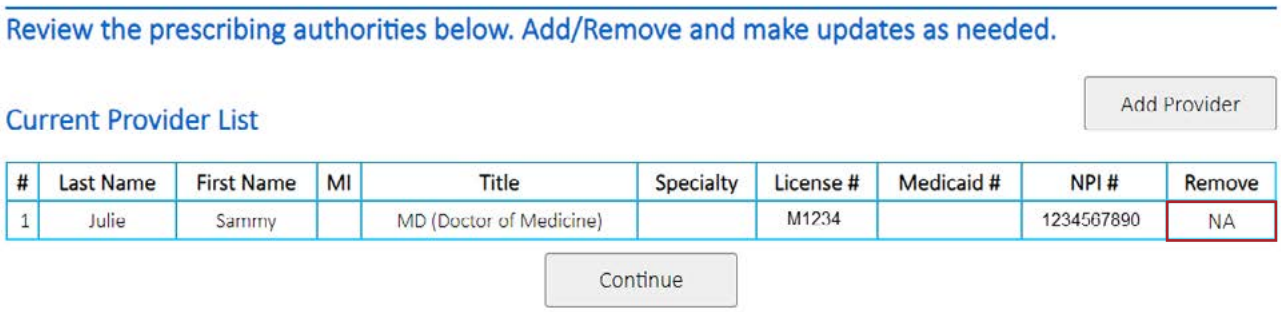


Figure 36: Review Prescribing Authorities

How to Add a New Provider

Select the Add Provider button to add new Prescribing Provider.

Note: The Upload Provider List button is a future enhancement.

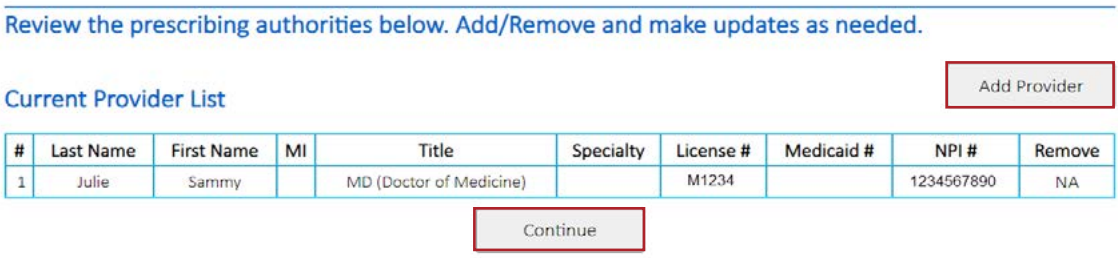


Figure 37: How to Add New Provider

To add a new Provider, enter their last name, first name, title, email address, confirm their email address, phone number, license number, Provider’s NPI number, then select the Add Provider button at the bottom of the Add New Provider screen. Emails are case sensitive.

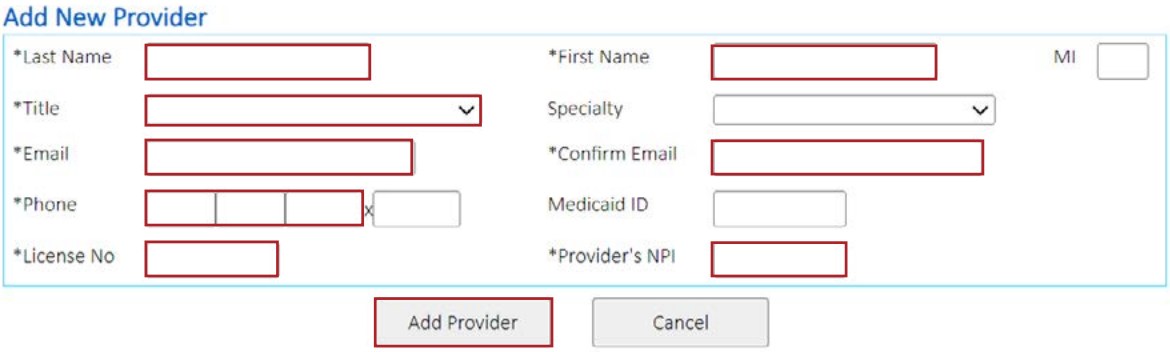
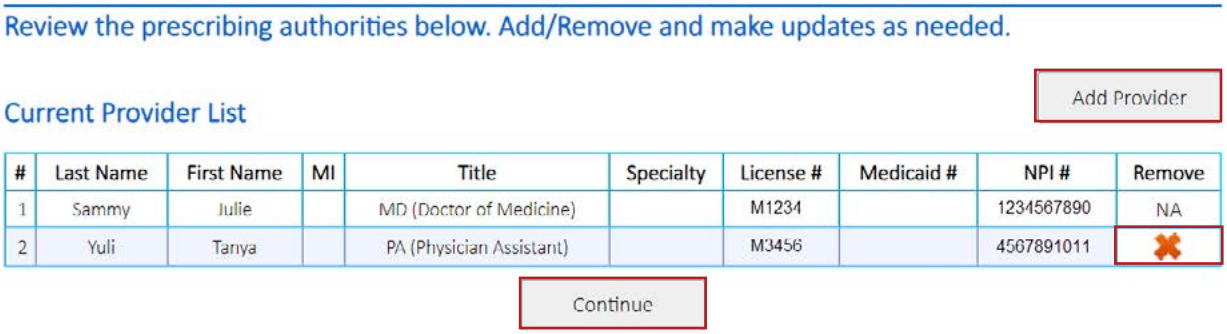


Figure 38: Add New Provider Information

The new prescribing authority is added to the list as seen in row two. The red “X” in the remove column means you can remove (disassociate) a Provider by clicking the red “X.”

Reminder: Organizations must have a designated Chief Medical Officer or Senior Practicing Provider for theResponsible Medical Provider. . They must be a Texas licensed medical provider and/or a licensed prescribing authority for organizations administering immunizations.



#	Last Name	First Name	MI	Title	Specialty	License #	Medicaid #	NPI #	Remove
1	Sammy	Julie		MD (Doctor of Medicine)		M1234		1234567890	NA
2	Yuli	Tanya		PA (Physician Assistant)		M3456		4567891011	✖

Figure 39: Current Provider List

ImmTrac2 Users

The Review ImmTrac2 Users Table allows you to:

- View all users in the organization,
- Identify functions of users such as the POC, PRC, or RMP,
- Add new users,
- Edit existing users, or
- Inactivate current users.

The POC, PRC, and RMP are the main Registry contacts. If needed, the POC, PRC or RMP can Add, Edit or Remove (disassociate) Users.

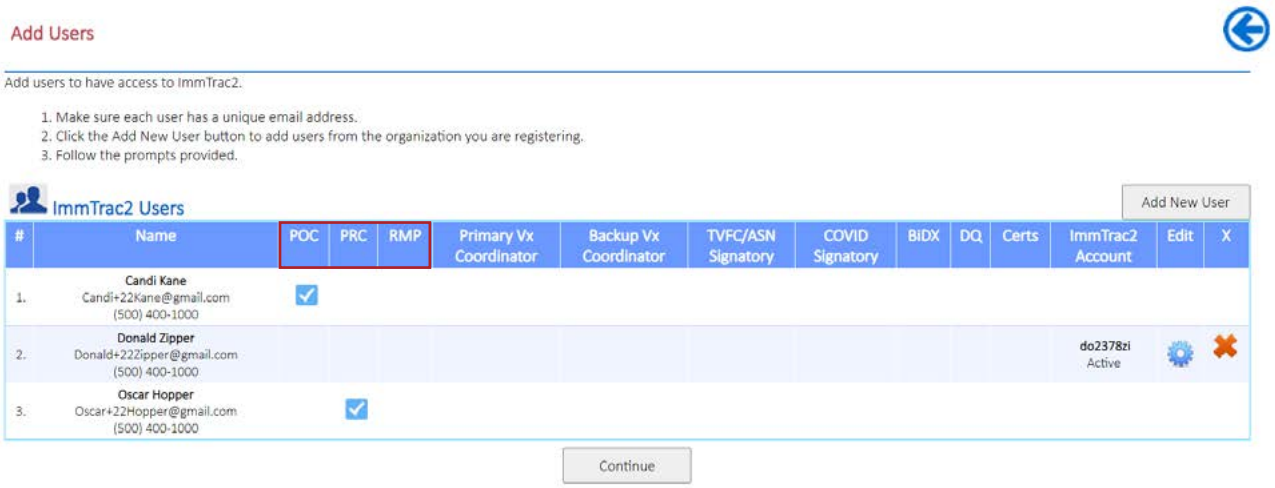


Figure 40: Review ImmTrac2 Users Table

Functions of Users in the Organization

- The **POC** serves as the organization's main Point of Contact for ImmTrac2. This individual is responsible for completing the ImmTrac2 registration/renewal and updating the organization's demographics and/or a user's profile. The Organization POC may be the assigned Registry and/or TVFC and ASN program contact and may assign individuals within their organization as Registry and/or TVFC contacts. This individual may also be the Authorized Signer with the ability to electronically sign the registration or renewal.
- The **PRC** is the main point of contact for ImmTrac2 related matters and client immunization related items. The ImmTrac2 Primary Registry contact may be the assigned Organization POC and/or TVFC and ASN program contact. These roles may or may not be the same person.
- Organizations must have a designated Chief Medical Officer or Senior Practicing Provider for the Responsible Medical Provider section. They must be a Texas licensed medical provider and/or a licensed prescribing authority for organizations administering immunizations.
- The **Primary Vx Coordinator** is the Primary Vaccine Coordinator for the TVFC program.
- The **Backup Vx Coordinator** is the Backup Vaccine Coordinator for the TVFC program.
- The **TVFC/ASN Signatory** is the person responsible for the TVFC or ASN programs in this organization.

Add New Users

Only the POC, PRC, or RMP can add or edit users. To add ImmTrac2 users, select the Add New User button.

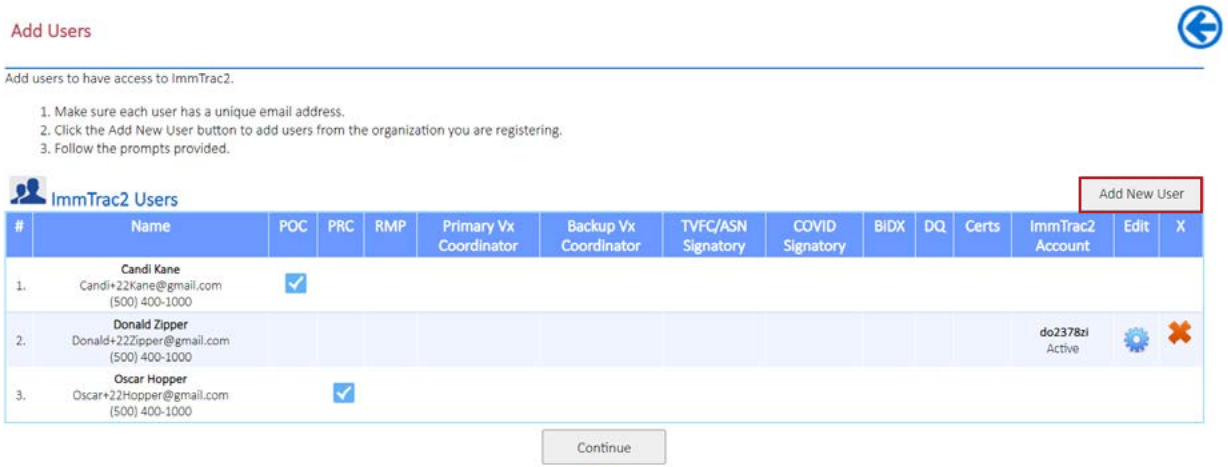


Figure 41: Add New User

After selecting the Add New User button, you will be asked to enter the unique email address. All users in ImmTrac2 must have a unique email address (Referenced in section two, paragraph "M" of the signed Site Agreement.)

Note: Email addresses in ImmTrac2 must be unique.

See Appendix C: Organization Agreement and Confidentiality Statement, in which section 2, paragraph “M” states that organizations and individuals accessing ImmTrac2 agree to provide unique e-mail addresses for each individual who is assigned an ImmTrac2 username.

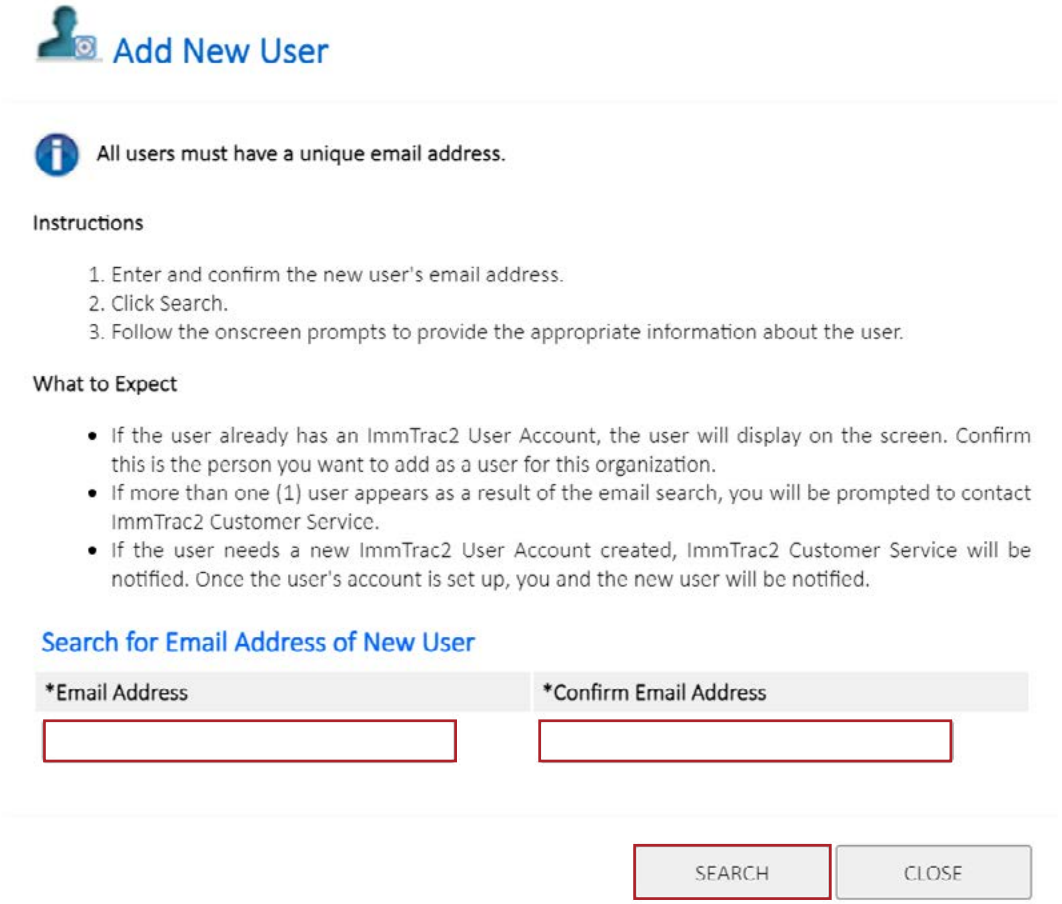


Figure 42: Enter Unique Email Address for New User

If an existing email address and name matches the email address and name of an existing user, click Confirm to add that user. If the email address and name belong to someone else, click Cancel.

Note: All email addresses must be unique to each user.

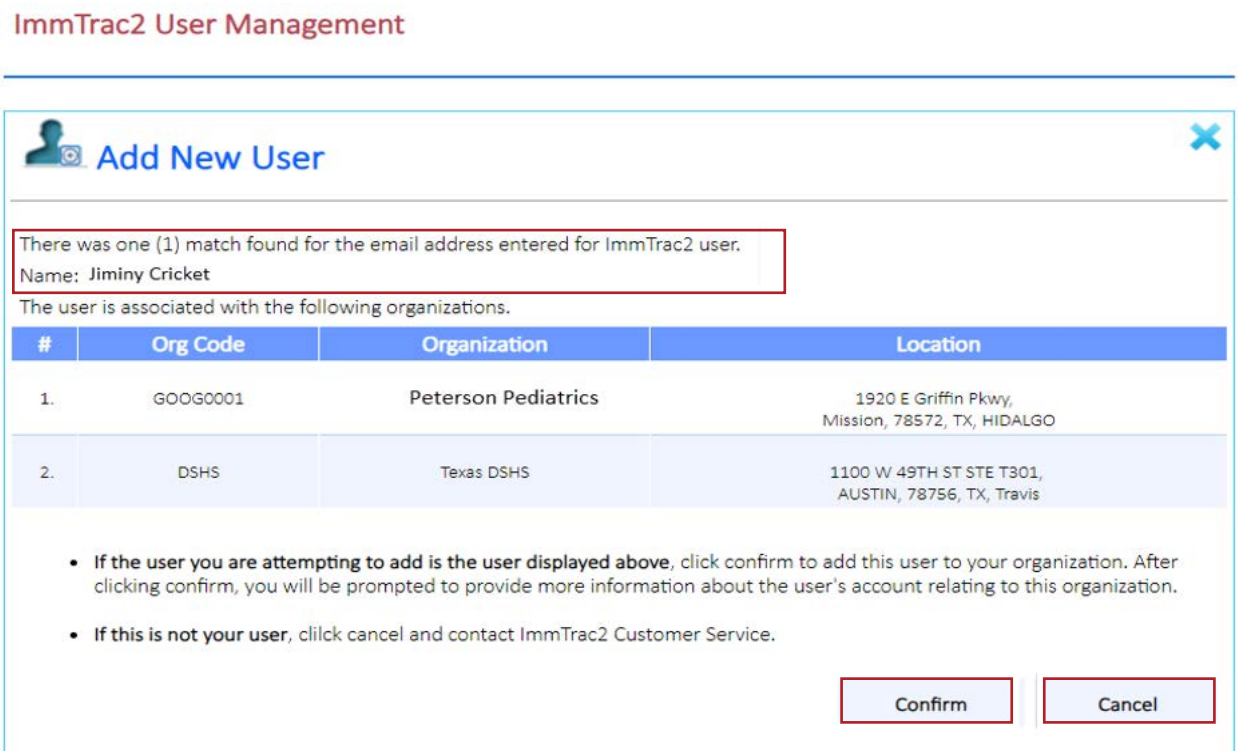


Figure 43: Match was Found to Existing Email

The email address entered is already in use by another user. You will have to use a different email address for this user if you did not make a typo. The owner of the email address is listed at the bottom of the screen.

Figure 44: Duplicate Contact Warning

If there is a problem with the email address such as a typo, you will receive this message. Double-check the email you are entering.

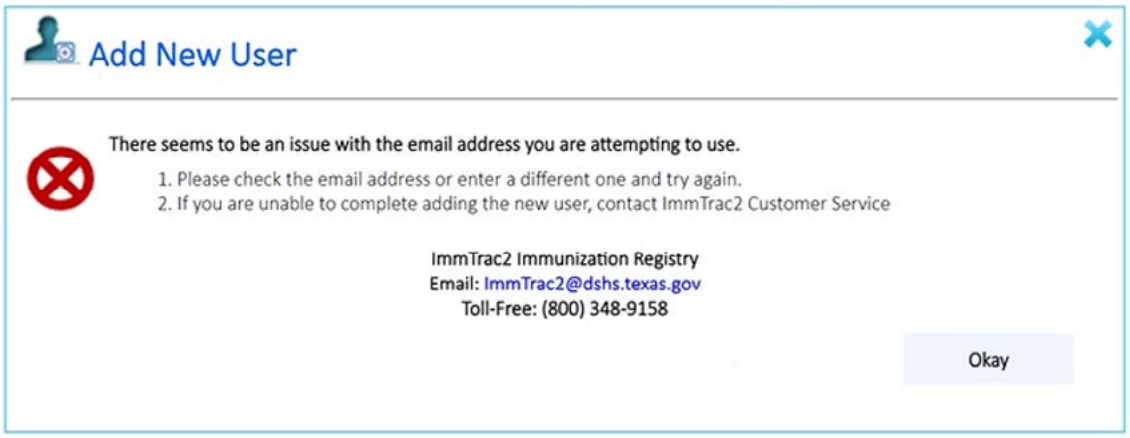


Figure 45: Issue with Email Address

If no matches were found on the email address in ImmTrac2, you must fill in details about the new user to continue and select Save.

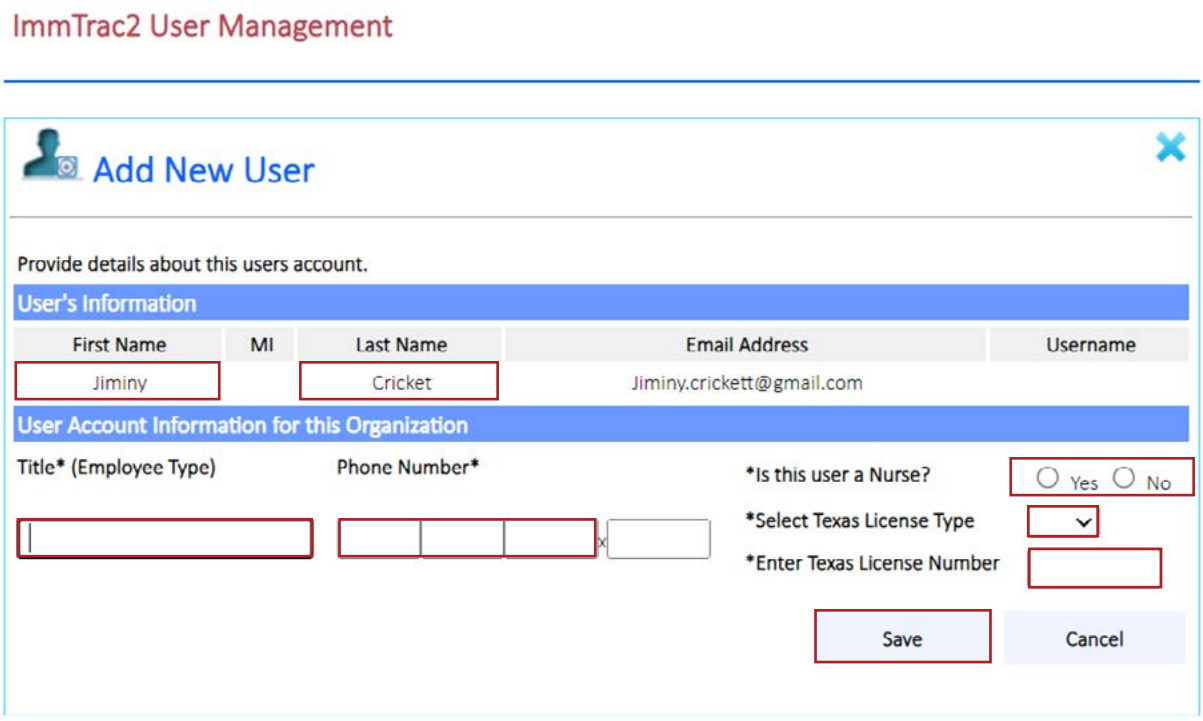


Figure 46: Add Details of New User

The user is added.

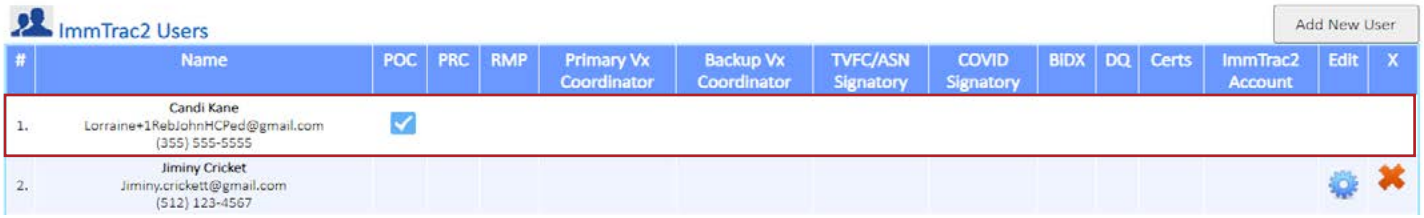


Figure 47: New User Added

Edit Existing Users

If you want to edit a User and they are not listed earlier as a POC, PRC, or RMP, then you would edit them in this section as an existing user. To edit an existing user, click the blue gear icon.

Figure 48: Edit Icon

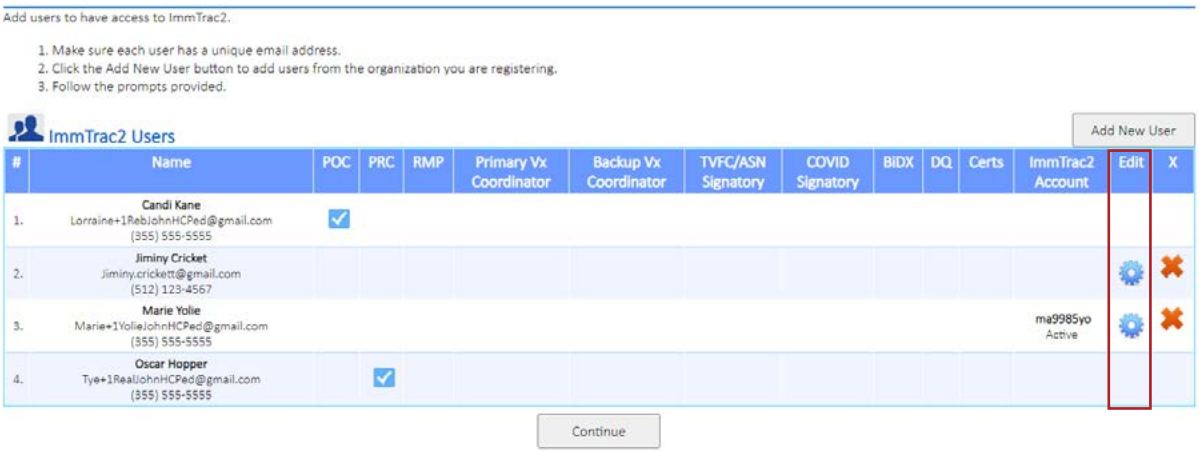


Figure 49: Edit User

Select the Edit (blue gear) icon of the user that you want to edit.

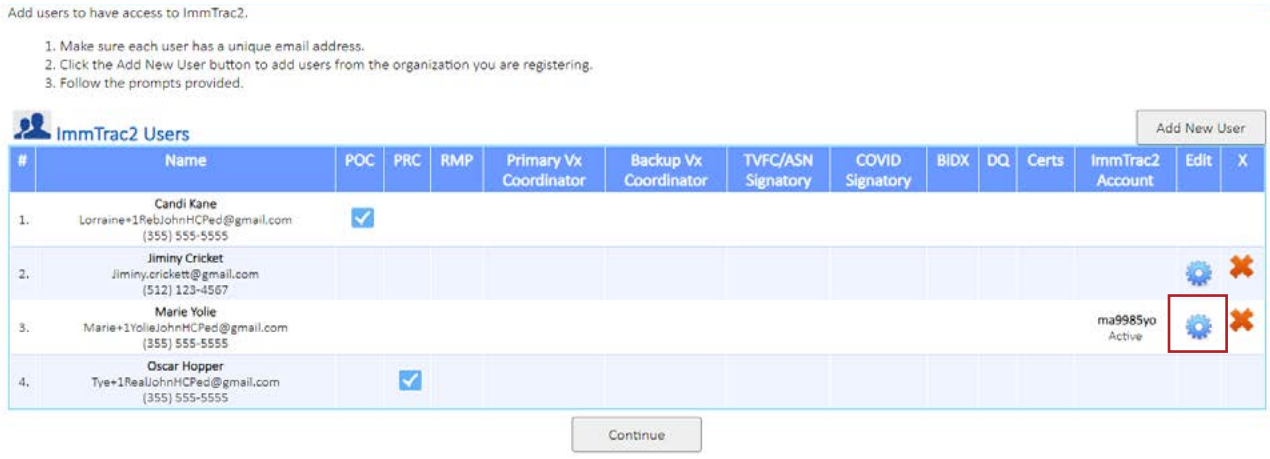


Figure 50: Select Edit Icon of User

Reminder: Fields with asterisks (*) are required.

Required fields to edit the user are the Issue Title, Issue Category (from a drop-down box of selections), Issue Description, and a box for Detailed Information. Select the “Submit” button when finished.

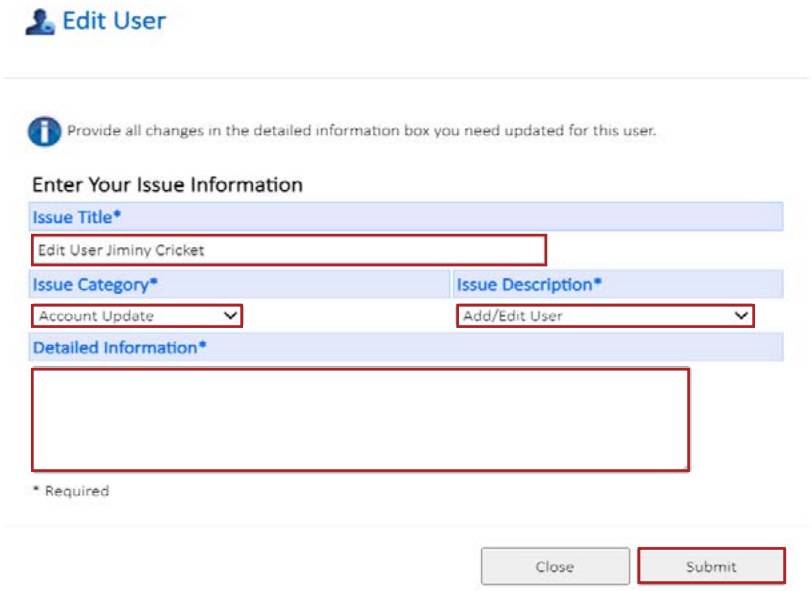


Figure 51: Edit User Information

Remove (disassociate) Existing Users

To remove an ImmTrac2 user, select the “Remove” icon that looks like a red “X” in the far-right column for the user that you want to remove.

Figure 52: Remove Icon

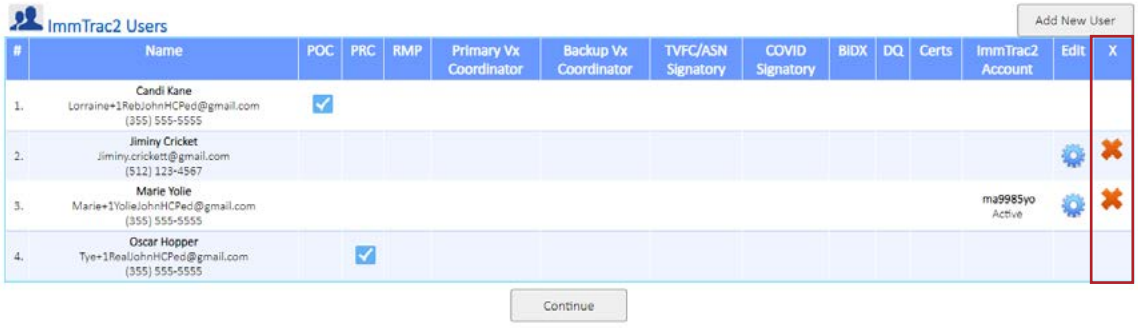


Figure 53: Remove Users

Below is an example of selecting a red “X” to remove a user.

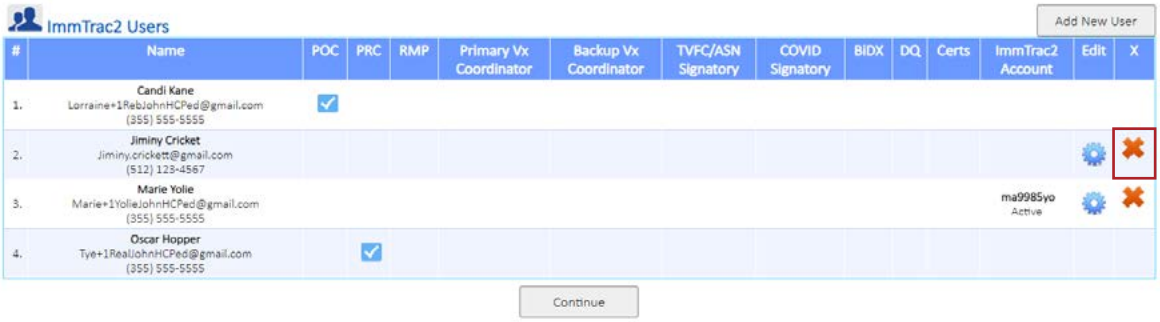


Figure 54: Select Red “X” to Remove User

Select the Continue button to remove the user.

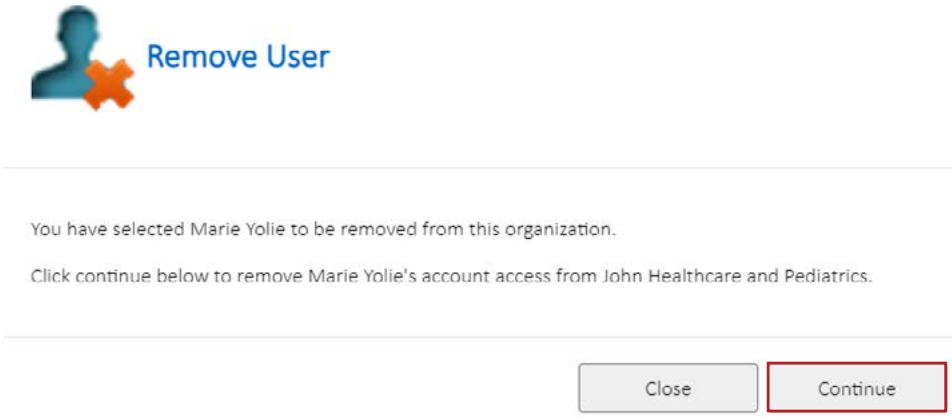


Figure 55: Select the Continue Button to Remove User

Step A6: Manner of Usage

How does your organization plan to report immunization data to ImmTrac2? Through direct data entry or electronic data exchange? (All organizations should select this option to begin. The other option is for later).

Organizations who plan to manually enter the data online in ImmTrac2 should select "Direct Data Entry". Once an option is selected, click save and continue.

Important Information: To establish an electronic data exchange interface using unidirectional data exchange (i.e., reporting via S/FTP or batch HL7 files) with the registry, you must access ImmTrac2 directly and submit registration of intent. Do not proceed with your registration via the Texas DSHS Immunization Program Portal in the Syntropi – CRC application.

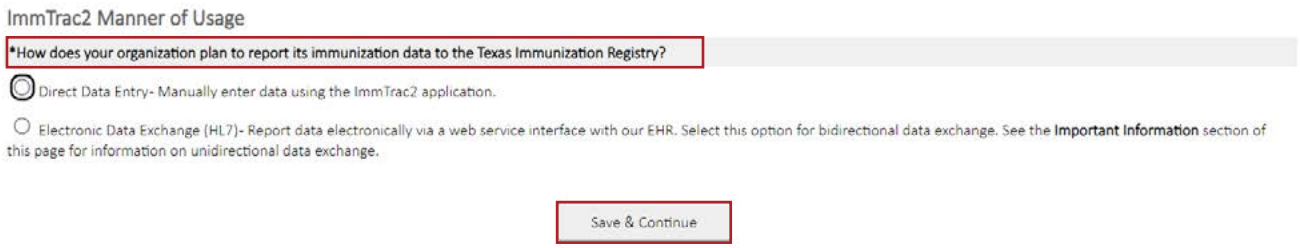


Figure 56: ImmTrac2 Manner of Usage

Step A7: Review

A summary of the site registration is displayed. Read through the entire summary to be sure that it is correct. The summary will display:

- Your information,
- Organization information,
- Contacts, and
- Responsible Medical Provider

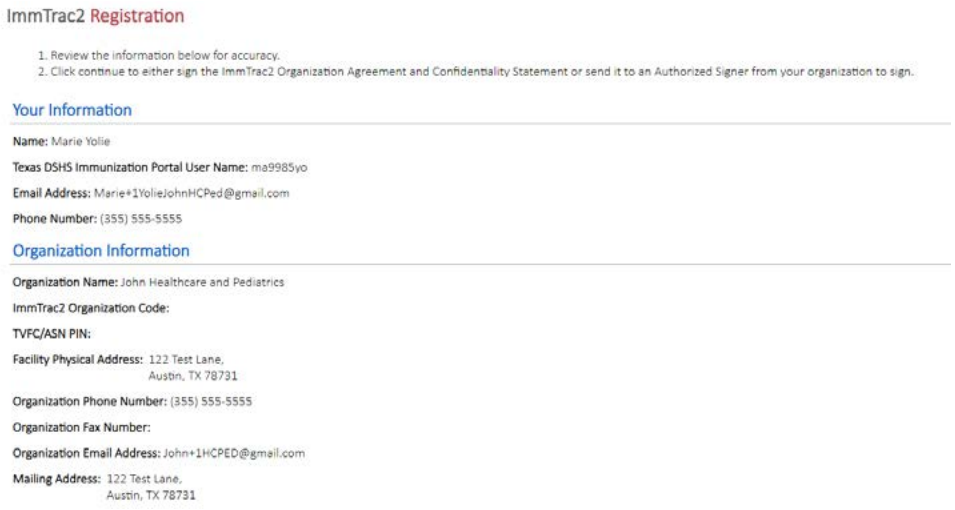


Figure 57: Review of Site Registration, Part 1

You can print the summary of your registration by selecting the print button or continue to file the registration by selecting the continue button.

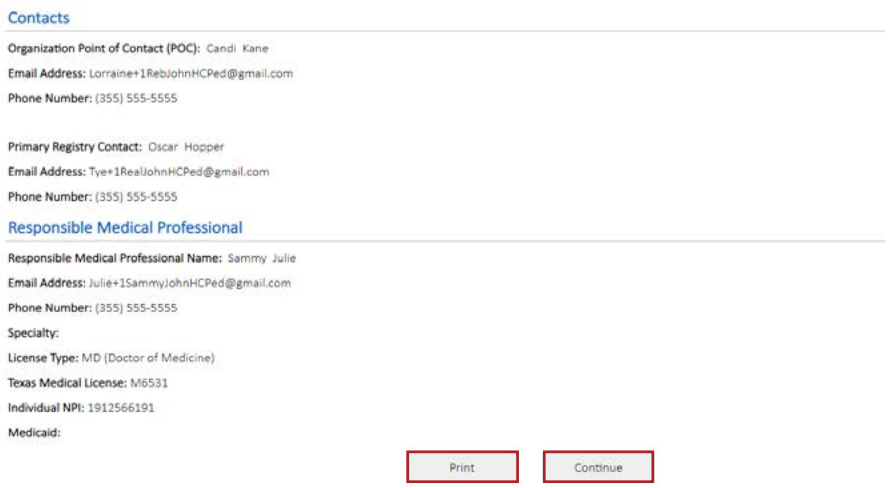


Figure 58: Review of Site Registration, Part 2

Step A8: Agreement

After reviewing the summary, you choose to either sign the renewal yourself or send it to someone else to sign.

Figure 59: Sign or Send to Someone Else to Sign

Option 1: You Can Sign on Behalf of This Clinic

If you choose to sign the agreement yourself, select the option on the left to sign on behalf of this clinic.

Figure 60: You Can Sign

Finally, select the Sign and Submit Site Agreement Button.

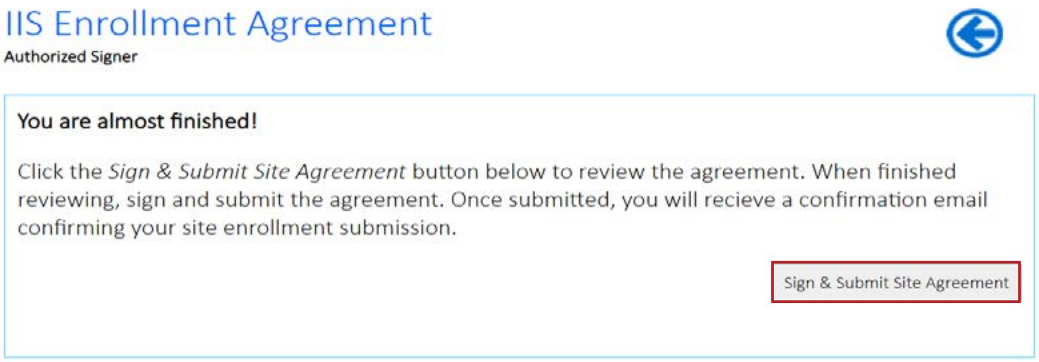


Figure 61: Sign and Submit

Electronic Signature Agreement

See Appendix C: Organization Agreement and Confidentiality Agreement. Carefully read through the agreement, select the box at the bottom, and then select the submit and/or print button.

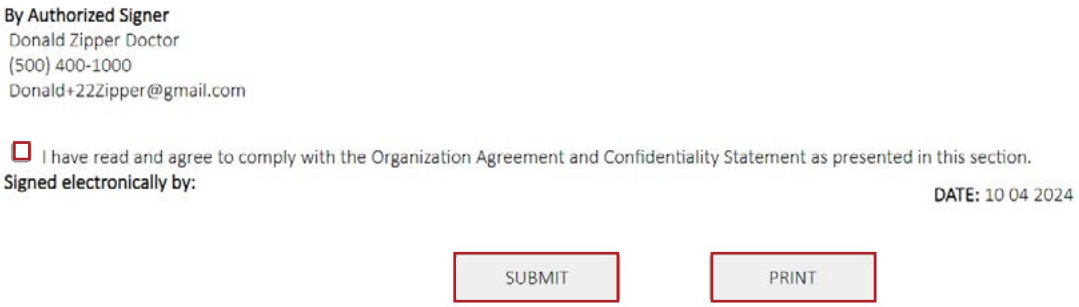


Figure 62: Electronic Signature Agreement

When you select the checkbox that you have read and agree to comply with the Organization Agreement and Confidentiality Statement as presented in this section, another box will pop up. The box states, “By selecting the ‘I Accept’ button you are signing this Agreement electronically. You agree your electronic signature is the legal equivalent of your mutual signature on this Agreement.

Note: Cancel will take you back to the main landing page.

Figure 63: Electronic Signature Agreement

You may select PRINT to print the Organization Agreement and Confidentiality Statement, then select the Close button.

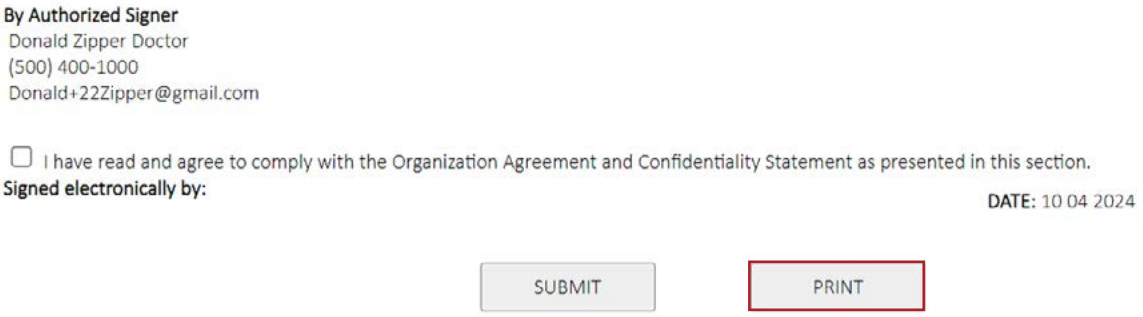


Figure 64: Submit Electronic Signature

Congratulations! The ImmTrac2 Registration has been successfully submitted! Please allow up to 14 business days, Monday through Friday, for processing. Processing takes place during business hours, Monday through Friday. If you do not receive an email after 14 business days of your registration submission, contact us at 800-348-9185 or at ImmTrac2@dshs.texas.gov

Option 2: You Need Someone Else to Sign on Behalf of This Clinic

If you need someone else to sign the site agreement, select the option on the right side "I need someone else to sign the agreement".

Reminder: Fields with an asterisk (*) are required.

- You can select the first bullet "I want to send the Agreement to the Responsible Medical Provider for signature", or
- You can select the second bullet "I want to send it to someone else".

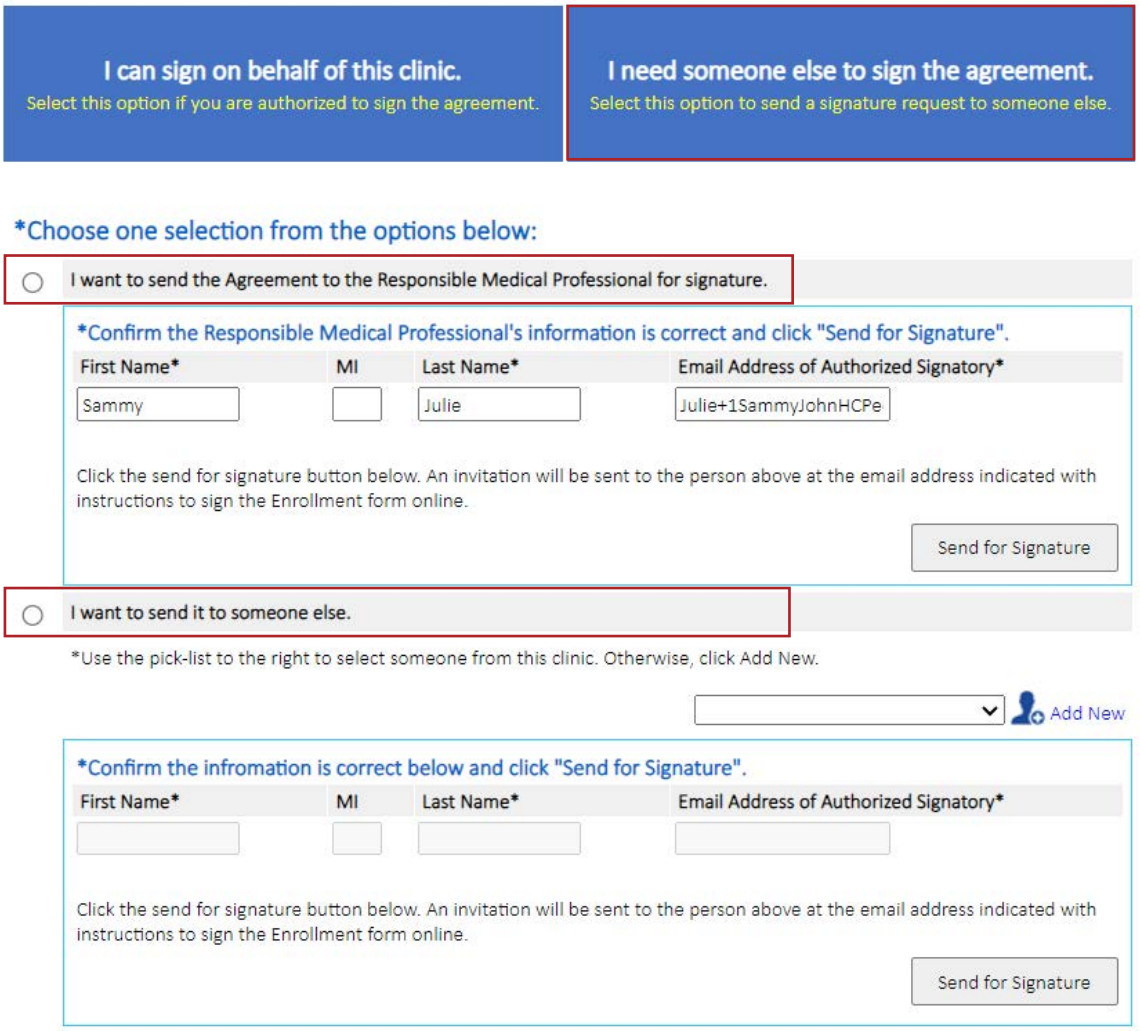


Figure 65: I Need Someone Else to Sign the Agreement

If you selected to send the site agreement to the Responsible Medical Professional to sign, check that the correct RMP is listed and select the "Send for Signature" button.

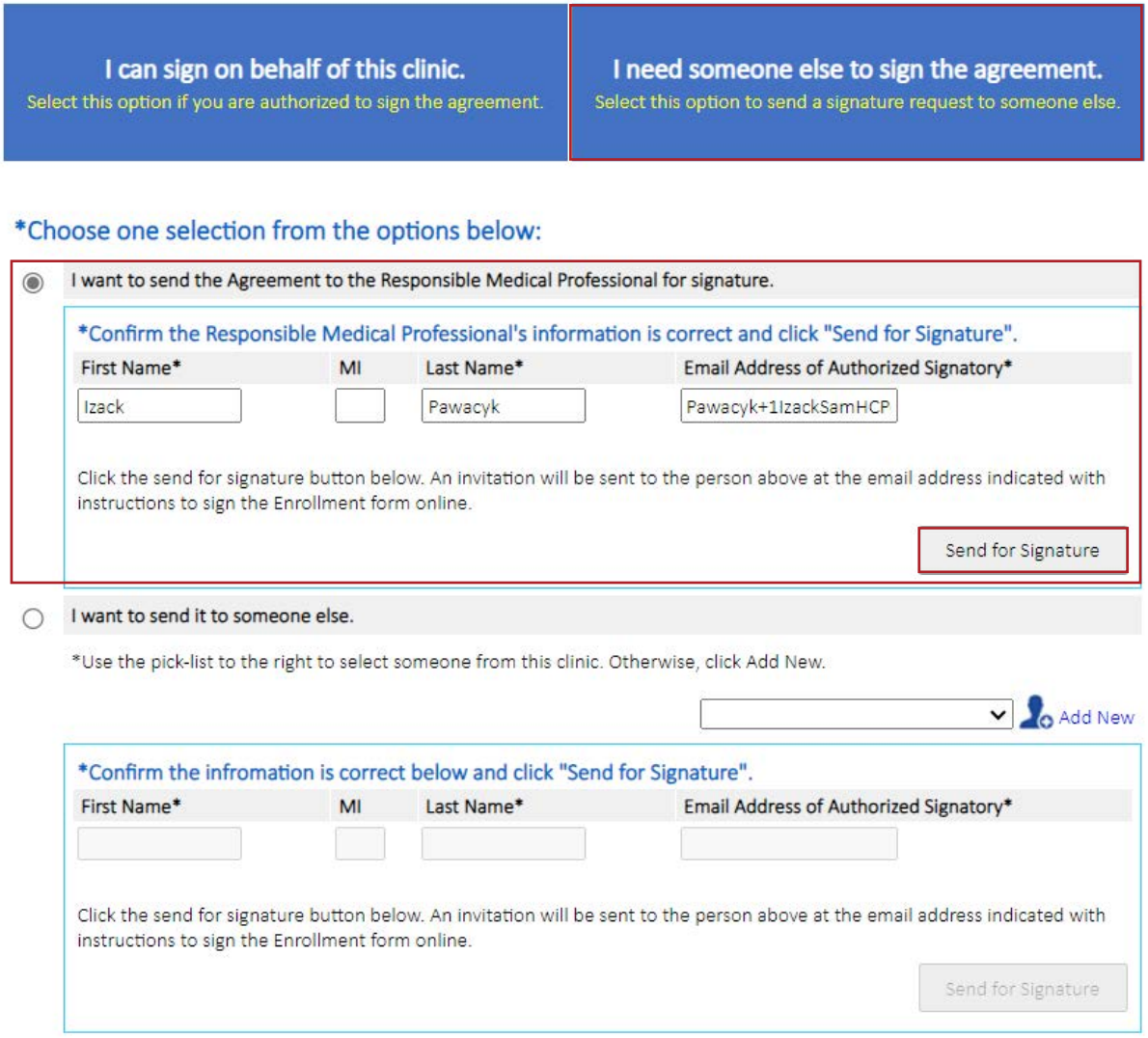


Figure 66: Send Agreement to Responsible Medical Provider

If you want to send the site agreement to someone other than the RMP to sign, select the second bullet for that choice, “I want to send it to someone else”.

Next, you have two choices:

1. Use the pick-list box to select from existing users in the organization who you want the agreement sent to, or
2. Select the “Add New” link to add someone new that is not on the picklist.
3. Select the Send for Signature button.

Reminder: Fields with asterisks (*) are required.

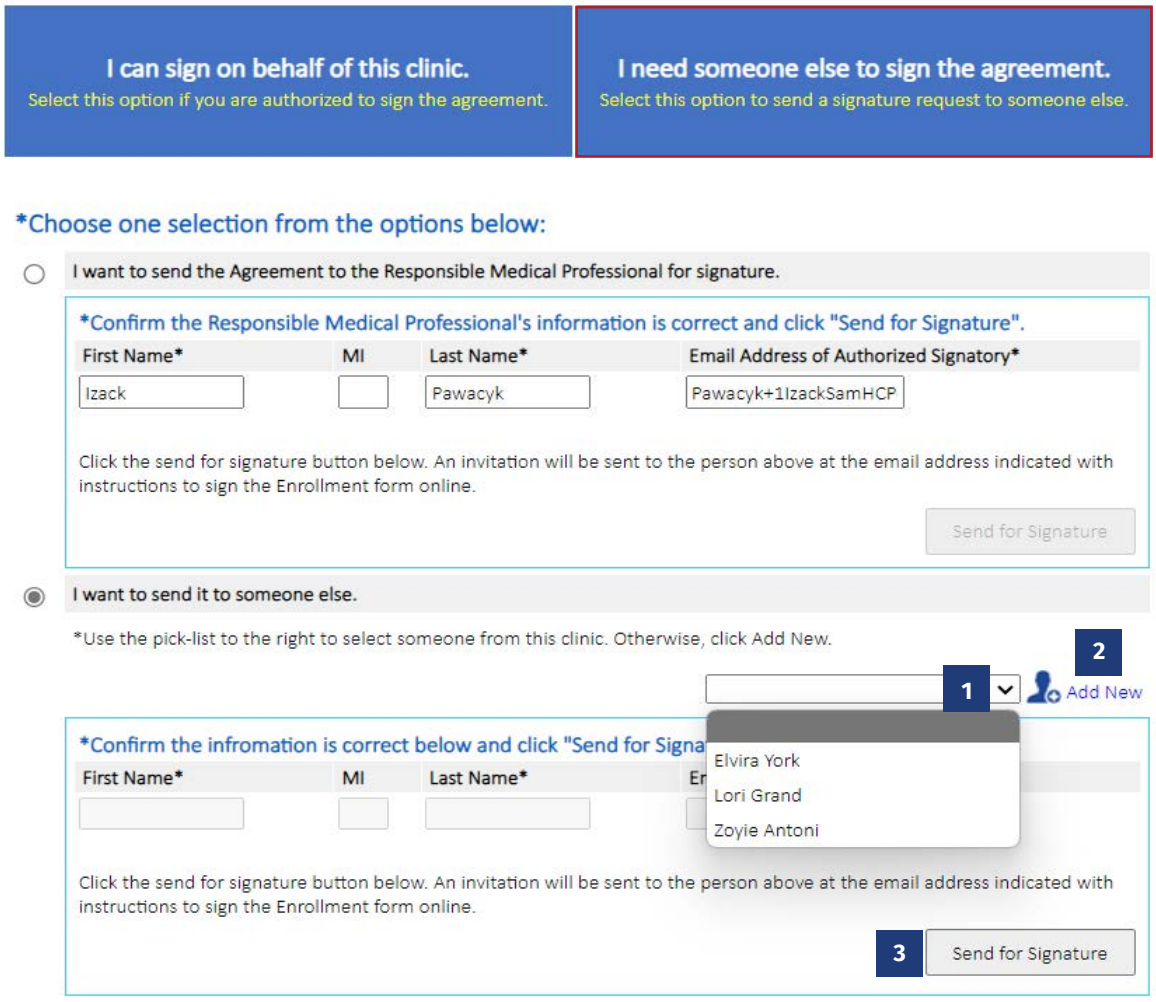
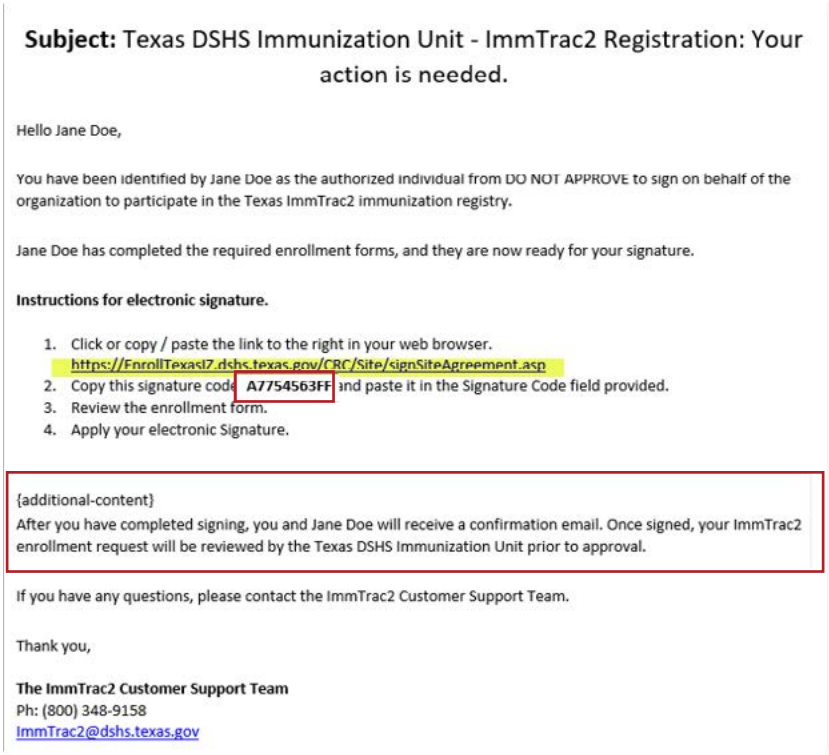


Figure 67: Send Agreement to Someone Not the Responsible Medical Provider

The authorized signer will receive the email below. To access the ImmTrac2 agreement, they need to click the hyperlink and copy the unique signature code included in the email.



Subject: Texas DSHS Immunization Unit - ImmTrac2 Registration: Your action is needed.

Hello Jane Doe,

You have been identified by Jane Doe as the authorized individual from DO NOT APPROVE to sign on behalf of the organization to participate in the Texas ImmTrac2 immunization registry.

Jane Doe has completed the required enrollment forms, and they are now ready for your signature.

Instructions for electronic signature.

1. Click or copy / paste the link to the right in your web browser.
   https://EnrollTexas17.dshs.texas.gov/CRC/Site/signSiteAgreement.asp
2. Copy this signature code A7754563FF and paste it in the Signature Code field provided.
3. Review the enrollment form.
4. Apply your electronic Signature.

{additional-content}
After you have completed signing, you and Jane Doe will receive a confirmation email. Once signed, your ImmTrac2 enrollment request will be reviewed by the Texas DSHS Immunization Unit prior to approval.

If you have any questions, please contact the ImmTrac2 Customer Support Team.

Thank you,

The ImmTrac2 Customer Support Team
Ph: (800) 348-9158
ImmTrac2@dshs.texas.gov

Figure 68: Email Requesting Action by Authorized Signer

After clicking the link in the email, enter the signature code, then paste it in the Signature Code field provided. Review the enrollment form and apply your electronic signature. Click continue.

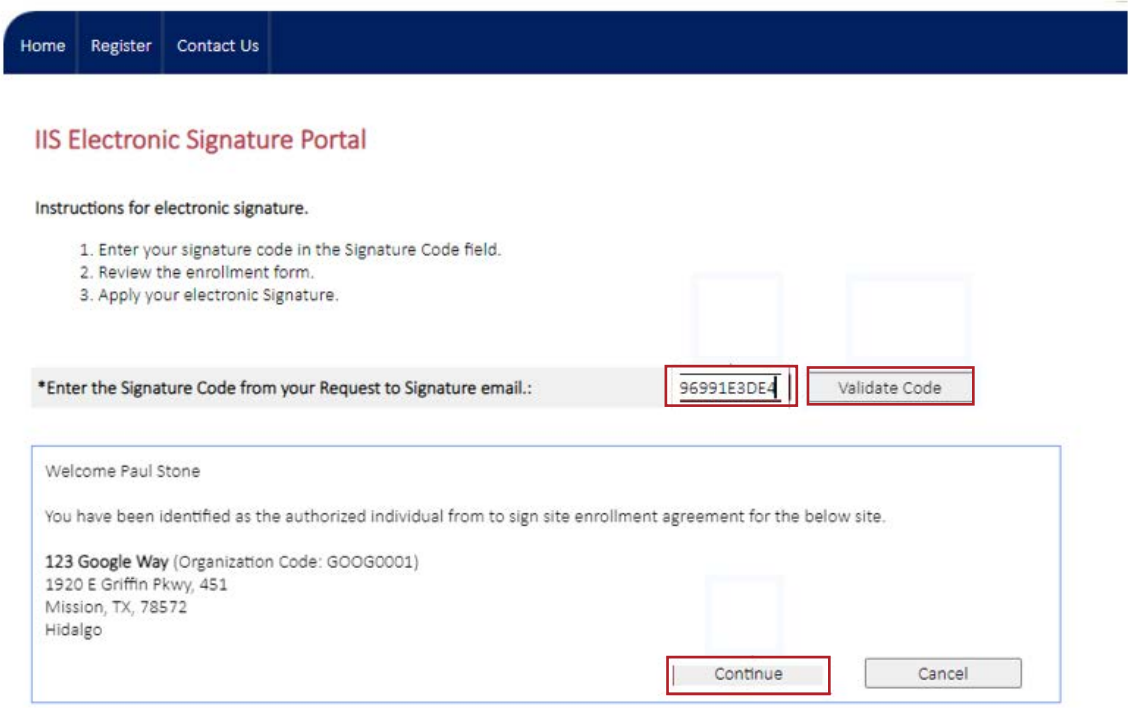


Figure 69: Electronic Signature Portal

Then select the “Sign and Submit Site Agreement” button.

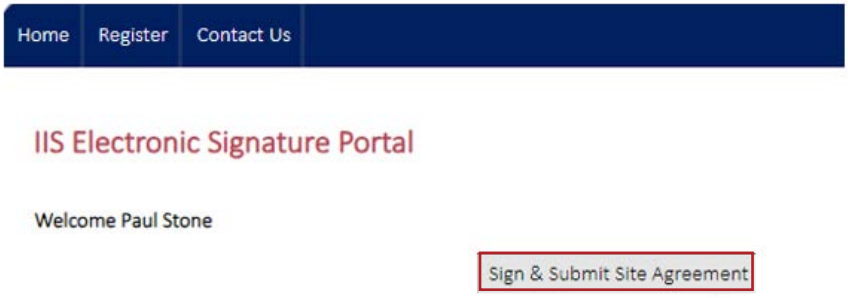


Figure 70: Sign and Submit Site Agreement

You have the option of reading and printing the summary of your ImmTrac2 Site Registration.

ImmTrac2 Registration

Texas Immunization Registry

TEXAS Health and Human Services | Texas Department of State Health Services

Submission Type: Registration

Submission Date: 08/08/2024

Organization Information

Organization Name: Pauls Pediatrics		DBA:
ImmTrac2 Org Code:	TX IIS ID:	TVFC/ASN PIN:
Parent Org:	Parent TX IIS ID:	Medical Group:

Facility?s Physical Address

Address 1: 16 W Texas St		Suite:	
City: Austin	County: Travis	State: TX	Zip Code: 78731
Telephone: (677) 777-7773		Fax:	Org Email: ApplePie+1@gmail.com

Facility?s Mailing Address

Mailing Address 1: 16 W Texas St		Suite:	P.O. Box:
City: Austin	County: Travis	State: TX	Zip Code: 78731

Clinical Information

Organization Type: Private Practice	DFPS Lic.:	TDI #:
Is this organization authorized to administer immunizations?	Yes	
Does this organization administer immunization or prophylactic injections?	Yes	
Type of vaccines given at this organization:	✔ Child ✔ Adult	

Organization Contacts- Point of Contact (POC)

First Name:	Apple
M.:	
Last Name:	Pie
Phone:	(677) 777-7773
Email Address:	
Texas Nurse License:	

Primary Registry Contact (PRC)

First Name:	Apple
M.:	
Last Name:	Pie
Phone:	(677) 777-7773
Email Address:	ApplePie+1@gmail.com
Texas Nurse License:	

Responsible Medical Professional (RMP)

First Name:	Apple	License Type:	MD (Doctor of Medicine)
M.:		Texas Medical License:	1234567890
Last Name:	Pie	Providers NPI:	M1234
Phone:	(677) 777-7773	Medicaid #:	
Email Address:	ApplePie+1@gmail.com	Specialty:	

Figure 71: Summary of ImmTrac2 Site Registration

Sign and Submit Site Agreement

On the next page, select Sign and Submit Site Agreement.

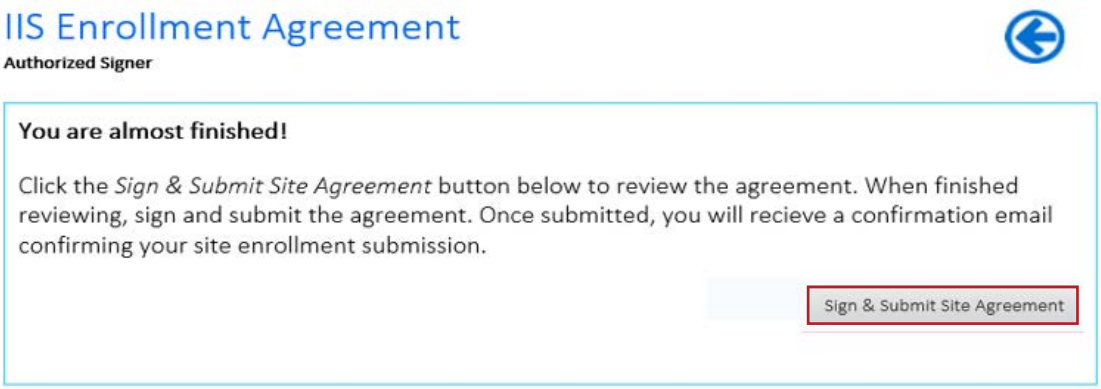


Figure 72: Sign and Submit Site Agreement

Organization Agreement and Confidentiality Statement

See Appendix C: Organization Agreement and Confidentiality Statement. Carefully read through the agreement and if you agree, select the small checkbox. You may select PRINT to print the Organization Agreement and Confidentiality Statement, and then select the SUBMIT button.

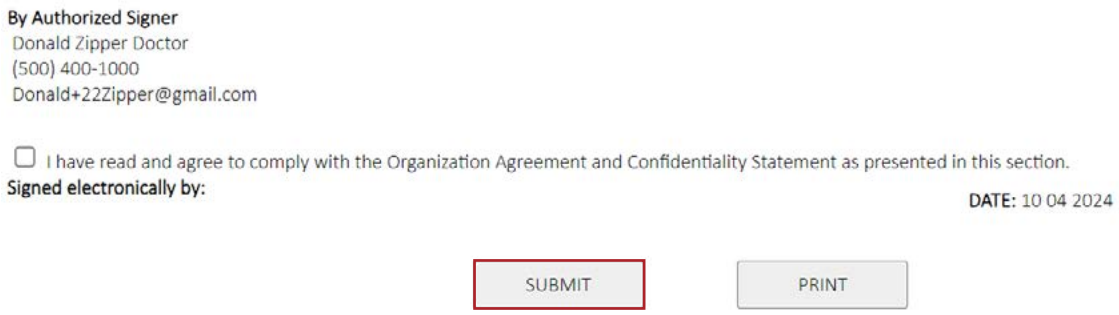


Figure 73: Organization Agreement and Confidentiality Statement Confirmation

When you select the checkbox that you have read and agree to comply with the Organization Agreement and Confidentiality Statement as presented in this section, another box will pop up. The box states, “By selecting the ‘I Accept’ button you are signing this Agreement electronically. You agree your electronic signature is the legal equivalent of your mutual signature on this Agreement”.

Note: Cancel will take you back to the main landing page.

Figure 74: Electronic Signature Agreement

Congratulations! The ImmTrac2 Registration has been successfully submitted! Please allow up to 14 business days, Monday through Friday, for processing. Processing takes place during business hours, Monday through Friday. If you do not receive an email after 14 business days of your registration submission, contact us at 800-348-9185 or at ImmTrac2@dshs.texas.gov.

When you go back into Syntropi you will find your facility information registration status which includes:

- Registration status
- Signature the request was sent to, which in this example, was “Charlotte Wolf”
- The date the agreement was sent for signature

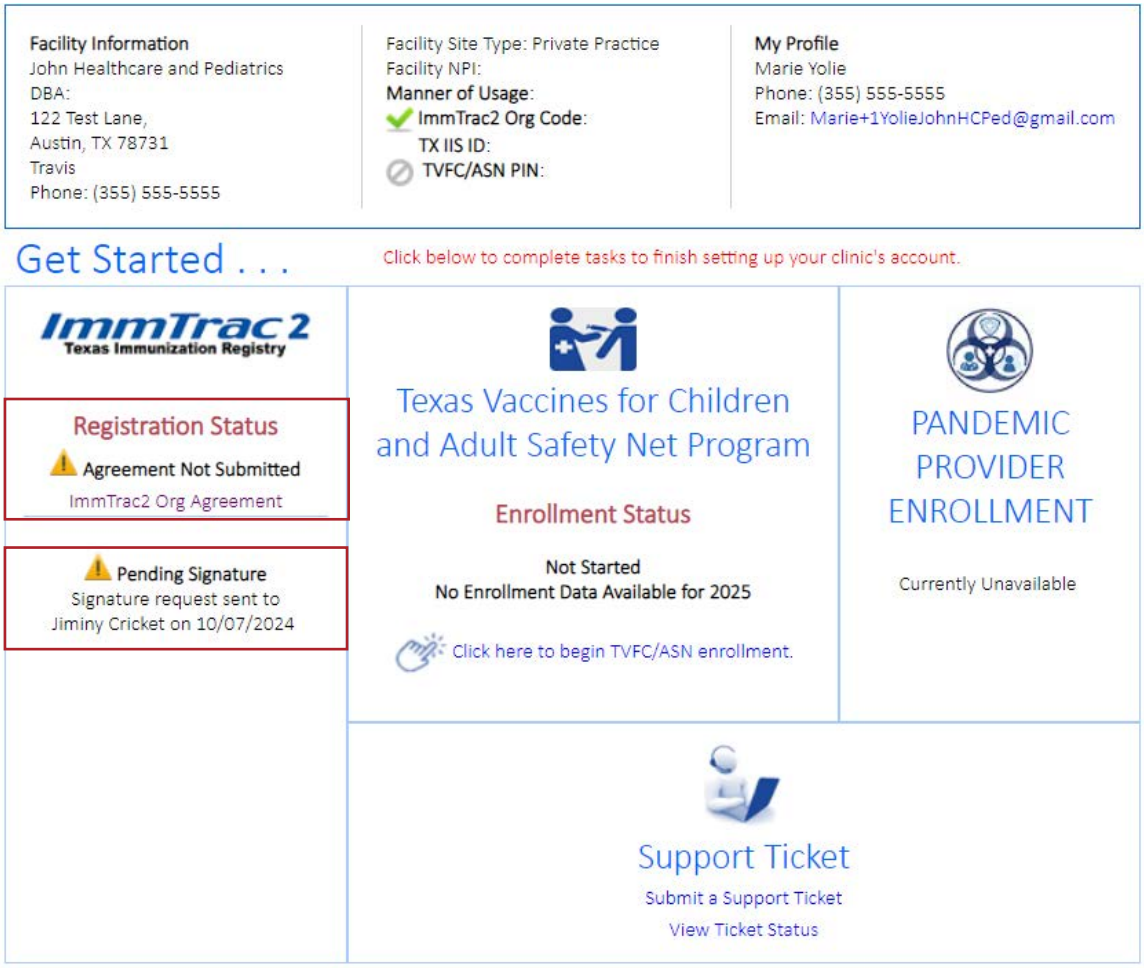
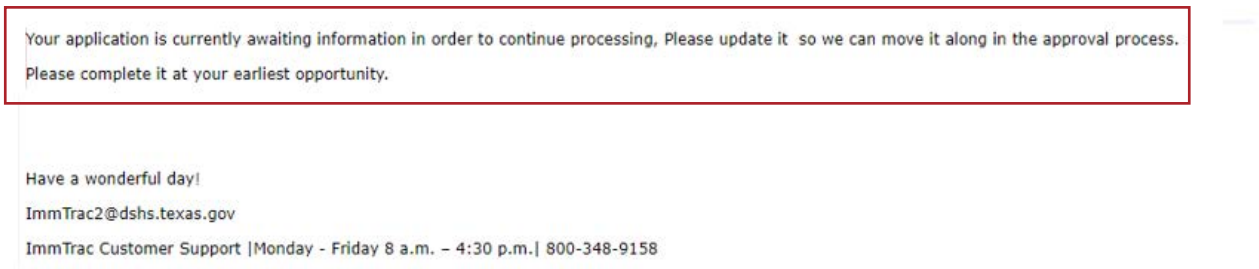


Figure 75: Registration Status and Pending Signature

If the registration status has errors or missing information, an email will be sent informing the submitter that “Your application is currently awaiting information to continue processing. Please update it so we can move it along in the approval process”. Missing information will be included in the email.


Your application is currently awaiting information in order to continue processing, Please update it so we can move it along in the approval process.
Please complete it at your earliest opportunity.

Have a wonderful day!
ImmTrac2@dshs.texas.gov
ImmTrac Customer Support |Monday - Friday 8 a.m. – 4:30 p.m.| 800-348-9158

Figure 76: Application is Awaiting Information Email

Some examples include:

- Incorrect or missing parent org
- Site already registered in ImmTrac2
- Provide a unique email address for each user

Under “The Agreement Submitted” section, “Unlocked for Corrections” will also be an indicator that additional information is needed to complete the application. DSHS will notate what needs to be changed in the email received.

Click to update your ImmTrac2 Agreement.

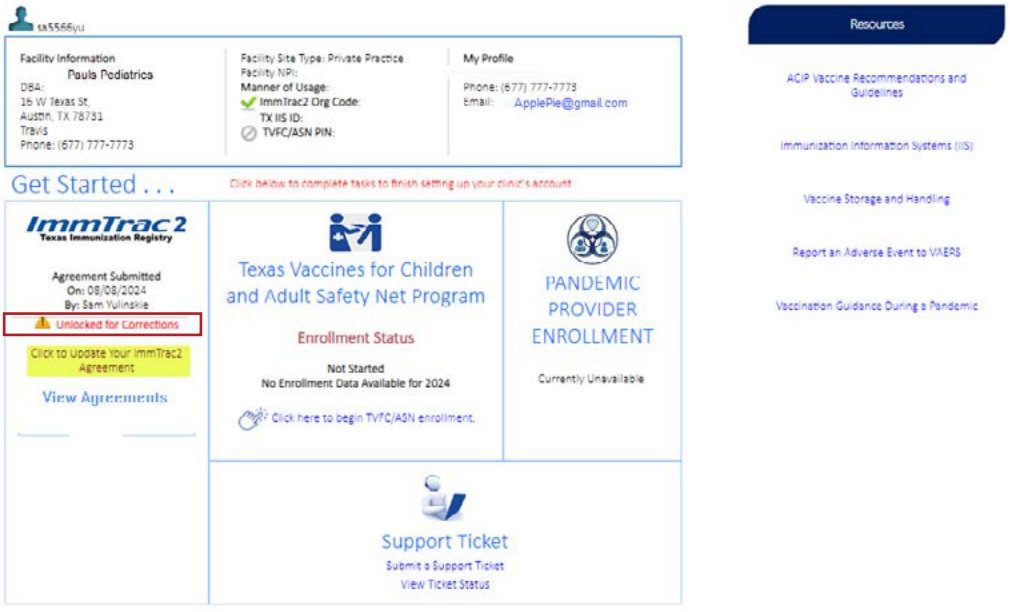


Figure 77: Unlocked for Corrections

Once approved, the ImmTrac2 status will change to “Approved” and include the approved date. There will also be an icon where you will be able to view the agreement.

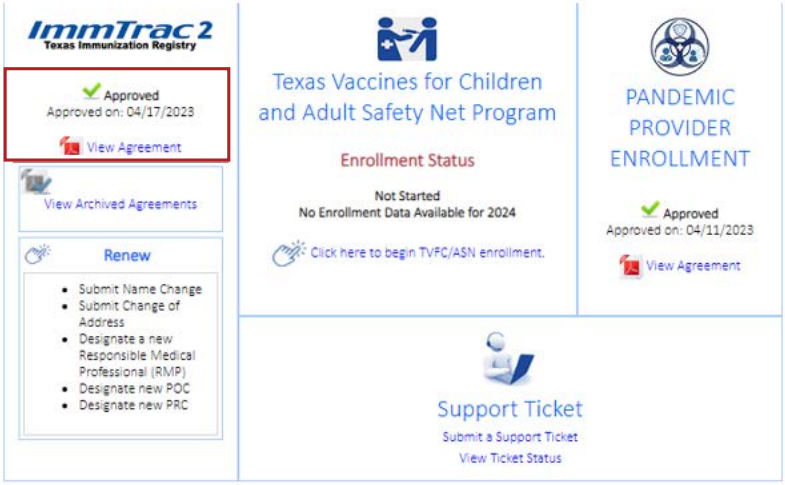


Figure 78: ImmTrac2 Registration Approved

Congratulations, your ImmTrac2 through Syntropi registration has been approved!

An email with a temporary username and link to activate the IAMOnline Portal will be sent.
Click “Activate Account” and follow the instructions which will navigate to the IAMOnline dashboard to access ImmTrac2.

Figure 79: IAMOnline Account Activation

Appendix A: Frequently Asked Questions

Which Browser Can Be Used?

Our recommended browser is Google Chrome. See Figure 73: Chrome Icon. Edge can work as a backup browser. We no longer support Internet Explorer.

Figure 80: Chrome Icon

Pending Signature Status

This status indicates that the ImmTrac2 registration has been submitted for signature, but the Authorized Signer has not electronically signed the agreement.

When is a Site Registration Needed?

A new ImmTrac2 registration must be completed if:

- An organization is registering for the first time.
- An organization has changed their clientele and/or city.

Site registrations can take up to 14 business days (Monday-Friday) to approve. The Texas Immunization Registry staff will review the forms and process them in the order they are received.

Have I Previously Registered in ImmTrac2?

You can see if you're already registered in ImmTrac2 and if so, see your ImmTrac2 org code by clicking the Org Look Up Tool.

How do I Search for my National Provider Identifier (NPI) Number?

Go to NPPES (hhs.gov) where you can look up your NPI number or apply for a free one which should be received in up to 10 business days (Monday-Friday).

How do I Search for my License Number?

- Doctors: Texas Medical Board
- Nurses: Welcome to the Texas Board of Nursing Website

How to Check the Status of Your Registration

Log into the IAMOnline Portal with the credentials emailed during the registration process. Once you are logged in, you can check the status of your registration by reviewing the ImmTrac2 "Registration Status". Please allow up to 14 business days, Monday through Friday, for processing. Processing takes place during business hours, Monday through Friday. If you do not receive an email after 14 business days of your registration submission, contact us at 800-348-9185 or at ImmTrac2@dshs.texas.gov.

The facility information registration status will include:

- Registration Status.
- Signature status. This will display if a signature is still needed from the person the signature request was sent to. In this example, the signature request was sent to "Charolette Wolf".
- The Date the Agreement was sent for signature.
- If the status is unlocked for additional information. (If applicable).

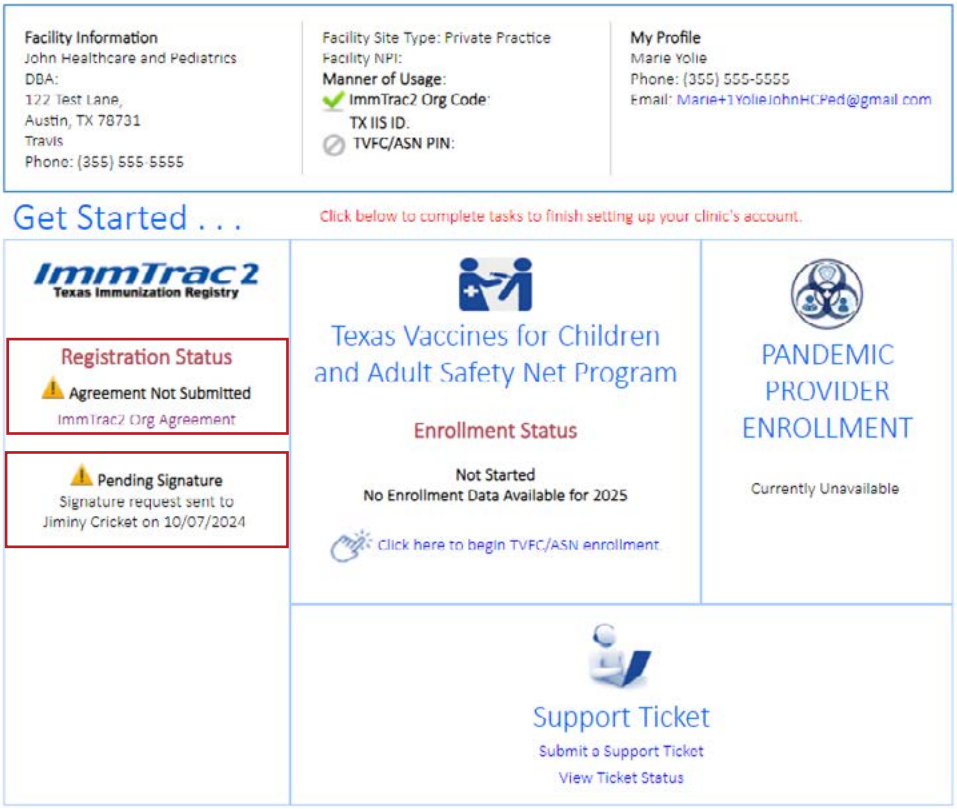


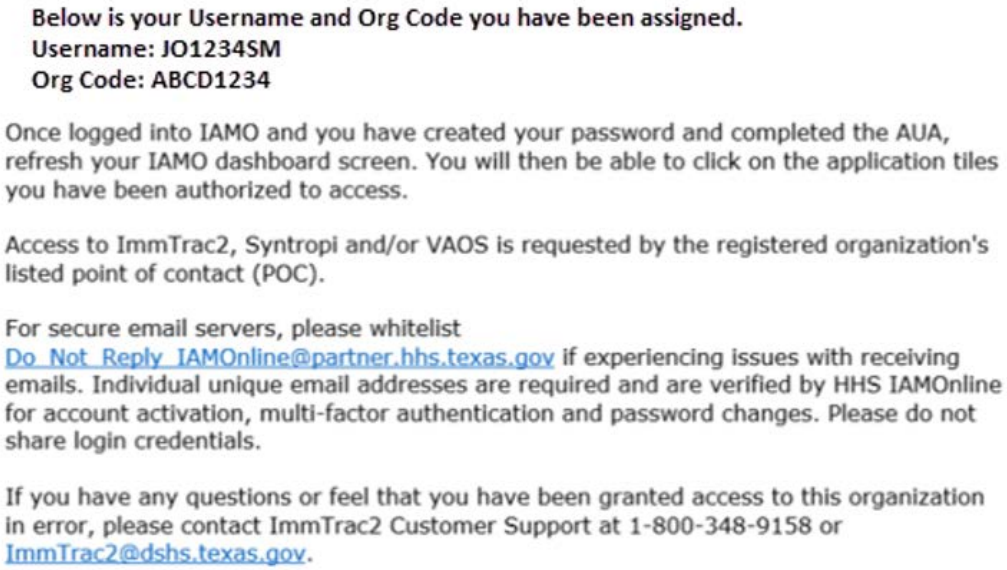
Figure 81: Registration Status and Pending Signature

What if I Choose to Exit the Registration Program Now and Complete it Later?

If you choose to exit and complete your registration later, you may return to IAMOnline at any time to complete your organization's ImmTrac2 registration. Two emails will be sent:

1. An email with your temporary username and Org code (see below).
2. New users will receive a second email with a temporary username and link to activate the IAMOnline Portal. Click "Activate Account" and follow the instructions which will navigate to the IAMOnline dashboard to access ImmTrac2.

Record your temporary IAMOnline username in a secure location for future reference. Click Continue.



Below is your Username and Org Code you have been assigned.
Username: JO1234SM
Org Code: ABCD1234

Once logged into IAMO and you have created your password and completed the AUA, refresh your IAMO dashboard screen. You will then be able to click on the application tiles you have been authorized to access.

Access to ImmTrac2, Syntropi and/or VAOS is requested by the registered organization's listed point of contact (POC).

For secure email servers, please whitelist Do_Not_Reply_IAMOnline@partner.hhs.texas.gov if experiencing issues with receiving emails. Individual unique email addresses are required and are verified by HHS IAMOnline for account activation, multi-factor authentication and password changes. Please do not share login credentials.

If you have any questions or feel that you have been granted access to this organization in error, please contact ImmTrac2 Customer Support at 1-800-348-9158 or ImmTrac2@dshs.texas.gov.

Figure 82: Email Sent If Exit is Chosen

Appendix B: Common Issues for Completing Site Registrations

Required fields have an asterisk (*) and are in blue. Before submitting a registration, review each section of the application and look for required fields that are blank.

Unique organization name: The organization name must be unique. For large organizations with similar names, use a unique identifier specific to the site. (Ex: “Pediatric Clinic – Dr. Paul Smith” or “Kindercare – 1003” or “Martin Luther King Middle – Austin ISD”)

Unique physical address: If the address already exists in ImmTrac2 by a different business, use address line two to make the address unique, such as adding a suite number. Look out for spaces before, after, or in the Email addresses:

User Account Info: If you are a “current user”, do not add yourself as an additional user. Advanced Practice Nurses (APN) should not put an “AP” in front of their license number.

The email address for each user must be unique. For security purposes, each user account is required to have a unique e-mail address. This will allow each individual user to reset their own password and retrieve their Org Code and Username. See Figure 55: Forgot Username and Forgot Password Buttons, Figure 56: Reset Password, and Figure 57: Forgot Username.

Note: Each individual user should not share their credentials as this violates the organization site agreement.

Appendix C: Organization Agreement and Confidentiality Statement

This agreement and confidentiality statement is by and between the Texas Department of State Health Services (DSHS, hereinafter) and made and entered into on Date 09/26/2020 concerning the access and use of ImmTrac2.

1. **DSHS agrees to**:

   A. Provide:

   - Secure access to ImmTrac2 for compatible computers at registered organizations.
   - Training and support to authorized organization staff on using ImmTrac2, including periodic briefing sessions as needed.
   - Customer support for assistance with questions and technical support for ImmTrac2 information resources-specific issues.
   - Customer Support: Monday through Friday (except state holidays) from 8:00 a.m. to 4:30 p.m. CST by emailing ImmTrac2@dshs.texas.gov or calling 800-348-9158.

   B. Maintain:

   - Registry data for: (a) participants from birth to age 18 years old, (b) first responders, (c) first responder immediate family members 18 years of age and older, (d) participants age 18 years and older, (e) persons entered in preparation for or in response to a declared public health emergency or disaster related event (information is retained for five years after the event has been declared over unless consent to further retain information permanently is obtained) - all consistent with Texas Health and Safety Code Chapter 161.
   - Registry information privacy in accordance with state and federal law, and DSHS policy.

C. Adhere to DSHS ImmTrac2 security and customer support access policies and procedures as follows:

- Assign each individual user a unique username. ImmTrac2 support staff members will remind organizations that usernames for ImmTrac2 web access cannot be shared.
- Disable new user accounts which are not used within 30 days of creation.
- Delete new user accounts which are not used within 120 days of creation.
- Auto-lock accounts with previous activity which are inactive for more than 90 days.
- ImmTrac2 will handle all out-of-state access requests on a case by case basis. Out-of-state providers and schools must be actively providing service to Texas clients. The number of Texas clients that a provider or school services, and Texas medical professional licenses for the providers at issue, will also be taken into consideration in the agency's decision-making process regarding access and/or release of client data. By signing this agreement, an out-of-state provider affirmatively agrees to be bound by Texas law, and stipulated to Travis County, Texas as the venue for any legal proceedings stemming from the provider's ImmTrac2 usage. All ImmTrac2 users are also subject to federal privacy laws.

2. Organizations/individuals accessing ImmTrac2 agree to:

A. Access information in ImmTrac2 only for purposes allowed by Texas Health and Safety Code Sec. 161.008(d) and DSHS Rule 100.5(e). At no time should records be accessed in ImmTrac2 for any other purpose. Violation of these restrictions are a Class A misdemeanor under Texas Health and Safety Code Section 161.009. DSHS Rule 100.5(e)(2) allows access for these entities, subject to the stated limitations:

- (a) a Texas public health district or a Texas local health department, for public health purposes within their areas of jurisdiction, (b) a physician or any health care provider licensed (or otherwise legally authorized) to administer vaccines in Texas, for treating the child as a patient, (c) a Texas school or Texas childcare facility, for a child enrolled in that school or childcare facility, (d) a payor currently authorized by the Texas Department of Insurance to operate in Texas, for immunization records related to the specific person in Texas covered under the payor's policy and/or (e) a state agency having legal custody of a child.

B. Offer all parents, managing conservators or legal guardians for children, who receive immunizations at the Organization, the opportunity to consent to enter the child's immunization information into ImmTrac2, if the child does not already participate in ImmTrac2.
Affirm consent was granted to DSHS, according to the procedures specified by DSHS.
Print, sign and release to the parent, legal guardian or managing conservator, the immunization history report of a child, less than 18 years of age, when requested.

C. Offer all first responders and first responder immediate family members 18 years of age and older, who receive immunizations at the Organization, the opportunity to request to enter their immunization information into ImmTrac2, if the person does not already participate in ImmTrac2. Affirm consent was granted to DSHS, according to the procedures specified by DSHS. Print, sign and release to the first responder and first responder immediate family members 18 years of age and older, their immunization history report when requested.

D. Offer all adults, age 18 years and older, who receive immunizations at the Organization, the opportunity to request to enter their immunization information into ImmTrac2, if the person does not already participate in ImmTrac2. Affirm consent was granted to DSHS, according to the procedures specified by DSHS. Print, sign and release to the adults, age 18 years and older, their immunization history report when requested.

E. With the appropriate consent and affirmation of consent within ImmTrac2, enter the person's present and future immunization data into ImmTrac2.

F. Instruct organization personnel on the confidentiality of information in ImmTrac2. See Texas Health and Safety Code Sec's 161.0073 and 161.009, found at: statutes.legis.state.tx.us/Docs/HS/htm/HS.161.htm as well as DSHS Rule 100.2, found at: texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=4&ti=25&pt=1&ch=100&rl=Y.

G. Ensure ImmTrac2 or any immunization information is not used in a punitive manner (e.g. to deny services or track immigration status) or to solicit new patients or clients.

H. Acknowledge that loss of user privileges will occur if abuse of ImmTrac2 data is suspected by DSHS.

I. For the purpose of assuring the quality and accuracy of the data submitted by the organization to ImmTrac2, allow DSHS to compare the organizations immunization records to children whose names appear in ImmTrac2 and are linked to a provider(s) at the organization.

J. Assume responsibility for all organizational usage of ImmTrac2. If an organization or an individual user is deemed a security risk, the offending account(s) in that organization may be administratively locked. DSHS reserves the right to permanently disallow any known high-risk individual access into ImmTrac2.

K. Disallow usage of ImmTrac2 for anything other than its intended purpose. No authority is allowed to conduct research using ImmTrac2 data.

L. Designate an 'Organization Contact' and a 'Authorized Signer' who is a licensed medical provider that is authorized to sign the ImmTrac2 Organization Agreement and Confidentiality Statement for organizations that administer immunizations. Organizations that do not administer immunizations and are authorized by Texas law to access ImmTrac2 are required to list the highest immunization record reviewing authority within the organization as the authorized signer.

M. Provide unique email addresses for each individual who is assigned an ImmTrac2 username.

N. Participate in ImmTrac2 training when required, applicable and appropriate. Special privilege users not part of Texas DSHS, specifically users with Provider Supervisor Roles at registered organizations are required to take the "Provider Supervisor Role" training on a yearly basis, or possibly sooner depending on date of enrollment.

3. Confidentiality Statement

A. I agree to provide copies of this confidentiality statement to all organization staff accessing ImmTrac2 for their review, and direct them to ImmTrac2 online training materials located within the Texas Vaccine Education Online - Immunization Branch website: vaccineeducationonline.org/login/index.php and also the ImmTrac2 Instruction Manual located in the help section within the ImmTrac2 web application. Registered organizations are required to have their organization's listed authorized users to review the ImmTrac2 training materials at least every two years.

B. I agree to be held responsible for my organization's user information recorded within ImmTrac2 and will report high-risk users associated within my organization directly to ImmTrac2 Customer Support.

C. I agree to update user changes including name, email addresses and phone number changes. I acknowledge users can be associated with more than one organization, and Texas DSHS requires that high risk users be reported by Organization Contacts directly to ImmTrac2 Customer Support so that the offending user account can be locked and/or disabled/disassociated from all organizations associated with that username.

D. I agree to comply with ImmTrac2's confidentiality restrictions. ImmTrac2 data is confidential by law. Information must be used only for the purpose it is collected, consistent with state and federal law. Unauthorized use and/or disclosure of this data is prohibited (see Texas Health and Safety Code Sec. 161.0073 and DSHS regulations at 25 TAC Sec. 100). Texas law makes unauthorized use and/or release a criminal act (see Texas Health and Safety Code Sec. 161.009), including negligently using information in the immunization registry to solicit new patients or clients.

E. I acknowledge that any unauthorized disclosure of Registry information will result in my losing the ability to access ImmTrac2.

F. I agree to protect the ImmTrac2 username and password from unauthorized users.

G. I verify that I am an authorized ImmTrac2 Registry user and will only use the ImmTrac2 username assigned by DSHS.

H. I have read and agree to the terms on this ImmTrac2 Organization Agreement and Confidentiality Statement.

Authorized Signer

*Select one:

- I am not the Authorized Signer

  Note: Selecting this option confirms that you are not an Authorized Signer and unable to sign for this Organization. Clicking the Submit for Signature button below will send a request for signature by the Authorized Signer identified in this form.

- I am the Authorized Signer

Appendix D: Contact Information

ImmTrac2 Site Registrations or Renewals

Email: ImmTrac2@dshs.texas.gov (Include “ATTN: REG / REN” in the Subject Line to route it to the Registrations and Renewals team).

Phone: 800-348-9158, option 4

ImmTrac2 Interoperability (Data Exchange)

Email: ImmTracMU@dshs.texas.gov

Phone: 800-348-9158, option 3

Texas Vaccines for Children (TVFC)

Email: VacCallCenter@dshs.texas.gov

Phone: 800-252-9152

Vaccine Allocation and Ordering System (VAOS)

Email: TXVaccineOrders@dshs.texas.gov

Phone: 833-832-7068

Adult Safety Net

Email: ASNInfo@dshs.texas.gov

Texas Department of State Health Services
Immunizations Section

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