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Document subject to change based on modified system functionality.

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### General

The purpose of this document is to provide Georgia Providers step-by-step guidelines on how to use VMS to request the COVID vaccine, as well as navigate the additional functionality offered by VMS. This user guide is broken into sections on general information, the provider portal view, the inventory view, and helpful reminders.



### **Explain the VMS**

#### What is VMS?

#### Vaccine Management System (VMS) enables

COVID vaccine management and data sharing for the State of Georgia on one central platform.

#### Providers are able to:

- Access VMS
- Request COVID vaccine
- Manage COVID vaccine inventory

In future VMS releases, providers will have access to more information on their vaccines and data.

#### Why VMS?

Vaccine Management System (VMS) provides a flexible approach for requesting and administering vaccines. It will allow the State of Georgia to streamline providers' process for the entire COVID vaccine lifecycle.

#### Who uses VMS?

**State of Georgia Department of Public Health officials** will enroll providers and verify provider eligibility along with verifying site

readiness. **State of Georgia Support Staff** will also receive training on using VMS, so they can support state officials.

**Georgia COVID Providers** will request vaccines, which includes the type of vaccine, the dose, and the quantity ordered. For those that have not received information, communications will circulate on when VMS will be available.

Georgia Provider Po	ortal			A New Request VMS Inventor	y   Shanley Costa -
NORTHWEST HEALTH DISTRICT PHARMACY	Summary Vaccine Requests	Vaccine Orders Vaccine Administered			
BARTOW COUNTY HEALTH DEPT	VTrckS PIN	Account Name * BARTOW COUNTY	HEALTH DEPT		
CATOOSA COUNTY HEALTH DEPT	Street Address 1 100 ZENA DRIVE	Street Address 2		City	
CHATTOOGA COUNTY HEALTH DEPT	State GA	ZIP 30121		Phone 770-382-1920	
DADE COUNTY HEALTH DEPT	Coordinators				
DISTRICT 1.1 SPECIALITY CLINIC FLOYD COUNTY HEALTH	Primary Full Name *		Backup     Full Name *		
GORDON COUNTY HEALTH	Email		Email		
HARALSON COUNTY HEALTH DEPT	Notifications				
NORTHWEST HEALTH DISTRICT PHARMACY	Email	Email 2		Email 3	
PAULDING COUNTY HEALTH DEPT					Save



### Access the VMS

#### **1** Receive the Email Invitation

The Department of Public Health (DPH) sends email invitations to VMS users. Each invitation includes a direct link to the Georgia Provider Portal and an invitation code. The invitation code links a Microsoft account to a primary vaccine coordinator record inside VMS. The invitation code creates a credential for VMS access.

#### **2** Input the Invitation Code

The direct link inside the email invitation directs users to the Georgia Provider Portal and pre-populates the invitation code. **NOTE:** The invitation code will not prepopulate unless the direct link in the email is used to get to the Georgia Provider Portal.

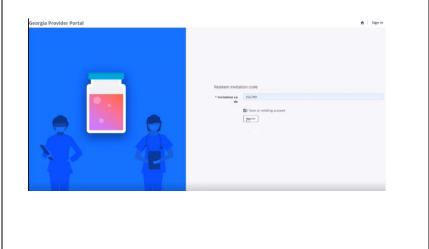
#### **3** Register a Microsoft Account

An existing personal/business Microsoft account can be used to access VMS. Check the box "I have an existing account." Select Register and sign into VMS with the Microsoft account.

Without an existing personal/business Microsoft account, do not check the box "I have an existing account." Select Register to be taken to Microsoft's sign-up page. Sign up. Then, use the Microsoft account to sign into VMS.









### Access the VMS (continued)

#### **4** Accept VMS Terms and Conditions

Review and accept VMS privacy policy.

**NOTE**: If the user reviews and denies receipt of the Terms and Conditions, the user will return to the login page. Users cannot enter VMS without accepting the terms and conditions of VMS use.

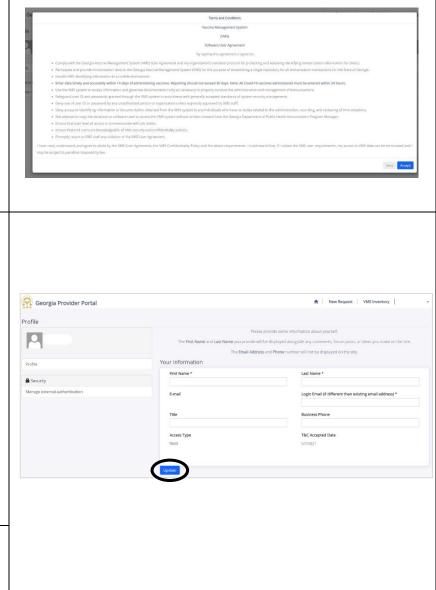
## **5** Navigated to Provider Portal Profile

#### Page

Ensure the email address is added to the required login email address field if the email is different from the existing email listed in VMS.

**NOTE:** If users were not sent an invitation code to their Microsoft email address, it is important to enter their Microsoft email address to the required field.

#### **6** Select Update to Enter VMS





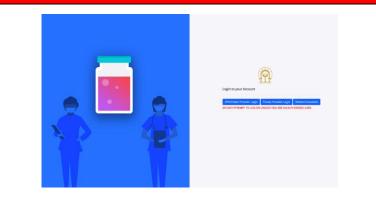
### **Provider Portal**

### **Updating Provider Contact Information**

#### **1** Access VMS using Microsoft

#### credentials

Access VMS using the personal/business Microsoft account from the initial login.



#### **2** Select the Location

#### **3** Locate Location/Summary

#### Page

On this page there are the primary and back-up coordinator's names and contacts. This information is not editable. You can click the email address to send an email.

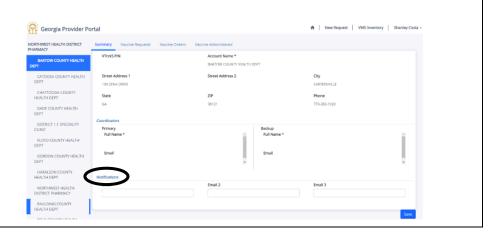
👰 Georgia Provider Po	ortal		♠   New Request   VMS Inventory   Shanley Cost
NORTHWEST HEALTH DISTRICT PHARMACY	Summary Vaccine Requests Vaccine Orders	Vaccine Administered	
BARTOW COUNTY HEALTH DEPT	VTrckS PIN	Account Name * BARTOW COUNTY HEALTH DEPT	
CATOOSA COUNTY HEALTH DEPT	Street Address 1 100 ZENA DRIVE	Street Address 2	City
CHATTOOGA COUNTY HEALTH DEPT	State	ZIP	Phone
DADE COUNTY HEALTH DEPT	GA	30121	770-382-1920
DISTRICT 1.1 SPECIALITY	Coordinators		
CLINIC FLOYD COUNTY HEALTH DEPT	Primary Full Name *	Backup - Full Name * Email	
GORDON COUNTY HEALTH DEPT	Email	Email	
HARALSON COUNTY HEALTH DEPT	Notifications		
NORTHWEST HEALTH DISTRICT PHARMACY	Email	Email 2	Email 3
PAULDING COUNTY HEALTH DEPT			Save
DOLY COUNTY OF UT			Sare

#### **4** Locate the "Notifications"

#### section

Users can input 3 additional email addresses for individuals who need notifications for the respective location.







### **COVID Providers – VMS**

View & Manage VMS U	sers	
<b>1</b> Select the District on the top left sidebar	Second a Provider Portal       Mew Request       VMS Inventory       Rachel Sullivan -         Morlock Organization       Summary       Vaccine Requests       Invitations       Users       Vaccine Administered         Make Believe Pediatrics       Account Name *       Morlock Organization       Morlock Organization       Morlock Organization         Morlock Location 1       Morlock Location 3       Morlock Location 3       Morlock December 3       Morlock December 3	
<b>2</b> select "Users" at the top All users and type of access for the user will be displayed. Users are contacts who are associated with your organization. They have not necessarily been invited to the portal. These contacts are included in the "Invitations" Tab.	Corriganizazion     Marce Relieve   Pediatrics   Mortock Location 1   Mortock Location 3	
<b>3</b> Select the blue arrow on the right of user's contact line "View/Edit Access Type" User access can be change from Read or Write. Only users with Write access can make edits to the access type.	Ceorgia Provider Portal     Morlock Organization     Summary   Vaccine Requests   Invitations   Users   Vaccine Administered     Make Believe   Pediatrics   Morlock Location 1   Morlock Location 2   Morlock Location 3     Prian     Morlock     Brian     Morlock     Morlock Location 3     Norlock Location 3	/an -
<b>4</b> Select "Invitations" Tab Users are contacts who are associated with your organization. You can click "Create+" to invite users in your district to the portal.	Morrock Organization       Summary       Vaccine Requests       Image: Summary       Vaccine Requests       Vaccine Administered         Make Believe Pediatrics       Contact       First       Last Name       Email       Phone       Access Type       User       Requests       Created By         Morrock Location 1       Morrock Location 2       Rc- 01021       theadamf       Fredrickson       Read       TstBackupAdam       Adam       \$/13/2021         Read       TstBackupAdam       Adam       \$/13/2021       3:57 PM       3:57 PM       3:57 PM	an -



### **Requesting COVID Vaccines**

#### **1** Select a district and/or location

VMS home page displays contact information for pre-assigned district(s) and location(s). Select the district or location to review the contact information. The contact information for the selected location is displayed in the main view.

#### 2 Select "New Request"

Select your organization, and the order page will appear.

# **3** Check if the location has Ultra Cold Storage

**Note:** If the location does **not** have ultra-cold storage checked on the location record, the dosage amounts will not be available for selection.

RTHWEST HEALTH DISTRICT RMACY	Summary Vaccine Requests Vaccine Order	s Vaccine Administered		
BARTOW COUNTY HEALTH	VTrckS PIN	Account Name *		
n		BARTOW COUNTY HEALTH DEPT		
CATOOSA COUNTY HEALTH	Street Address 1	Street Address 2	City	
DEPT	100 ZENA DRIVE		CARTERSVILLE	
CHATTODGA COUNTY HEALTH DEPT	State	ZIP	Phone	
DADE COUNTY HEALTH	GA	30121	770-382-1920	
DISTRICT 1.1 SPECIALITY	Coordinators			
CLINIC	Primary Full Name *	Beckup Full Name *		
FLOYD COUNTY HEALTH DEPT				
GORDON COUNTY HEALTH DEPT	Email	Email .		
HARALSON COUNTY HEALTH DEPT	Notifications			
NORTHWEST HEALTH	Email	Email 2	Email 3	



Vaccine	Requests

Organization					
Morlock Organization	~				
Make Believe Pediatrics					
✓ Location has Ultra Cold Storage □ Location Will Have a Special Event					
Vaccine		Dose 1	Dose 2	То	tal Doses
Johnson and Johnson	Batch Size		· –		-
Moderna COVID19 Vaccine Adult	Batch Size		•	~	-
Moderna COVID19 Vaccine Pediatric	Batch Size		•	•	-
Pfizer	Batch Size		•	*	-
Morlock Location 1					
14 main st, suite 400, tiffin, oh 44883					
Location has Ultra Cold Storage					
Location Will Have a Special Event					
			Save	Submit	Close



### **Requesting COVID Vaccines (continued)**

#### **4** Check if the order is for a Special

#### Event.

Add a description of the special event. A drop-down option will appear to select the "Special Event Batch Size".

**Note:** *Special Event* is only to be used for a unique situation when a provider is hosting a large-scale event. An example is if a provider is offering vaccines at a Braves game, selecting *Special Event* signifies to DPH why the allocation request is so high or why the request should be prioritized. That information is factored into how providers allocate vaccines.

**5** Select the batch size for either the Adult or the Pediatric vaccine type, if available

Batch size options are pre-populated based on the manufacturer. To determine the batch size, refer to the manufacturer's required tray quantity

**Note:** The vaccine included in both are the same, but the supporting accessories will be different. The ancillary kit included with the vaccine will support administration for either an adult or a child.

Organization								
Morlock Organization	~							
Make Believe Pediatrics							1.	
Location has Ultra Cold Storag	e							
Location Will Have a Special Ev								
Description of Special Event								
/accine			Dose 1	D	ose 2	Total Doses		
	Batch Size			-	_			
ohnson and Johnson	Special Event Ba	atch				100		
	Size	attern	100		_			
	Batch Size							
Moderna COVID19 Vaccine Adult	Jutter Size		`		~	100		
Autority of the state of the Autor	Special Event Ba	atch	100	7	~	100		
	Size		100		•			
Moderna COVID19 Vaccine	Batch Size		```	1	~			
Pediatric	Special Event Ba	atch				_		
	Size		`	•][	~			
Docation has Ultra Cold Storag	e			Save	Subm	it Close	•	
Location has Ultra Cold Storag     Vaccine Requests	e		-	Save	Subm	t Close	×	
	e			Save	Subm	it Close		
Vaccine Requests	e	¥	1	Save	Subm	it Close		
Organization Morlock Organization Make Believe Pediatric Location has Ultra C Location Will Have a	<b>S</b> old Storage	•	1	Save			×	
Vaccine Requests Organization Morlock Organization Make Believe Pediatric Location has Ultra C	<b>S</b> old Storage	~	Dose 1	Save	Subm Dose 2	t Close	×	
Vaccine Requests Organization Moriock Organization Make Believe Pediatric Location has Ultra C Location Will Have a	<b>s</b> old Storage Special Event	▼ Batch Size	Dose 1	Save			oses	
Vaccine Requests Organization Morlock Organization Make Believe Pediatric Location has Ultra C Location Will Have a Vaccine	s old Storage Special Event			Save	Dose 2	Total D	oses	
Vaccine Requests Organization Morlock Organization Make Believe Pediatric Contact on the Ultra Contact on the Ultra Contact on Will Have a Vaccine Johnson and Johnson	s old Storage Special Event	Batch Size	100	<b>`</b>	Dose 2	Total D 100	oses	
Vaccine Requests Organization Morlock Organization Make Believe Pediatric Cacation has Ultra C Location Will Have a Vaccine Johnson and Johnson Moderna COVID19 Vacc	s old Storage Special Event Cine Adult Eine Pediatric Eiflin, oh 44883 old Storage	Batch Size Batch Size	100	<b>`</b>	Dose 2	Total D 100	oses	
Vaccine Requests Organization Moriock Organization Make Believe Pediatric Location has Ultra C Location Will Have a Vaccine Johnson and Johnson Moderna COVID19 Vacc Moderna COVID19 Vacc Moriock Location 1 14 main st, suite 400, t Location has Ultra C	s old Storage Special Event Cine Adult Eine Pediatric Eiflin, oh 44883 old Storage	Batch Size Batch Size	100	<b>`</b>	Dose 2	Total D 100		



Dose 1

100

100

Batch Size

Batch Size

Batch Size

Dose 2

Dose 1 Dose 2 Total Doses

Total Doses

100

100

Vaccine Requests

Morlock Organization

Make Believe Pediatrics

Johnson and Johnson

Morlock Location 1

Vaccine

Vaccine

Location Will Have a Special Event

Moderna COVID19 Vaccine Adult

Moderna COVID19 Vaccine Pediatric

14 main st, suite 400, tiffin, oh 44883 Location has Ultra Cold Storage Location Will Have a Special Event

### **Requesting COVID Vaccines (continued)**

#### **6** Save the request

Orders submitted to the Department of Public Health cannot be altered or retrieved and are final. If you are making a request before the submission deadline, it is very important to save vaccine requests **before** submission.

**Note:** One draft vaccine request is allowed per each location.

7			
	Submit	the	request

When a request is saved, the active status will be **Draft**, instead of **Submitted**. The new request can be seen on the **Vaccine Requests** page, with status "draft".

#### To submit a request:

- Select the drop-down arrow next to the request.
- 2. Select edit.
- 3. Select submit.

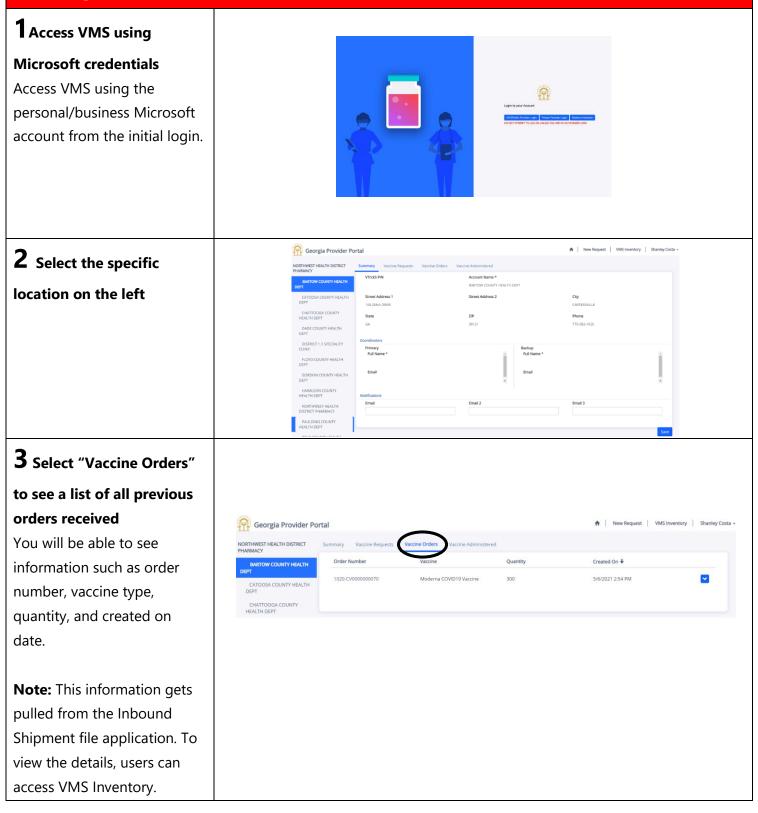
**Note:** The vaccine request must say submitted to confirm submission. Submitted requests can be found on the **Vaccine Order** page in VMS.

		D	atch Cizo				
				1	Save Sub	mit Close	
					-		
Provider I	Portal				A New	Request VMS Inventor	y Rach
on	Summary Vaccine Requests Invitations	Users Vac	ine Administered				
ediatrics	Request ID + Requested		Status	s	ubmitted On Date	Created On 🕹	
on 1 on 2	VR-001117 Rachel Sulli	van	Draft			6/9/2021 11:37 AM	6
nz							
	Vaccine Requests				>	¢	
	Organization					^	
	Morlock Organization	~					
	Make Believe Pediatrics						
	Location has Ultra Cold Storage						
	Location Will Have a Special Event						
	Vaccine		Dose 1	Dose 2	Total Doses		
	Johnson and Johnson	Batch Size	100 🗸	_	100		
	Jonneon and Jonneon				100		
	Moderna COVID19 Vaccine Adult	Batch Size	100 👻		<b>~</b> 100		
	Moderna COVID19 Vaccine Pediatric	Batch Size	~		-		
	Morlock Location 1						
	14 main st, suite 400, tiffin, oh 44883						
	<ul> <li>Location has Ultra Cold Storage</li> <li>Location Will Have a Special Event</li> </ul>						
	Vaccine		Dose 1	Dose 2	Total Doses		
		Datch Ciza			~		
				Save	Submit Close		

9



#### **Viewing Vaccine Orders**



10

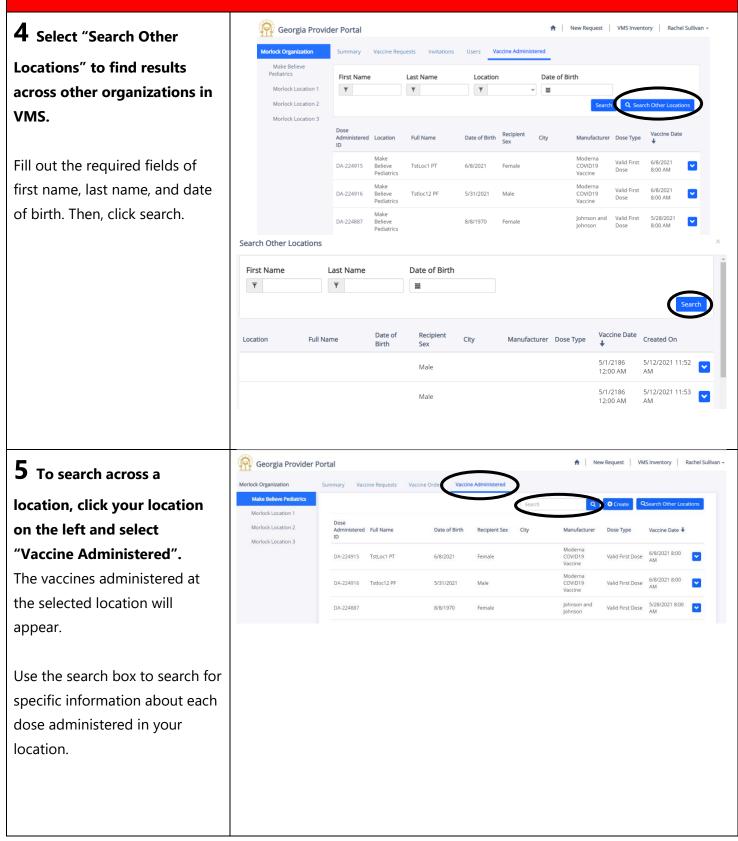


#### **COVID Providers – VMS**

#### **View Administered Vaccine Doses 1** Access VMS using **Microsoft credentials** Access VMS using the personal/business Microsoft account from the initial login. **2** Select the 혂 Georgia Provider Portal ♠ New Request VMS Inventory Rachel Sullivan -Summary Vaccine Requests Invitations Users Vaccine Administered rlock Organ **Organization/District** Make Believe Pediatrics Account Name \* Morlock Organizatio Morlock Location 1 Morlock Location 2 Morlock Location 3 A New Request VMS Inventory Rachel Sullivan -혂 Georgia Provider Portal **3** Select the "Vaccine Morlock Organization Vaccine Requests Invitations Users Vaccine Administered Summary Make Believe Pediatrics Administered" tab. First Name Last Name Location Date of Birth Morlock Location 1 Ŧ Y Ψ. ~ Morlock Location 2 You will able to see information Morlock Location 3 Recipient Sex Vaccine Date Full Name Date of Birth City Manufacturer Dose Type ered Location such as dose administered ID, Admir Moderna COVID19 first and last names, vaccine Valid First 6/8/2021 8:00 AM DA-224915 TstLoc1 PT 6/8/2021 Female ~ Believe Pediatrio Dose Vaccine manufacturer, dose type, Make Moderna COVID19 Valid First 6/8/2021 8:00 AM DA-224916 Tstloc12 PF 5/31/2021 Male ~ Believe Pediatri Dose vaccine date, and created on Make Valid First Dose 5/28/2021 8:00 AM DA-224887 8/8/1970 ~ Female Believe Pediatrics date. To search across your organization, fill out the fields labeled first name, last name, location, and date of birth.



### View Administered Vaccine Doses (continued)



12



#### **COVID Providers – VMS**

### **View Administered Vaccine Doses (continued)**

### **6** Select "Search Other

#### Location"

<b>6</b> Select "Search Other									
Location"	Georgia Provider Po	ortal				🔒   Ne	ew Request   VM	MS Inventory	Rachel Sullivan +
Search across other locations by	Morlock Organization	Summary Vaccine Requests Vac	ine Orders Vacci	ine Administered					
first name, last name, or date of	Make Belleve Pediatrics Morlock Location 1				Search	٩	● Create	Search Other Loc	ations
birth. Click "search" to find the	Morlock Location 2 Morlock Location 3	Dose Administered Full Name ID	Date of Birth	Recipient Sex	City	Manufacturer	Dose Type	Vaccine Date 🕇	
information you entered.		DA-224915 TstLoc1 PT	6/8/2021	Female		Moderna COVID19 Vaccine	Valid First Dose	6/8/2021 8:00 AM	
		DA-224916 Tstloc12 PF	5/31/2021	Male		Moderna COVID19 Vaccine	Valid First Dose	6/8/2021 8:00 AM	
		DA-224887	8/8/1970	Female		Johnson and Johnson	Valid First Dose	5/28/2021 8:00 AM	
<b>7</b> Add Vaccine Administered	Search Other Locat	Last Name Date of The Date of Bird			Manufacturer	Srī, AM Srī, AM Srī, AM Srī, AM	/2186 12:00 5/12/ /2186 12:00 5/12/ /2186 12:00 5/12/	2021 11:52 AM	
	Morlock Organization Make Belleve Pediatrics	Summary Vaccine Requests Vacc	ine Orders Vacci	ine Administered					
Information	Morlock Location 1	Dose			Search	٩	● Create	Search Other Loc	ations
The "+Create" option on the	Morlock Location 2 Morlock Location 3	Administered Full Name ID	Date of Birth	Recipient Sex	City	Manufacturer	Dose Type	Vaccine Date 🕇	
Vaccine Administered page can		DA-224915 TstLoc1 PT	6/8/2021	Female		Moderna COVID19 Vaccine	Valid First Dose	6/8/2021 8:00 AM	
be used to show when the		DA-224916 Tstloc12 PF	5/31/2021	Male		Moderna COVID19 Vaccine	Valid First Dose	6/8/2021 8:00 AM	
vaccine has been administered.		DA-224887	8/8/1970	Female		Johnson and Johnson	Valid First Dose	5/28/2021 8:00 AM	



#### **COVID Providers – VMS**

### View Administered Vaccine Doses (continued)

#### **8** Fill out the required fields

Click "Submit" to have the administered dose appear in VMS.

Note: The information providers load into VMS will immediately update in GRITS. VMS imports a file from GRITS daily overnight that includes doses administered logged in GRITS. VMS will only pull COVID dose administration data.

First Name *		Middle Name		Last Na	me *
DOB *		Ethnicity *		Sex *	
			~		~
Race *		Email		Phone	
	٣				
Address Enter a location					
Address 1		Address 2		City	
Address 1		Address z		City	
County		ZIP		State	
Vaccine *	~	Dose Type * Valid First Dose	~		Serial Number *
Vaccination Date *		Dose Expiry Date			Lot Number *
	-		-		
Administer By *		Dose Route *	*		Vaccination Location *
Manipular Durat ID					Refusal
Vaccination Event ID		Serology	~		No
Vaccination Series Complete		Comorbidity			
vaccination series complete	~	Comorbidity	~		
ministration Location Information		Administered at location: type		Res	ponsible Organization
		Administered at location: type		Res	ponsible Organization
Administered at location		Administered at location: type	~	Res	ponsible Organization
		Administered at location: type	v	Res	sponsible Organization
Administered at location		Administered at location: type	v		ponsible Organization
Administered at location Administration Location Address Enter a location			~		
Administered at location Administration Location Address Enter a location			۲ 		
Administered at location Administration Location Address Enter a location Location Street		Location City	v		
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Administered at location Administration Location Address Enter a location Location Street		Location City	v		ation County
Administered at location Administration Location Address Enter a location Location Street		Location City	•		ation County



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### **Inventory Application**

### **How to Access VMS Inventory Application**

#### **1** Access VMS using Microsoft

#### Credentials

Access VMS using the personal/business Microsoft account from the initial login.



#### **2** Select VMS Inventory from the

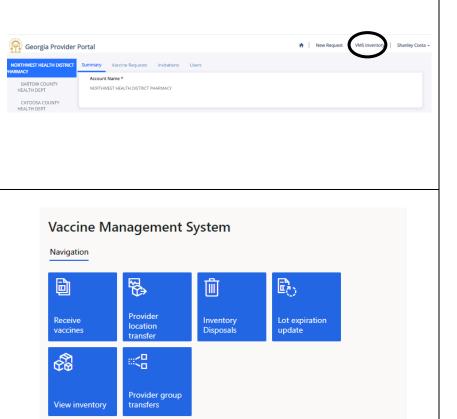
#### top menu bar

From the top menu bar click "VMS Inventory". The Microsoft Credentials used to login to the portal will also be used to access VMS Inventory Application.



#### functions

All COVID Inventory must be handled in VMS. Information previously in GRITS will be migrated into VMS.



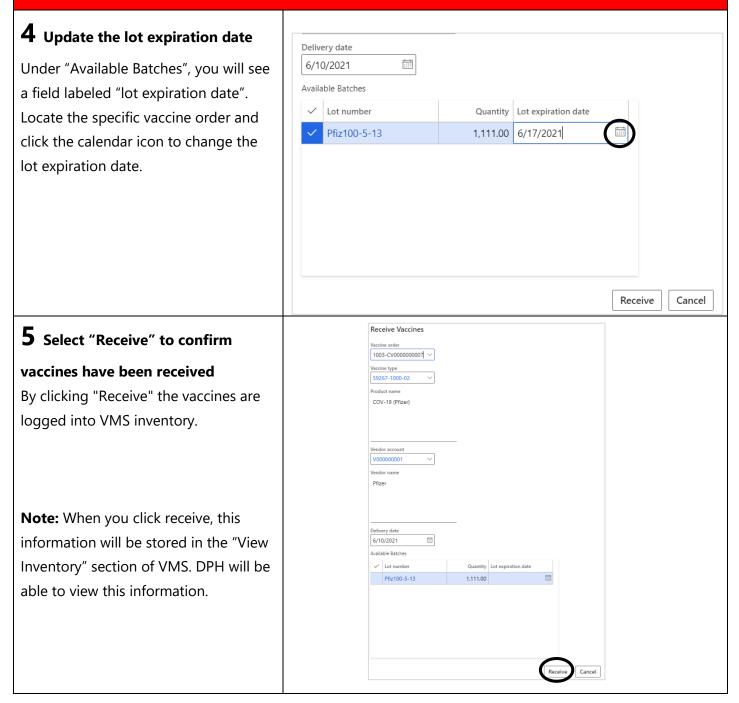


### **Receive Vaccine Doses**

<b>1</b> Select "Receive Vaccines"	Vaccine Management System         Navigation         Receive vaccines       Provider location location         Provider location       Inventory         Disposals       Under location location         View inventory       Provider group transfer
<b>2</b> Input the vaccine order	Receive Vaccines
To input the purchase order, select the	1003-CV000000000
drop-down arrow in the Vaccine Order	Vaccine type 59267-1000-02
field. Then, select the vaccine order for	Product name
the location where vaccines have been	COV-19 (Pfizer)
received.	Vendor account       V00000001       Vendor name       Pfizer
<b>3</b> Once the Vaccine Order number is	Delivery date 6/10/2021 Available Batches
selected, the following will auto-	✓ Lot number Quantity Lot expiration date
populate:	Pfiz100-5-13 1,111.00
Item Number	
Vendor Account	
Delivery Date	
Batch Number – Please be sure	
to add a checkmark here.	Receive



#### **Receive Vaccine Doses (continued)**





### **View Inventory**

<b>1</b> Click "View Inventory" Tile	Vaccine Management System
	Receive vaccines   Provider location transfer   Provider group transfers
${f 2}$ View the inventory on	
<b>hand</b> On the left, there is the option to filter by Item Number, Site, Warehouse, and Batch number.	Finance and Operations       P. Search for a page       1003       0       7       601         Instructions       Intercompany on-hand       Quantity adjustment       Released product details       Dimensions       View       Batch tracking       Inspect       Related information       Options       P       ©       C       ©       C       X         Processitie       Search for a page       Search for a page       Cast a scattor all of C       X       X       X       X         Processitie       Search for a page       Search for a page       View       Batch tracking       Inspect       Related information       Options       P       ©       C       X         Manage may write       Advanced fiber or soil:       G to Y       Manage my write       Manage my write       X
Select "Apply" when ready to filter and see all COVID inventory in your organization.	Control to the field second     Control to the field second se
Columns to know:	Apply Rest
<b>On-hand inventory</b> is the doses quantity on-hand at all locations. <b>Inbound orders</b> is the total to be received for open orders. <b>On order</b> is open transfers or disposals that have not been completed. <b>Total available</b> is the available quantity in all	
doses.	



Dimensions display
PRODUCT DIMENSIONS License plate

Size

Color

Style

Provider location

Shelf/Bin

Save setup No

Configuration Inventory status

STORAGE DIMENSIONS Owner

TRACKING DIMENSIONS

Batch number

Serial number

🗸 ltem numbe

Closed transact

Quantity <> 0

### View Inventory (continued)

Inventory quantities

#### **3** Select 'Dimension' to

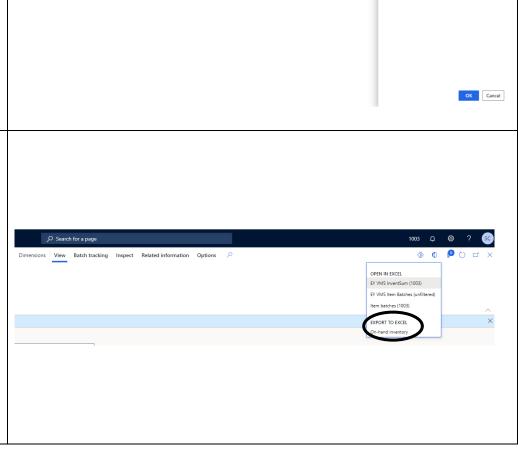
## customize viewable options

For example, select "Warehouse", "Batch number" and "Item number" checkboxes and click "OK" button to view inventory for a specific location with lot

#### **4** Export to excel

numbers.

To export the Inventory data selected and displayed in this screen to Excel, use the "Open in Microsoft Office" button at top, right side of page. Click the "Open in Microsoft Office" icon, Under "Export to Excel", select "Onhand inventory". Then, select "Download" for a copy on your desktop.





#### **Transfer Inventory Inside Organization 1** Click the "Provider Vaccine Management System Location Transfer" Tile Navigation B 回 廁 Receive vaccine Lot expiration update **E** Provider group transfers View inventory **2** Transfer inventory Create new transfer Vaccine type Create a new transfer by I $\sim$ Product name selecting the vaccine type from the drop-down. From provide Select the required fields $\sim$ "from provider", "to To provider $\sim$ provider", "lot number", Lot numbe and fill out the "quantity". $\sim$ Quantity 0 **3** Post Transfer Post transfer once finalized or click cancel. Post Transfer Cancel



Transfer Inventory from	m Organization to Organization
<b>1</b> Click the "Provider Group Transfer" Tile	Vaccine Management System         Navigation         Image: Second Colspan="2">Image: Second Colspan="2" Image: Second
2 Fill Out Date	Create provider transfer         Torr more many         FOR MODEL         Note         Decores         Many         Many <tr< th=""></tr<>
<ul> <li><b>3</b> Search provider group by name.</li> <li>Click drop down arrow under "Provider Group."</li> <li>Click drop down arrow under "Name", and enter search value. Click "Apply."</li> <li>Select desired provider group.</li> </ul>	Create provider group transfer order         Transfer order number         Date         Dote         S/14/2021         FROM PROVIDER         Provider group Address         Name       4         j Sort A to Z       2         Name       4         begins with ×       4         j       5         Apply       Clear         j       Available qu V       Transfer quantity       Vaccine name



### **Transfer Inventory from Organization to Organization (continued)**

<b>4</b> Go to "From provider"	
<ul> <li>Select "Provider group", and enter your organization's VMS Organization ID.</li> <li>Select "Provider location", when provider group is entered, this will filter only the locations for the selected provider.</li> </ul>	Post transfer         Tarsfer order number         Determine         Common Determine         Address         Location         Address         Location         Vectine name       Available qu To Transfer quantity lot number         Vectine name       Available qu To Transfer quantity lot number         Vectine name       Available qu To Transfer quantity lot number         Vectine name       Vectine three.         We iden't find anything to show here.       To stransfer
<ul> <li>5 Go to "To provider"</li> <li>Select "Provider group", and enter their VMS Organization ID.</li> <li>Select "Provider location", when provider group is entered, this will filter only the locations for the selected provider.</li> </ul>	



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### Transfer Inventory from Organization to Organization (continued)

## **6** Select Lot Numbers to transfer

Once the Provider group and location are selected, lots and quantities available for transfer will be populated in the Transfer line grid. For each Lot number to be transferred select "Transfer quantity".

#### Create provider transfer

FROM PROVIDER					
TO PROVIDER  Location					
Location Address					
Location					
Vaccine name	Available qu 🍸 Transf	ier quantity Lot num	ber Va	accine type ↑	
	We didn't find a	nything to show here.			
				Post transf	fer Cance

### **7** Post Transfer

"From provider" inventory is decreased and VMS prepares a vaccine transfer order that can be received at the receiving location.



### **Inventory Disposals**

<b>1</b> Click "Inventory Disposals" If vaccines are un-used, defective, or broken, vaccines should be logged as disposals to accurately reflect inventory counts.	Vaccine Management System     Navigation     Receive   vaccines     Provider   location   transfer     View inventory     Provider group   transfers
2 Create a new inventory disposal Select the inventory to dispose from the drop-down menu under "Vaccine Type/NDC". 3 Fill out provider location, Lot Number, Quantity, and Reason Code	? Create new inventory disposal Vaccine name Vaccine type Vaccine location Community Quantity O Reason code
<b>4</b> Select "Post Disposal" to finalize The Action Center will show the posted vaccines for disposal and users should expect immediate update.	Post Disposal Cancel



### Lot Expiration Update

### **1** Click the "Lot Expiration

#### Update" tile

This tile will be used to update the lot expiration date if you did not update the date when you received the vaccine order.

## **2** Select the Vaccine Type and Lot Number

Select from the drop down of vaccines. This will populate the Vaccine name. Then, select the lot you number you need to change.

<u>D</u>	<b>₽</b>	Ŵ	B
Receive vaccines	Provider location transfer	Inventory Disposals	Lot expiration update
Ê	:::< <mark>0</mark>		$\smile$
View inventory	Provider group transfers		

Vaccine Management Syste

		?	
Lot expiration update			
Vaccine type			
· · ·			
Vaccine name			
Lot number			
$\checkmark$			
Expiration date			
	Update	Cancel	



### Lot Expiration Update (continued)

# **3** Change the expiration date and click "update"

A calendar view will appear. You can select the correct expiration date and click "update" to finalize. Example: June 17, 2021

<	J	un `	• 2	2021	~	>
Su	Мо	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			
Clea	ır To	oday				
					Up	date



### **Helpful Reminders**

#### **VMS Summary**

**Vaccine Management System (VMS) is a secure solution** for COVID vaccine management for the State of Georgia in one central platform. VMS provides a flexible approach for managing, delivering, and administering vaccines. It will allow GA to streamline providers' process for the entire vaccine lifecycle. VMS will provide an efficient and effective method to replace the current COVID process.

### **VMS Support**

Questions on the system and its functionality or issues should be directed to the Provider Support Call Center at: Phone - 888-920-0165 Email - DPH-COVID19vaccine@dph.ga.gov