FAQ for Registry Consent and Electronic Affirmation webinar given on
February 8 and 12, 2021

Resources

ImmTrac2 Forms & Documents Page:
https://www.dshs.texas.gov/immunize/immtrac/forms.shtm

ImmTrac Training Page:
https://www.dshs.texas.gov/immunize/immtrac/User-Training/

ImmTrac2 website:
https://immtrac.dshs.texas.gov/TXPRD/portalInfoManager.do

ImmTrac2 User, Access, Registration and Renewal Support:
ImmTrac2@dshs.texas.gov

Data Exchange and Promoting Interoperability Support:
ImmTracMU@dshs.texas.gov

Questions

Q:If a Bidirectional Data Exchangequery is sent and no records are returned, is it safe to assume no ImmTrac2 Consent is on file?

A: Queries return information based upon several patient demographics in which accurateness of those demographics is required to return a better or stronger registry client match based on ImmTrac2.

Q:If an organization sends registry consent via HL7 in PD1-12, is that sent with every message? If so, and the practice didn't know the patient revoked registry consent, how will PD1-12 be interpreted since it would still have the last known consent status?

A: If an organization will be sending registry consent via PD1-12, then registry consent should only be sent when the patient has signed a registry consent form. When registry consent is not captured or assessed by the organization, then PD1-12 should contain consent to share values of Y, N or blank.

Q:Is there a delimiter to be used for the affirmation flat file?

A: Delimited files are no longer accepted by the registry since April 2017. The affirmation flat file is a text-width file which we still process and accept. The specifications for Affirmation of Registry Consent (E11-12415) via flat file is available on the DSHS website.

Q: If organizations establish a data exchange connection and patients are not affirmed with registry consent will they be rejected by the registry?

A: Affirmation files and data tells the registry that it is okay to create and store a patient's data and immunization in the registry. If a patient has registry consent affirmation on file at the time an immunization is sent, the data will be stored in the registry. If a patient does not have registry consent affirmation on file at the time an immunization is sent, the data will not be stored in the registry.

Q: If organizations enter consent manually, can an immunization be entered the same day?

A: Yes. Providers who are manually adding patients as registry clients in the ImmTrac2 online application should also add the patient's immunization history at the same time.

Q: Is there an option to use Bidirectional data exchange (BiDX) with an affirmation file instead of PD1-12 for EHRs that can't support PD1-12 affirmation for HL7?

A: Organizations may submit affirmation of registry consent through a separate bidirectional interface using the Affirmation of Registry Consent flat file standards. The affirmation of registry consent must be sent prior to the VXU messages.

Q: If an organization has multiple sites and consent is captured at a different site than the vaccine administering site, how do we send in vaccinations?

A: Organizations will utilize their existing data exchange account to report affirmation of registry consent as they do their immunization data. The method of how the organization will report affirmation of registry consent is either HL7 PD1-12 or flat file format. Either format has the ability for capturing the specific site location of where the registry consent was obtained to report that information accurately. Depending on the method for reporting registry consent, the organization will report affirmation along with immunization data if utilizing HL7 PD1-12 or affirmation of registry consent prior to the immunization if utilizing the flat file format.

Q:Can an organization use the same affirmation of registry consent for COVID immunization and flu immunizations?

A: The registry has two separate affirmation of registry consents: disaster registry consent and standard immunization registry consent. Patients must provide both forms of affirmation of registry consent for all immunizations to be stored in the registry for the patient's lifetime. Disaster consent does not apply to non-disaster immunizations.

Q:Is it possible for an organization to skip the mother's first name for adult patients on the new client registration when using the pandemic emergency registry consent waiver?

A: Yes, the mother's first name and maiden name fields can be skipped on the Disaster Information Retention Consent Form as these are no longer required fields in the

ImmTrac2 system. Do note that this information does help with client matching for patient and immunization reporting, so if the data is able to be captured then please do so.

Q:If a client has provided ImmTrac2 standard affirmation of registry consent and wishes to add disaster affirmation of registry consent, what steps does our organization need to take?

A: If the patient is filling out the registry consent forms for the first time and want to have their regular immunizations (non-disaster) and disaster related immunizations stored in the registry, the patient must fill out both the Minor/Adult (depending on age of the patient) Consent Form and the Disaster Information Retention Consent Form. If the patient is already an existing registry client, either minor/adult or disaster unconsented, then they must fill out the missing registry consent form and clinical/provider staff must add the new consent to the registry. Please review the **Online Disaster Reporting** video on the [DSHS website](#) for more detailed steps and guidance.

Q:If our organization enters patients manually, is affirmation needed?

A: Organizations entering patient and immunization information manually must only do so for patients who have signed an ImmTrac2 Registry Consent Form. During manual entry, patients with existing registry consent will populate during the client search.

Q: How does an organization send registry consent electronically?

A: Registry consent is sent to the registry through a process known as an affirmation of registry consent. An affirmation of registry consent can be done electronically by sending affirmation messages via data exchange. There are two types of affirmation messages:

- Affirmation via flat files – plain text formatted in a file, captures bare minimum of data. Refer to the **Electronic Standards for Affirmation of Registry Consent**.
- Affirmation via HL7 – robust data formatted in HL7, capture more data on the patient. Refer to the **Affirmation of Registry Consent via Health Level Seven**.

These resources are available on our DSHS website under Forms & Documents.

Q: How does an organization know if a patient has registry consent?

A: The registry provides a response data exchange file called the Consent Notification File (CNF) for all data exchange records reported by an organization that were error free. The CNF is in the receive folder of your FTP account. The CNF lists each patient's current registry consent status. For more information about reviewing CNFs, please check the **Electronic Data Exchange Resource Guide**, available on our DSHS ImmTrac2 website under Forms & Documents.

For providers not doing data exchange, you must use ImmTrac2 to perform a Smart Search to identify if the patient is an ImmTrac2 client.

Q:Do schools need to get registry consent?

A: Schools are a great place to collect and report registry consent, especially for students who turn 18. Once a person turns 18, their records become unavailable to view in ImmTrac2. Collecting and reporting adult registry consent for 18-year-old students will make their records visible again. It is not mandatory to collect registry consent to view records in ImmTrac2, but it is highly recommended for students of all ages. Schools see their students far more frequently than their doctors do. If a school gives immunizations, it is also important to collect registry consent to ensure that those records can be stored in ImmTrac2.