

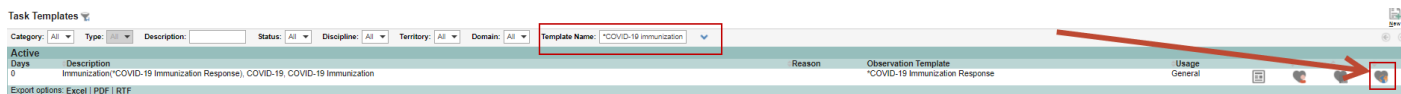
Quick Reference Guide

Medical Exemptions Med Access EMR

To access the **COVID-19 Immunization** template, Step 1 must be completed by a Medical Office Administrator or Physician with 'admin rights'. If Step 1 has already been completed, please proceed to Step 2.

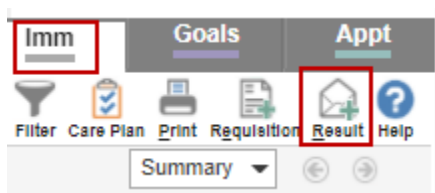
Step 1

- From the main EMR screen, select the **Templates** icon.
- Select the **Task** tab.
- In the 'Template Name' field, select **COVID-19 Immunization**. Click **Enter**.
- The task template will display.
- Select the last **Heart** icon. This will ensure all users at your site can now use this template. Once selected, the heart will display pink.



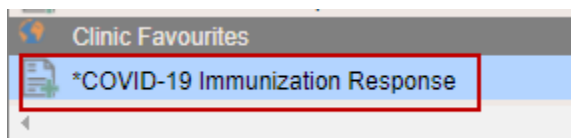
Step 2

- Open the patient's chart.
- Select the **IMM** tab and right-click on the **Results** icon.



Step 3

- Scroll to **Clinic Favourites**.
- Select **COVID-19 Immunization Response**.



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Step 4

- The immunization task will display on your screen.
- In the 'Please indicate you are recording this vaccination for one of the following provinces' section, select **NL**.
- In the 'I am documenting an exemption as per the above' section, select **Yes**.
- Select the appropriate exemption criteria for your patient (i.e., #1, #2 or #3). Please note: do not select #4 for a medical exemption.
- Two exemption letters will display on the bottom of the screen: 'MCP Patients' and 'Non MCP Patients'.
- Select the appropriate medical exemption letter.
 - **Print** the letter.
 - Complete all required fields on the letter.
 - Present completed letter to your patient.
- On the 'Task' screen, select **Complete this task** and **Save**. **This is a required step for when we transition from the exemption letter to the distribution of QR codes for medical exemptions.**
- Please note: if you want to save a copy of the signed letter to the patient's chart, please scan and upload a copy.

Task

Category* Immunization Type

Description Reason

Note / Instructions
Enter new note/instructions here

Progress Indicators

Workflow Actions
Assign to clerical

Assignee* Melindy, Fred Start 08-Dec-2021 Due* 08-Dec-2021

Urgency Normal Recurrence None

Update or Forward Complete this task Save Preview

Fred Melindy

BARB TEST
12 Storybook Lane
Waternook, NL, A6A 2R4
(709) 809-5678

PHN: Cheryl
DOB: 13-Mar-1994 Age: 27 yrs
Gender: F
Provider: Nancy Dillon

Category: Immunization
Type:

Observations

Ordering Provider Melindy, Fred Service Provider

Date 08-Dec-2021 Time 09:26 AM Send

COVID-19 Immunization Response

*Please indicate if you are recording this vaccination for one of the following provinces

Yes No SK Other

The Government of NL requires two Health Canada Approved vaccinations to consider a citizen fully vaccinated, with exemptions to this noted below.

1. Severe allergic reaction or anaphylaxis after a previous dose of an mRNA vaccine that cannot be mitigated (for example offering a viral vector vaccine).
2. Severe allergic reaction or anaphylaxis to any of the components (including polyethylene glycol [PEG], tromethamine, and polysorbates) of the vaccine that cannot be mitigated (for example offering a viral vector vaccine).
3. A diagnosed episode of myocarditis or pericarditis after receiving a dose of mRNA vaccine.
4. The individual has previously received one or two non-Health Canada approved vaccines and one Health Canada approved mRNA COVID vaccine.

In NL, individuals who have received one or two doses of any vaccine not authorized by Health Canada can be considered fully vaccinated after receiving one other additional dose of a Health Canada approved mRNA vaccine.

PLEASE INDICATE BELOW IF YOU ARE DOCUMENTING AN EXEMPTION.

I am documenting an exemption as per the above Yes No

*Please select the appropriate exemption criteria

1. Severe allergic reaction or anaphylaxis after a previous dose of an mRNA vaccine that cannot be mitigated (for example offering a viral vector vaccine).

2. Severe allergic reaction or anaphylaxis to any of the components (including polyethylene glycol [PEG], tromethamine, and polysorbates) of the vaccine that cannot be mitigated (for example offering a viral vector vaccine).

3. A diagnosed episode of myocarditis or pericarditis after receiving a dose of mRNA vaccine.

4. The individual has previously received one or two non-Health Canada approved vaccines and one Health Canada approved mRNA COVID vaccine.

Medical MCP Patients Exemption Letter

Non MCP Patients