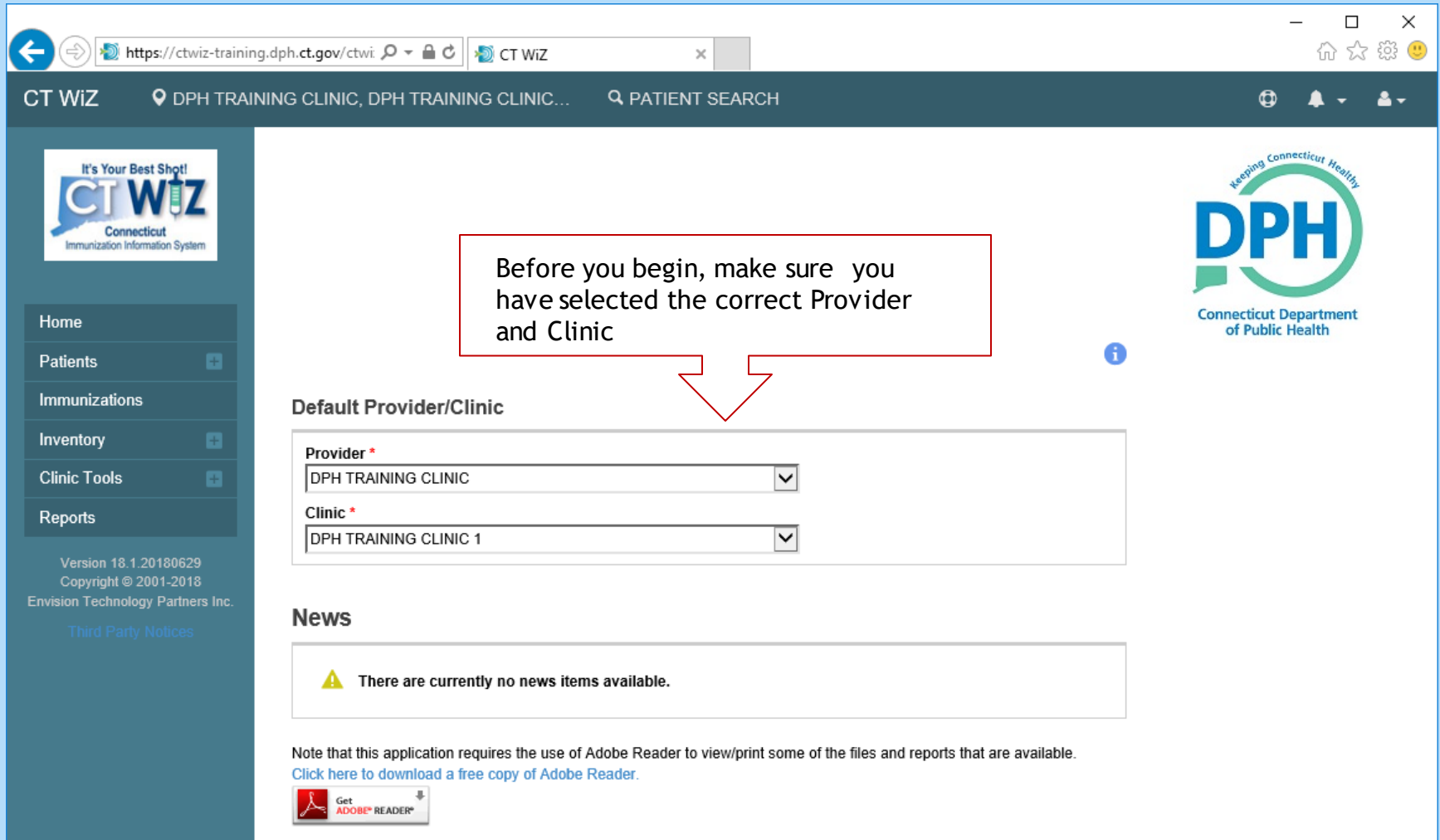




How do I search for, view and modify a patient record?

Home Screen - Searching for a Patient



The screenshot shows the CT WIZ web application interface. At the top is a navigation bar with the CT WIZ logo, a location pin icon, the text "DPH TRAINING CLINIC, DPH TRAINING CLINIC...", a magnifying glass icon, and the text "PATIENT SEARCH". Below the navigation bar is a sidebar with a menu containing "Home", "Patients", "Immunizations", "Inventory", "Clinic Tools", and "Reports". The main content area features a large red-bordered box with the text "Before you begin, make sure you have selected the correct Provider and Clinic" and a red arrow pointing down to the "Default Provider/Clinic" section. This section contains two dropdown menus: "Provider *" with "DPH TRAINING CLINIC" selected, and "Clinic *" with "DPH TRAINING CLINIC 1" selected. Below this is a "News" section with a yellow warning icon and the text "There are currently no news items available." At the bottom, there is a note about Adobe Reader and a "Get ADOBE® READER" button.

CT WIZ DPH TRAINING CLINIC, DPH TRAINING CLINIC... PATIENT SEARCH

It's Your Best Shot!
CT WIZ
Connecticut
Immunization Information System

Home
Patients +
Immunizations
Inventory +
Clinic Tools +
Reports

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Before you begin, make sure you have selected the correct Provider and Clinic

Default Provider/Clinic

Provider *
DPH TRAINING CLINIC

Clinic *
DPH TRAINING CLINIC 1

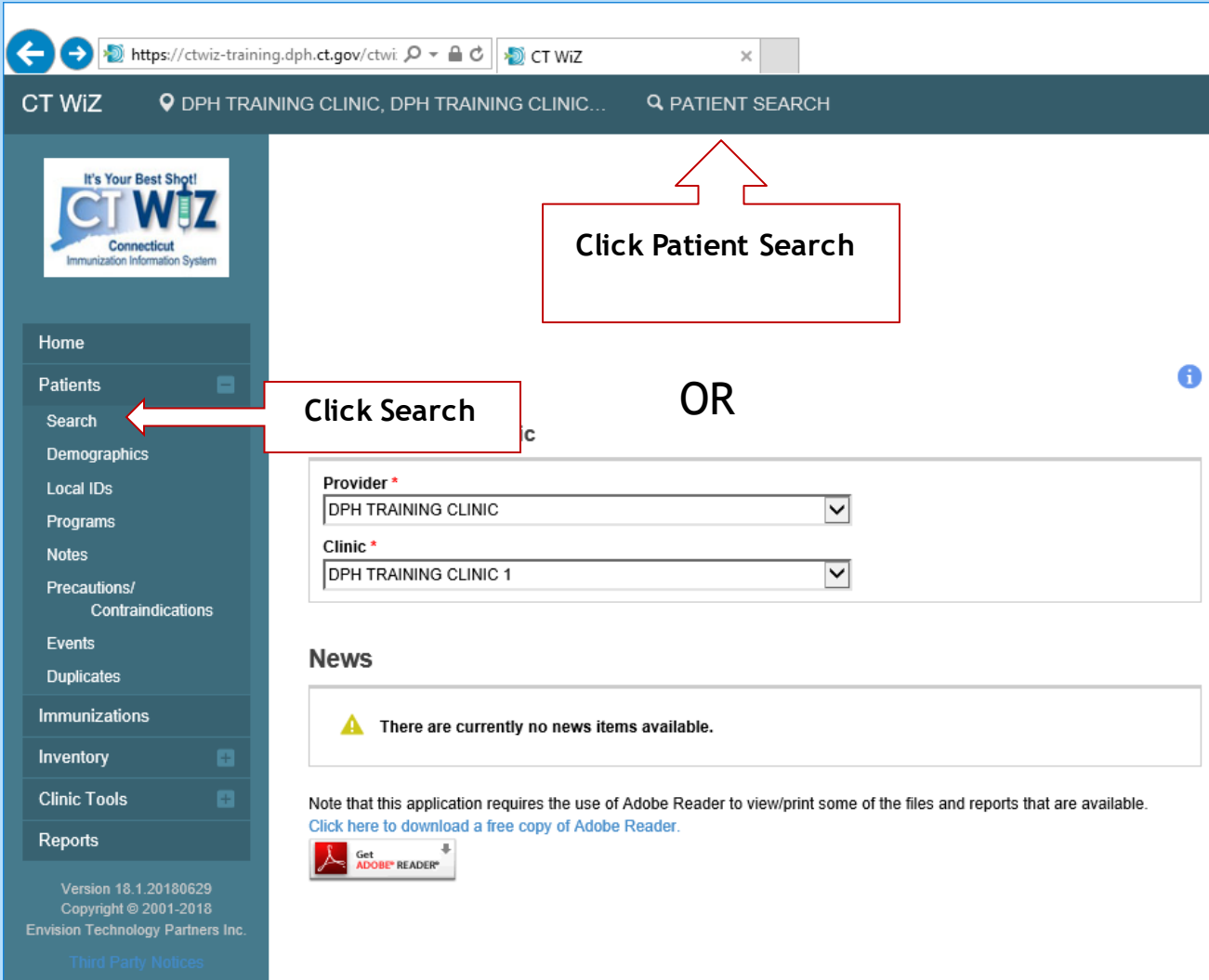
News

⚠ There are currently no news items available.

Note that this application requires the use of Adobe Reader to view/print some of the files and reports that are available.
[Click here to download a free copy of Adobe Reader.](#)

Get ADOBE® READER

Start by searching for the patient



The screenshot shows the CT WIZ Patient Search interface. The browser address bar displays <https://ctwiz-training.dph.ct.gov/ctwiz>. The page header includes the CT WIZ logo, a location pin icon, and the text "DPH TRAINING CLINIC, DPH TRAINING CLINIC...". A search bar labeled "PATIENT SEARCH" is located in the top right corner. The left sidebar contains a menu with the following items: Home, Patients, Search, Demographics, Local IDs, Programs, Notes, Precautions/Contraindications, Events, Duplicates, Immunizations, Inventory, Clinic Tools, and Reports. The "Search" item is highlighted with a red arrow pointing to it, and a red box labeled "Click Search" is placed over the "Search" text. The "Patients" item is also highlighted with a red arrow pointing to it, and a red box labeled "Click Patient Search" is placed over the "Patients" text. The main content area displays a search form with two dropdown menus: "Provider" (selected: DPH TRAINING CLINIC) and "Clinic" (selected: DPH TRAINING CLINIC 1). Below the search form is a "News" section with a yellow warning icon and the text "There are currently no news items available." At the bottom of the page, there is a note stating: "Note that this application requires the use of Adobe Reader to view/print some of the files and reports that are available. [Click here to download a free copy of Adobe Reader.](#)" followed by a "Get ADOBE READER" button.

To get to the Search screen, click in one of the places shown here.

Conducting a Search

CT WIZ DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777 PATIENT SEARCH

It's Your Best Shot!
CT WIZ
Connecticut
Immunization Information System

Home
Patients
Search
Demographics
Local IDs
Programs
Notes
Precautions/
Contraindications
Events
Duplicates
Immunizations
Inventory
Clinic Tools
Reports

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Patient Search ?

Links

Search Criteria

Patient ID	Identifier Type	Identifier Value	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Last Name	First Name	Middle Name	DOB
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			Gender
			<input type="text"/>

Previous Criteria Clear Search

Info: To minimize the creation of duplicates and aid in the identification of existing duplicates, please initially search for your patient using the first two letters of the first and last name and the date of birth. If a duplicate is found, please notify the helpdesk.

Once you are on the Patient Search screen:

- Enter your search criteria
- Click on the Search button to find any matching patients

Possible search criteria:

- First 2 letters of first and last names (John Smith = Jo & Sm)
- Patient date of birth
- Other identifier (see Identifier Type drop down)
- Patient ID

You should perform searches a few different ways to find the patient. Using less characters will give you a larger result, which could be helpful if the patient has a hyphenated last name or a misspelling. You want to make sure you thoroughly search for patients to avoid creating duplicate patients.

Patient Search-No Results

CT WIZ

📍 DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777 🔍 PATIENT SEARCH



Home

Patients

Search

Demographics

Local IDs

Programs

Contacts

Notes

Precautions/
Contraindications

Events

Exemptions

Duplicates

Immunizations

Education

IZ Quick Add

Patient Search [Learn More](#)

🔗 Links ▾

Search Criteria

Patient ID	Identifier Type	Identifier Value			
<input type="text"/>	<input type="text"/>	<input type="text"/>			
Last Name	First Name	Middle Name	DOB	Gender	
<input type="text" value="KI"/>	<input type="text" value="TO"/>	<input type="text"/>	<input type="text" value="01/01/2020"/>	<input type="text"/>	
<input type="button" value="Previous Criteria"/>			<input type="button" value="Clear"/>	<input type="button" value="Search"/>	

Search Results - 0 record(s)



There are no patients that match your search criteria.

You may add a new patient by clicking the 'New Patient' button.

Add a New Patient

CT WIZ

DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777

PATIENT SEARCH



Home

Patients

Search

Demographics

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Contraindications

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Immunizations

Education

IZ Quick Add


Patient Search [Learn More](#)

Links

Search Criteria

Patient ID	Identifier Type	Identifier Value		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Last Name	First Name	Middle Name	DOB	Gender
<input type="text" value="KI"/>	<input type="text" value="TO"/>	<input type="text"/>	<input type="text" value="01/01/2020"/>	<input type="text"/>
<input type="button" value="Previous Criteria"/>			<input type="button" value="Clear"/>	<input type="button" value="Search"/>

Search Results - 0 record(s)


 There are no patients that match your search criteria.

You may add a new patient by clicking the 'New Patient' button.

Click here to add
a new patient

Creating a New Patient

CT WIZ
DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777
PATIENT SEARCH



Home
Patients
Search
Demographics
Local IDs
Programs
Contacts
Notes
Precautions/Contraindications
Events
Exemptions
Duplicates
Immunizations
Education

Patients New

Click "Create" to create a new patient.

Add

Last Name *	First Name *	Middle Name	Generation
KITTEN	TOM		▼
DOB *	Gender *		
01/01/2020	MALE		
Mother Maiden	Mother First		
GATO	TOMASINA		


Create

1. Enter patient data.
2. Click on create

*Remember: * = required*

Adding Patient Demographics

CT WiZ
DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777
PATIENT SEARCH



KITTEN, TOM
ID: 896225
DOB: 01/01/2020
AGE: 0Y 4M 12D
GENDER: M

Patient Demographics
Learn More
Cancel
Links
Update

Edit

Patient Info | Primary Contact | Alias | Health Ins | Contact Info | Address | Race/Ethnicity | Birth Info

Patient Information

Last Name *
First Name *
Middle Name
Generation

KITTEN
TOM

Gender *
DOB *
Birth Time

MALE
01/01/2020
HH:MM AM/PM (HH:MM A/P)

Patient Eligibility *

Language
English Speaking?
Interpreter Needed?

History of Varicella
Date of Varicella

NO HISTORY OF VARICELLA
MM/DD/YYYY

Primary Contact

Relationship Type
Last Name
First Name
Middle Name
Generation

Alias


1. Enter patient demographic data
2. Click **update** to save.

*Remember: * = required*



Viewing a patient record

View a Patient Record



- Home
- Patients
- Search
- Demographics
- Local IDs
- Programs
- Notes
- Precautions/
Contraindications
- Events
- Duplicates
- Immunizations
- Inventory
- Clinic Tools
- Reports

CT WIZ DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777 PATIENT SEARCH

Patient Search

Search Criteria

Patient ID Identifier Type Identifier Value

Last Name First Name Middle Name DOB Gender

PETER RABBIT MM/DD/YYYY

Previous Criteria Clear Search

Search Results - 1 record(s)

ID	Name	Gender	DOB	Action
850427	RABBIT, PETER 25 MAIN STREET NIANTIC, CT 06357	M	12/01/2016	Demographics

You may add a new patient by clicking the 'New Patient' button

Patient Preview

RABBIT, PETER

ID: 850427 DOB: 12/01/2016 Gender: M

Patient Eligibility: VFC Eligible - Medicaid/Medicaid Managed Care

Mailing Address: 25 MAIN STREET NIANTIC, CT 06357

Physical Address: 25 MAIN STREET NIANTIC, CT 06357

Primary Contact: JOSEPHINE RABBIT

Mother's Name: RABBIT

Clinic: DPH TRAINING CLINIC 1

Clinic Status: ACTIVE AS OF 07/30/2018

Jurisdiction Status: ACTIVE

Hover over the patient to see a Patient Preview, Double click to view the patient's demographics, or Click on the Demographics button.



[Home](#)
[Patients](#)
[Search](#)
[Demographics](#)
[Local IDs](#)
[Programs](#)
[Notes](#)
[Precautions/Contraindications](#)
[Events](#)
[Duplicates](#)
[Immunizations](#)
[Inventory](#)
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[Reports](#)

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CT WIZ

DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777

PATIENT SEARCH

Patient Search

Links

Search Criteria

Patient ID
Identifier Type
Identifier Value

Last Name
First Name
Middle Name
DOB
Gender

RABBIT
PETER
MM/DD/YYYY

Previous Criteria
Clear
Search

Search Results - 1 record(s)

ID	Name	Gender	DOB	Action
850427	RABBIT, PETER 25 MAIN STREET NIANTIC, CT 06357	M	12/01/2016	? Demographics

You may add a new patient by clicking the 'New Patient' button.

Demographics
Immunizations
Duplicates
Events
Local IDs
Notes
Outreach
Precautions / Contraindications
Programs

Click Action drop down to access specific sections of the patient record

Patient Demographics Screen

CT WIZ DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777 PATIENT SEARCH

RABBIT, PETER ID: 850427 DOB: 12/01/2016 AGE: 1Y 7M 29D GENDER: M

Patient Demographics ? i

Cancel Links Update

Edit

Patient Info | Primary Contact | Alias | Health Ins | Contact Info | Address | Race/Ethnicity | Birth Info

Patient Information

Last Name * First Name * Middle Name Generation
RABBIT PETER

Gender * DOB * Birth Time
MALE 12/01/2016 HH:MM AM/PM (HH:MM A/P)

Patient Eligibility *
(V02) VFC ELIGIBLE - MEDICAID/MEDICAID MANAGED CARE

Language
ENGLISH English Speaking? ☐ Interpreter Needed? ☐

History of Varicella Date of Varicella
NO HISTORY OF VARICELLA MM/DD/YYYY

Primary Contact

Relationship Type * Last Name * First Name * Middle Name Generation
MOTHER RABBIT JOSEPHINE

Alias

Last Name First Name Middle Name Generation

Sources of Health Insurance

Health Insurance Source (identify up to three)	Insurance ID or Number	Date Last Verified	Primary?
MEDICAID		MM/DD/YYYY	<input checked="" type="checkbox"/>
		MM/DD/YYYY	<input type="checkbox"/>
		MM/DD/YYYY	<input type="checkbox"/>

Contact Information

Home Phone Cell Phone Work Phone
999-999-9999 999-999-9999 999-999-9999 ext:

E-mail


Address is Unavailable or Temporary ☐ Do Not Include Patient in Reminder/Recall ☐

Mailing Address

This section includes:

- Patient Information
- Primary Contact
- Source of Health Insurance

Click Update button if any changes are made.

Click on  button in the upper right to view:

- Address history
- Insurance history
- Patient's emergency contacts

Navigating to Patient's Immunization Home Screen

CT WIZ DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777 PATIENT SEARCH

RABBIT, PETER ID: 850427 DOB: 12/01/2016 AGE: 1Y 7M 29D GENDER: M

Patient Demographics

Cancel Links Update

Edit

[Patient Info](#) | [Primary Contact](#) | [Alias](#) | [Health Ins](#) | [Contact Info](#) | [Address](#) | [Race/Ethnicity](#) | [Birth Info](#)

Patient Information

Last Name * First Name * Middle Name Generation
RABBIT PETER

Gender * DOB * Birth Time
MALE 12/01/2016 HH-MM AM/PM (HH-MM A/P)

Patient Eligibility *
(V02) VFC ELIGIBLE - MEDICAID/MEDICAID MANAGED CARE

Language
ENGLISH English Speaking? Interpreter Needed?

History of Varicella
NO HISTORY OF VARICELLA Date of Varicella MM/DD/YYYY

Primary Contact

Relationship Type * Last Name * First Name * Middle Name Generation
MOTHER RABBIT JOSEPHINE

Alias

Last Name First Name Middle Name Generation

Sources of Health Insurance

Health Insurance Source (identify up to three)	Insurance ID or Number	Date Last Verified	Primary?
MEDICAID		MM/DD/YYYY	<input checked="" type="checkbox"/>
		MM/DD/YYYY	<input type="checkbox"/>
		MM/DD/YYYY	<input type="checkbox"/>

Contact Information

Home Phone Cell Phone Work Phone
999-999-9999 999-999-9999 999-999-9999 ext.

E-mail

Address is Unavailable or Temporary ☐ Do Not Include Patient in Reminder/Recall ☐

From the Patient Demographics, click on the Immunizations module to navigate to the patient's immunizations.

Immunization Home Screen

The Immunizations Home screen shows:

- Varicella history
- Vaccines recommended for that day
- Recorded vaccines in CT WiZ, historical and administered (including an ! to indicate invalid doses)

More detail on the Immunization Module can be seen in other training material.

BUNNY, BENJAMIN ID: 850430 DOB: 01/15/2017 AGE: 1Y 6M 17D GENDER: M

Immunizations Home [Learn More](#) [Links](#) [Select Action](#)

View

DOB: 01/15/2017 Age: 1Y 6M 17D History of Varicella?: NO Date of Varicella: MM/DD/YYYY

Recommended Immunizations for today, 8/1/2018 (1Y 6M 17D)

Vaccine
PCV13
MMR
Hep B, ped/adol
Polio-IPV
DTaP
Varicella
Hib (PRP-T)
Hep A, ped/adol, 2D
Influenza Quad Inj P


Please do not rely solely on the Recommender to forecast immunizations. Utilize clinical judgment and consult both the ACIP recommended immunization schedules and the CDC Pink Book @ <http://www.cdc.gov/vaccines/pubs/pinkbook/index.htm#chapters>

Vaccine	Dose	Date	Age	Clinic			
DTaP / TD / Tdap							
DTaP-HepB-IPV	1	03/11/2017	0Y 1M 24D	PR	H	?	Update
DTaP-Hib (TriHIBit)	2	05/11/2017	0Y 3M 26D	PR	H	?	Update
DTaP-HepB-IPV	3	07/14/2017	0Y 5M 29D	PR	H	?	Update
Polio							
DTaP-HepB-IPV	1	03/11/2017	0Y 1M 24D	PR	H	?	Update
DTaP-HepB-IPV	2	07/14/2017	0Y 5M 29D	PR	H	?	Update
Hib							
Hib (PRP-d)	1	03/11/2017	0Y 1M 24D	PR	H	?	Update
DTaP-Hib (TriHIBit)		!	05/11/2017	0Y 3M 26D	PR	H	Update

2 Ways of Viewing Precautions/Contraindications

[←](#) [↻](#) https://ctwiz-training.dph.ct.gov/ctwiz_training/WebCode/Patients/Di [CT WIZ](#)

CT WIZ DPH TRAINING CLINIC, DPH TRAINING CLINIC 1, 7777 [PATIENT SEARCH](#)


RABBIT, PETER ID: 850427 DOB: 12/25/2016 AGE: 1Y 7M 5D GENDER: M + Precautions / Contraindications ARE specified

Patient Demographics ? i

Edit

[Patient Info](#) | [Primary Contact](#) | [Alias](#) | [Health Ins](#) | [Contact Info](#) | [Address](#) | [Race/Ethnicity](#) | [Birth Info](#)

Patient Information

Last Name * First Name * Middle Name Generation

Gender * DOB * Birth Time (HH:MM A/P)

Patient Eligibility *

Language English Speaking? ☐ Interpreter Needed? ☐

History of Varicella Date of Varicella

Primary Contact


Relationship Type * Last Name * First Name * Middle Name Generation


1. Precautions / Contraindications

2. Click Add Precautions /
Contraindications


1. Click on the red cross on the Banner across the patient record
2. Click Precautions / Contraindications in the Patients Module drop -
This includes allergies



Adding Precautions/Contraindications


MOUSE, MINNIE ID: 896040 DOB: 04/10/2019 AGE: 0Y 0M 14D GENDER: F



Patient Precautions / Contraindications 
Add Precautions / Contraindications

Click Add Precautions/
Contraindications


MOUSE, MINNIE ID: 896040 DOB: 04/10/2019 AGE: 0Y 0M 14D GENDER: F

Patient Precautions / Contraindications  
Cancel Create

Add

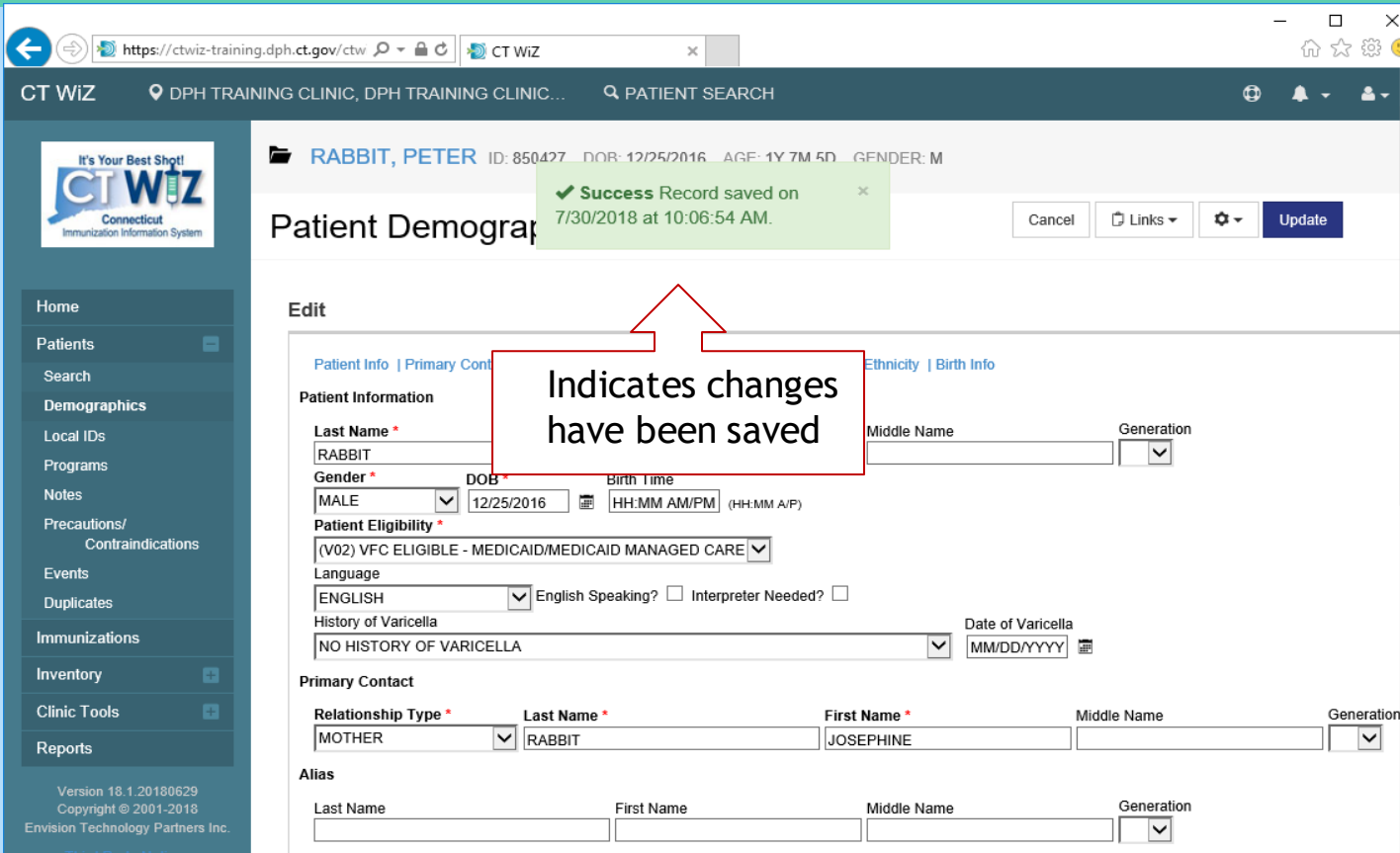
Author *	Effective Date	Expiration Date
KING, LAURA (--) ▼	04/24/2019 	MM/DD/YYYY 
Provider *		
CVP TRAINING CLINIC REGION 2 ▼		
Precautions / Contraindications *		
HYPERSENSITIVITY TO ALUM ▼		
Comments		
<input type="text"/>		
Associated Vaccine(s)		
Hep A, adult, Hep A, ped/adol, 2D, Hep A, ped/adol, 3D, Hep A, ped/adol, UF, Hep A, UF, HepA/B (TWINRIX)		

- Complete fields with *
- Add an Effective Date and Expiration Date, if applicable
- Add a Comment, if necessary



Modifying a Patient Record

Modifying a Patient Record



CT WIZ DPH TRAINING CLINIC, DPH TRAINING CLINIC... PATIENT SEARCH

RABBIT, PETER ID: 850427 DOB: 12/25/2016 AGE: 1Y 7M 5D GENDER: M

✓ Success Record saved on 7/30/2018 at 10:06:54 AM.

Cancel Links Update

Edit

Patient Info | Primary Contact | Ethnicity | Birth Info

Patient Information

Last Name * RABBIT Middle Name Generation

Gender * MALE DOB 12/25/2016 Birth Time HH:MM AM/PM (HH:MM A/P)

Patient Eligibility * (V02) VFC ELIGIBLE - MEDICAID/MEDICAID MANAGED CARE

Language ENGLISH English Speaking? Interpreter Needed?

History of Varicella NO HISTORY OF VARICELLA Date of Varicella MM/DD/YYYY

Primary Contact

Relationship Type * MOTHER Last Name * RABBIT First Name * JOSEPHINE Middle Name Generation

Alias

Last Name First Name Middle Name Generation

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1. Edit information.

2. Click **Update**.

** You cannot update a patient's date of birth. If the DOB needs to be corrected, submit a CT WiZ Help Desk Request:

<https://dph-cthelpdesk.ct.gov/Immunization/IndexCreateTkt>

How To Get Help

- Click on the  located at the top of the page to get a description of whichever screen you are on.
- Some pages have a [Learn More](#) link. Click on this to see short "How to" videos. These appear on a separate page so you can play videos while navigating through CT WiZ.
- Visit the CT WiZ training page [here](#). The training page has numerous documents and step by step videos to help you.
- Still can't find an answer to your question? After you exhausted all the of the above options, submit a help desk ticket to get the quickest answer. You may do so [here](#).

