

# How to Print an Official Immunization Certificate for School Entry and an Immunization Record in KYIR

Immunization Branch  
Kentucky Immunization Registry

April 17, 2025



**Kentucky Public Health**  
Prevent. Promote. Protect.



**TEAM**   
**KENTUCKY**<sup>®</sup>  
CABINET FOR HEALTH  
AND FAMILY SERVICES

# Introduction

This quick guide shows how to print out the official immunization certificate for school entry, the official immunization certificate and immunization record in Kentucky Immunization Registry (KYIR).

-  **Official Immunization Certificates:** This document is intended only for children 18 years of age and younger who are attending a daycare, a preschool program, or a public/private primary or secondary school. Certificates will not include COVID-19 immunizations.
-  **COVID-19 Vaccination Record:** This document only includes COVID-19 immunization information.
-  **Immunization Record:** This document is a complete immunization record that may be used for all ages to keep a record of immunization status. It cannot be used in place of an official immunization certificate for school entry.

# Step 1

From the KYIR home page, double check that the Default Provider/Clinic is set to the clinic you are working with.

Click **Patients** from the left side panel and then **Search** to bring you to the patient search page.

KYIR GAIL'S COVID TRAINING PROVIDER, GAIL... PATIENT SEARCH

WEB IZ

Home  
Patients  
Search  
Demographics  
Local IDs  
Programs  
Contacts  
Notes  
Precautions/  
Contraindications  
Events  
Duplicates  
Immunizations  
Education  
IZ Quick Add  
Inventory  
Clinic Tools

Welcome to the Kentucky Immunization Registry

Default Provider/Clinic

Provider/Clinic \*

[GAIL'S COVID TRAINING PROVIDER] GAILS COVID TEST FAMILY PRACTICE - C105 (C105)

Select a clinic by typing provider, clinic, vfc pin, or clinic code

News

# Step 2

On the patient search page, type in the first two letters of the last name, first two letters of the first name, and the patients birth date that you are adding an immunization for.

Click **Search**. Patients matching that criteria will populate below.

KYIR GAIL'S COVID TRAINING PROVIDER, GAIL... PATIENT SEARCH

WEB IZ

Home  
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Events  
Duplicates  
Immunizations  
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IZ Quick Add  
Inventory  
Clinic Tools  
Program Tools  
Hepatitis B  
Reports/Training  
VTrackS Interface  
CVRS  
Administration  
HL7 Management

Patient Search

Patient Search

Patient ID Identifier Type Identifier Value Gender

Last Name First Name Middle Name DOB

MOUSE MICK 12/07/2020

Mother's Last Name Mother's First Name Mother's Middle Name Mother's Maiden Name

Father's Last Name Father's First Name Father's Middle Name

Tags

HEALTHCARE WORKER  
FIRST RESPONDER  
TEACHER  
ESSENTIAL WORKER

Note: Hold the Ctrl key to select or deselect multiple items.

Search

ID	Name	Phone	Gender	DOB	Patient Icons	Audit	Actions
2535874	MOUSE, MICK JR 123 MAGICAL DR LEXINGTON, KY 40509		MALE	12/07/2020			DEMOGRAPHICS

Showing 1 to 1 of 1 entries

Previous 1 Next

# Step 3

- 🛡️ Patient information will populate on the screen.
- 🛡️ Once the correct patient is located, navigate to the Actions menu drop down arrow and select **Immunizations**.

The screenshot shows a web interface for a patient record. At the top, it says "Patient Home" with an information icon and a "Links" dropdown. Below that, it says "Currently Selected Patient". A table lists patient information:

ID	Name	Phone	Gender	DOB	Patient Icons	Audit	Actions
2535874	MOUSE, MICK JR 123 MAGICAL DR LEXINGTON, KY 40509		MALE	12/07/2020			DEMOGRAPHICS

The "Actions" dropdown menu is open, showing the following options: DEMOGRAPHICS, IMMUNIZATIONS, CONTACTS, DUPLICATES, EDUCATION, EVENTS, LOCAL IDS, NOTES, PRECAUTIONS / CONTRAINDICATIONS, and PROGRAMS. A green arrow points to the "DEMOGRAPHICS" dropdown in the table, and another green arrow points to the "IMMUNIZATIONS" option in the dropdown menu.

# Step 4

From the patients Immunizations page → in the Links drop down in the top right-hand corner, select from the following options:

- Official Immunization Certificate
- COVID-19 Vaccination Record
- Immunization Record

MOUSE, MICK ID: 2535874 | DOB: 12/07/2020 | AGE: 4Y 2M 10D | GENDER: M | GENERATION: JR

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

View

Precautions

DOB: 12/07/2020 Age: 4Y

Official Immunization Certificate  
Vaccine Documentation/Consent Form  
COVID-19 Vaccination Record  
Patient Events  
ACIP Adult Immunization Schedule  
ACIP Child and Adolescent Birth Through 18 Years Immunization Schedule  
Edit Vaccine Defaults  
Immunization Record

# Reminders

-  **Note:** Ensure your browser's pop-up blocker is turned off for the Certificate/Immunization Record to generate the PDF file to print.
-  **Official Immunization Certificates:** are intended only for children 18 years of age and younger who are attending a daycare, a preschool program, or a public/private primary or secondary school. Certificates will not include COVID-19 vaccinations.
-  **COVID-19 Vaccination Record:** COVID-19 specific vaccination record details.
-  **Immunization Record:** Complete immunization record used for all ages to document and track vaccination status. Cannot be used in place of an official certificate for school-age children.

# Official Certificate

# Immunization Record



Certificate Issuing Office Name and Address  
**GAILS COVID TEST FAMILY PRACTICE**  
 123 COVID ST  
 LEXINGTON, KY 40515

This Certificate was printed from the  
 Kentucky Immunization Registry 02/18/2025

## COMMONWEALTH OF KENTUCKY CERTIFICATE OF IMMUNIZATION STATUS

**Name of Child:** DOO SCOOBY D Birthdate: 01/02/2000

**Name of Parent:**

**Address:** 275 E MAIN ST FRANKFORT KY 40621

VACCINE	DOSE 1 MM/DD/YYYY	DOSE 2 MM/DD/YYYY	DOSE 3 MM/DD/YYYY	DOSE 4 MM/DD/YYYY	DOSE 5 MM/DD/YYYY
Hepatitis B Alt. Adult Hepatitis B <sup>1</sup>	06/11/2024	12/20/2024	✓	✓	
DTap/DTP/DT <sup>2</sup>	06/11/2018	08/16/2024	✓	✓	✓
Hib <sup>3</sup>	06/11/2018	✓	✓	✓	
Pneumococcal	✓	✓	✓	✓	
Polio	✓	✓	✓	✓	✓
Influenza	08/14/2024	08/16/2024			
MMR	✓	✓	✓	✓	
Varicella	04/26/2024	06/11/2024	Had Chickenpox or Zoster Disease	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	✓
Hepatitis A	✓	✓			
Meningococcal	✓	✓			
Tdap	✓	✓			
Rotavirus	✓	✓			
HPV	✓	✓			
Men B	✓	✓			
Pneumococcal (PPSV23)	✓	✓			

(1) Alternative two dose series of approved adult hepatitis B vaccine for adolescents 11 through 15 years of age. (2) DTap, DTP, or DT. (3) Hib not required at 5 years of age or more.

This child is **current** for immunizations until \_\_\_/\_\_\_/\_\_\_ (14 days after the next shot is due) after which this certificate is no longer valid and a new certificate must be obtained.

This child is **not up-to-date** at this time. This certificate is valid until 03/04/2025, (14 days after the next shot is due) after which this certificate is no longer valid and a new certificate must be obtained.

Reason child is not up-to-date:

**Provisional Status** - Child is behind on required immunizations.

**Medical Exemption** - The following immunizations are not medically indicated: \_\_\_\_\_

If Medical Exemption, can these vaccines be administered at a later date? No: \_\_\_ Yes: \_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**Religious Objection**

Pursuant to 902 KAR 2:060 § 4(3), a signature is not required as this Certificate was printed from the Kentucky Immunization Registry

**This certificate should be presented to the school or facility in which the child intends to enroll and should be retained by the school or facility and filed with the child's health record.**

(Rev 8/2017)






### Immunization Record Kentucky Immunization Registry

Retain this document as proof of immunization.

For appointment or information, contact your local county health department or your physician's office.

A vaccination health record helps you and your healthcare provider keep your/your child's vaccinations on schedule. If you move or change providers, having an accurate record might prevent you/your child from repeating vaccinations you have already had. A shot record should be started when you receive your first vaccination and updated with each vaccination visit. Bring this record to every visit.

If you have questions or need to know where you can get immunizations, call the **Kentucky HELP Line at 1-502-564-4478**.  
 Kentucky Cabinet for Health and Family Services  
 275 E. Main St. HSZE-B  
 Frankfort, KY 40621

Present this record at each medical visit.

**Name:** SCOOBY D DOO (2534827)

**Date of Birth:** 01/02/2000

**Precautions - Contraindications:**

**Vaccine Reactions:**

**Comments**

Date	Note

**Vaccines Refused**

Date	Note

Vaccine	Date Given	Doctor or Clinic	Date Next Due MM/DD/YYYY
<b>Other</b>			
1			
2			
3			
4			
5			
6			

• Invalid Dose, minimum age/interval not met.    • Dose determined invalid by provider

Vaccine	Date Given	Doctor or Clinic	Date Next Due MM/DD/YYYY	
<b>DTaP / TD / Tdap</b>				
1	DTP-Hib	06/11/2018	PR	02/18/2025
2	DTap (Infanrix)	08/16/2024	KAYLATEST12	
3				
<b>Polio</b>				
1				
<b>Hib</b>				
1	DTP-Hib	06/11/2018	PR	
2				
<b>Pneumococcal</b>				
1				01/02/2050
2				
<b>Rotavirus</b>				
1				
<b>Hep A</b>				
1				
<b>Hep B</b>				
1	Hep B, adult	06/11/2024	KAYLATEST	02/18/2025
2	Hep B, adult	12/20/2024	KAYLATEST	
3				
<b>MMR</b>				
1	Measles	08/26/2024	KAYLATEST12	02/18/2025
2				
<b>Varicella (CPOX)</b>				
1	Varicella	04/26/2024	KAYLATEST	
2	Varicella	06/11/2024	KAYLATEST	
3				
<b>Meningococcal</b>				
1				
<b>HPV</b>				
1				02/18/2025
2				
<b>COVID-19</b>				
1	COVID-19 (PFR) 12+ys	08/28/2024	KAYLATEST	
2	COVID-19 (PFR) 12+ys	04/26/2024	KAYLATEST	
3				
<b>Influenza</b>				
1	u Quad Recomb IM P-Fr	08/16/2024	KAYLATEST12	
2	Influenza, Seasonal	08/14/2024	KAYLATEST12	
3	Fluzone High-Dose Quad	06/23/2023	KAYLATEST12	
4				
<b>Travel</b>				
1				

Print Date 2/18/2025 4:28:13PM      Page 1 of 1

# Thank you.

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KYIR Training Development Specialist



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