



COVID-19 Vaccination Reporting

(MOHAP Private Facilities)

End User Manual

Version: 1.1

Date: 14 January 2021

1. Copyright and Confidentiality

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Table of Contents

1. Copyright and Confidentiality	2
2. Document management & Version Control	4
2.1 Document History	4
2.2 Document Version Control	4
3. Introduction	5
3.1 Purpose & Objective	5
3.2 Definitions & Abbreviations	5
3.3 Business Rules	6
4. Using the system	7
4.1 Summary	7
4.2 Navigate to Vaccination Form	8
4.3 Retrieve Patient Details.....	10
4.4 Fill the Vaccine Details.....	11
4.5 Technical Support.....	14

2. Document management & Version Control

2.1 Document History

Version	Date	Author	Revision Notes
1.0	03-Jan-2021	Azam Farooq	MOHAP IT Department
1.1	14-Jan-2021	Azam Farooq	Addition of login mechanism for non-MOHAP entities

2.2 Document Version Control

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3. Introduction

3.1 Purpose & Objective

The COVID-19 Vaccination Reporting is a system designed by IT department for MOHAP private facilities to provide and post details against the COVID-19 vaccinations administered to the patients.

This document is intended to describe how the System can be used.

3.2 Definitions & Abbreviations

Abbreviation	Description
MOHAP	Ministry of Health and Prevention, United Arab Emirates, MOHAP is the Service Provider
Medical Facility	Hospital, Clinic, Medical Centers, etc.
System	The COVID-19 Vaccination Reporting system
Staff	Hospital staff responsible for providing and submitting the patient details

3.3 Business Rules

- The user should be member of the medical facility. The system can be used by providing a valid medical facility license number, issued by MOHAP.

4. Using the system

4.1 Summary

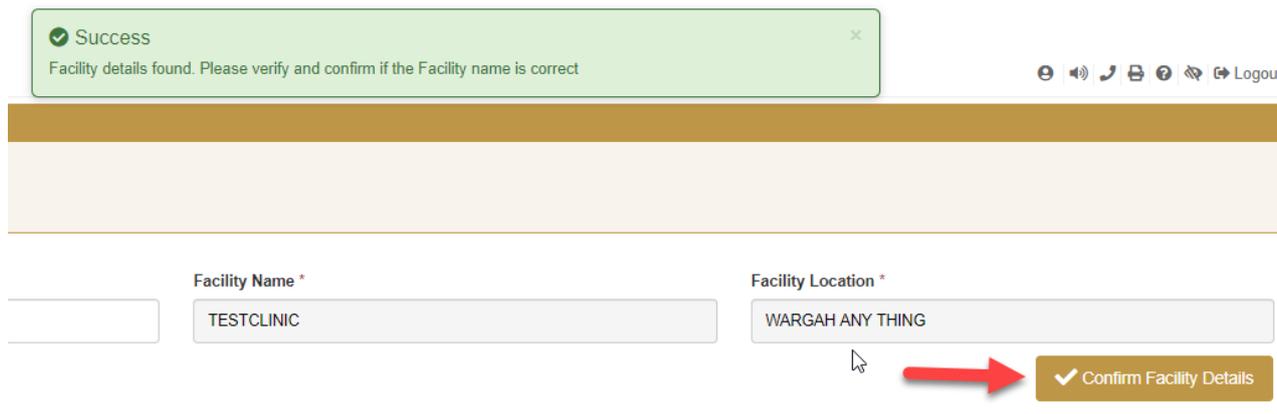
1. Go to the service through the URL: <https://smartforms.moh.gov.ae/CovidVaccination> or <https://smartforms.moh.gov.ae/CovidVaccination/AppPages/VaccinationForm> (both links lead to same form).
2.
 - a. For MOHAP licensed private facilities, please provide your valid medical facility license number issued by MOHAP to start using the system.
 - b. For non-MOHAP entities, please use the login button and the shared account credentials to login.
3. Provide the patient's valid Emirates ID Number and Click "Get Patient Details" to retrieve patient's demographics.
4. Click "Save Patient Details" to save changeable fields.
5. Fill in all required information for the Vaccination Details for 1st Dose or the 2nd Dose (depending on the dosage number) and then:
 - a. Press "Save 1st Dose Details" button to save and post details related to 1st vaccination dose.
 - b. Press "Save 2nd Dose Details" button to save and post details related to 2nd vaccination dose, when applicable.

4.2 Navigate to Vaccination Form

1. Go to the service through the URL: <https://smartforms.moh.gov.ae/CovidVaccination>
2. System will show the following page.
3. Login by:
 - a. For MOHAP licensed facilities, please enter your valid medical facility license number issued by MOHAP.
 - b. For Non-MOHAP licensed entities, please click the “Click here to Login” button and use the provided account credentials to login.
 - The account credentials will be provided by MOHAP.
 - Only authorized accounts will be allowed to access the system

The screenshot shows the MOHAP COVID-19 Vaccination Form interface. At the top, it says "MOHAP COVID-19 VACCINATION" and "Covid-19 Vaccination Form". Below this, there are two main sections. The first section is titled "For Non-MOHAP Licensed Entity (Ministry of Interior, Dubai Police, etc.)" and features a red callout "For non-MOHAP Entities" with an arrow pointing to a button labeled "Click here to Login". The second section is titled "For MOHAP Licensed Entity (Hospitals, Clinic, etc.)" and contains three input fields: "MOHAP License No *" (with a placeholder "Type your MOHAP License Number"), "Facility Name *" (with a placeholder "Facility Name"), and "Facility Location *" (with a placeholder "Facility Location"). Below these fields is a red callout "For MOHAP Licensed Facilities" with an arrow pointing to a button labeled "Confirm Facility Details".

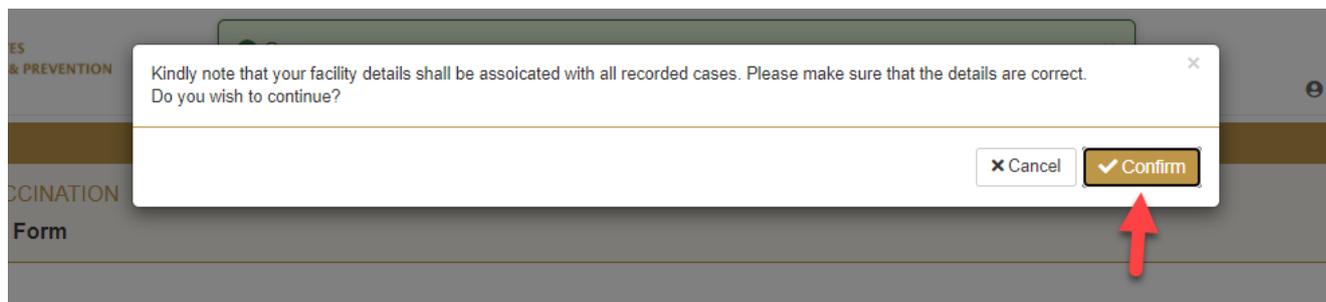
4. Verify your Facility name and location details and then click the Confirm Facility Details button to proceed (Applicable for MOHAP licensed Facilities).



A screenshot of a web application interface. At the top, there is a green success message box that says "Success" and "Facility details found. Please verify and confirm if the Facility name is correct". Below this, there is a form with two input fields: "Facility Name *" containing "TESTCLINIC" and "Facility Location *" containing "WARGAH ANY THING". To the right of these fields is a button labeled "Confirm Facility Details" with a checkmark icon. A red arrow points to this button. In the top right corner, there are several utility icons and a "Logout" link.

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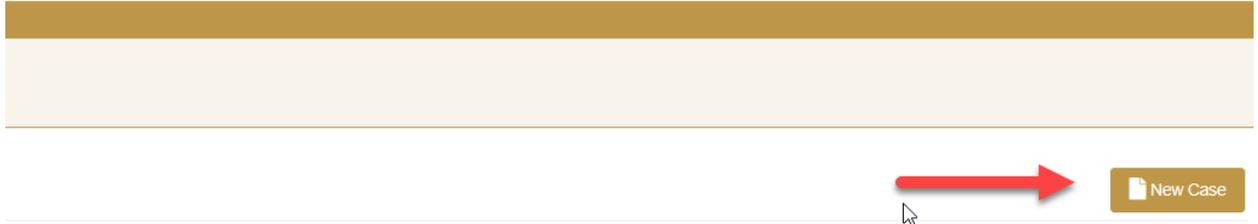
5. Click the Confirm button to confirm and agree that the details are of your facility (Applicable for MOHAP licensed Facilities).



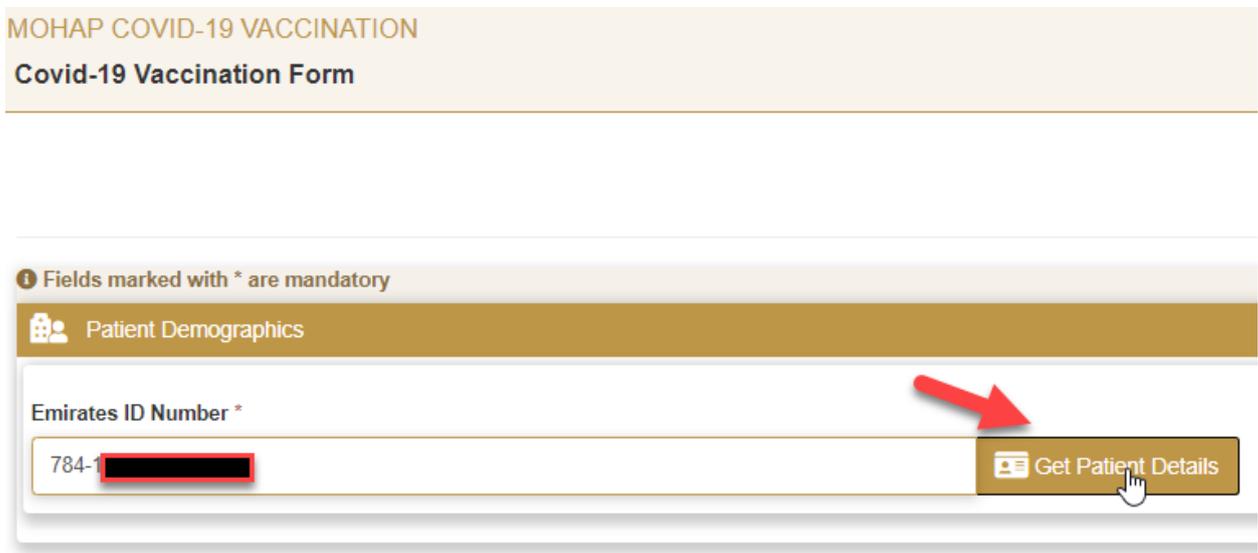
A screenshot of a confirmation dialog box. The dialog box contains the text: "Kindly note that your facility details shall be associated with all recorded cases. Please make sure that the details are correct. Do you wish to continue?". At the bottom right of the dialog box, there are two buttons: "Cancel" and "Confirm". A red arrow points to the "Confirm" button. The background shows a blurred view of the web application interface.

4.3 Retrieve Patient Details

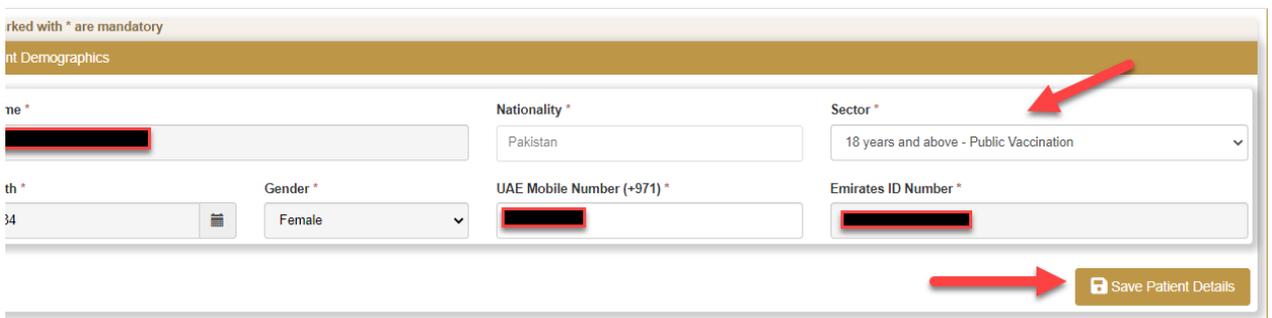
1. Click the New Case button to start the process for a new patient.



2. Type in the Emirates ID number of the patient and click Get Patient Details:



3. Validate the details of the patient and proceed forward and select the Patient's sector.
4. From the patient's details, only Mobile number can be updated. Click Save Patient Details button to save the changes.



4.4 Fill the Vaccine Details

1. Move to the Vaccination Details Section to fill up the vaccine relevant details. Select the appropriate Vaccine Details tab, based on the Dose sequence.

The screenshot displays the 'Vaccine Administration Details (1st Dose)' form. At the top, there are two tabs: 'Vaccination Details (1st Dose)' and 'Vaccination Details (2nd Dose)'. Below them is the 'Vaccine Administration Details (1st Dose)' section, which includes the following fields:

- Dose Time ***: 03/01/2021 08:12:45
- Emirate ***: Abu Dhabi
- Administering Facility ***: TESTCLINIC
- Location ***: WARGAH ANY THING
- Vaccine Type ***: Inactivated – Beijing
- Vaccine Vendor ***: Beijing Institute Biological products/SinoPharm – China
- Vaccine Batch / LOT Number ***: Vaccine Batch / LOT Number
- Stage ***: Emergency Use

Below this section is the 'Adverse Reaction Details (1st Dose)' section, which includes:

- Adverse Reaction Classification**: None
- Adverse Reaction Outcome**: None
- Reaction Reported Date**: Reaction Reported Date
- Adverse Reaction Relevance**: None
- Adverse Reaction Consequence**:
- Reaction Start Date**: Reaction Start Date
- Reaction Stopped Date**: Reaction Stopped Date

2. **Vaccine Administration Details (Dose N)**: Provide the Dose date and time (by default current date and time). The rest of the information will be auto filled.

This screenshot shows the 'Vaccine Administration Details (1st Dose)' form. A red arrow points to the 'Dose Time' field, which contains the value '03/01/2021 08:12:45'. Other fields are filled with the same data as in the previous screenshot.

3. **Vaccine Details (Dose N)**: Select the correct vaccine type, vaccine vendor and the Batch/LOT number of the vaccine.

This screenshot shows the 'Vaccine Details (1st Dose)' form. It includes the following fields:

- Vaccine Type ***: Inactivated – Beijing
- Vaccine Vendor ***: Beijing Institute Biological products/SinoPharm – China
- Vaccine Batch / LOT Number ***: Vaccine Batch / LOT Number
- Stage ***: Emergency Use

4. **Adverse Reaction Details (Dose N):** This section is optional and is to be filled if any adverse reaction is observed in the patient after the vaccination. If applicable, then all fields to be filled. Otherwise, leave as is.

The screenshot shows a form titled "Adverse Reaction Details (1st Dose)". It contains several input fields:

- Adverse Reaction Classification:** A dropdown menu with "None" selected.
- Adverse Reaction Outcome:** A dropdown menu with "None" selected.
- Adverse Reaction Relevance:** A dropdown menu with "None" selected.
- Adverse Reaction Consequence:** A dropdown menu with "None" selected.
- Reaction Reported Date:** A date input field with a calendar icon.
- Reaction Start Date:** A date input field with a calendar icon.
- Reaction Stopped Date:** A date input field with a calendar icon.

5. Click the Save *Nth** Dose Details button to save the vaccine details.

**Represents the Dose sequence*

This screenshot shows a close-up of the date input fields from the previous form. It includes:

- Reaction Reported Date:** A date input field with a calendar icon.
- Reaction Start Date:** A date input field with a calendar icon.
- Reaction Stopped Date:** A date input field with a calendar icon.

Below the form, a red arrow points to a brown button labeled "Save 1st Dose Details".

6. When applicable, select the 2nd Dose details tab and follow the same process as for the 1st dose to will the details. The 2nd Dose tab will remain disabled until the 21st day from the 1st dose administration.

Vaccination Details (1st Dose) | Vaccination Details (2nd Dose)

Vaccine Administration Details (2nd Dose)

Dose Time * 03/01/2021 08:12:45 Emirate * Abu Dhabi Administering Facility * TESTCLINIC

Location * WARGAH ANY THING

Vaccine Details (2nd Dose)

Vaccine Type * Inactivated – Beijing Vaccine Vendor * Beijing Institute Biological products/SinoPharm – China

Vaccine Batch / LOT Number * Vaccine Batch / LOT Number Stage * Emergency Use

Adverse Reaction Details (2nd Dose)

Adverse Reaction Classification None Adverse Reaction Outcome None

Adverse Reaction Relevance None Adverse Reaction Consequence

Reaction Reported Date Reaction Reported Date

Reaction Start Date Reaction Stopped Date

Reaction Start Date Reaction Stopped Date

The 2nd Dose Tab will be disabled at first, but will open on the 21st day of the 1st dose.

4.5 Technical Support

For any System related technical support, please send you queries and emails to the following support group:

applications.support@mohap.gov.ae

Please make sure to follow the below guidelines when sending the email, to allow us to respond better and in a timely manner:

1. Keep the Subject of the email as: **COVID Vaccination System**
2. Mention the details of the issue, preferably supported by a screen shot from the system
3. Share the details of your facility: MOHAP License Number and Name at the least.
4. Share the patient's Emirates ID, in case the issue is occurring for a specific patient.