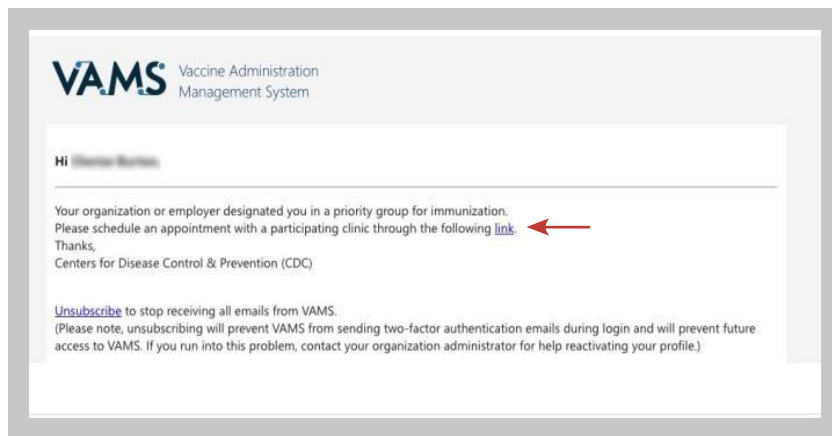


CREATE YOUR VAMS ACCOUNT AND SCHEDULE YOUR FIRST VACCINE APPOINTMENT

Create Your VAMS Account

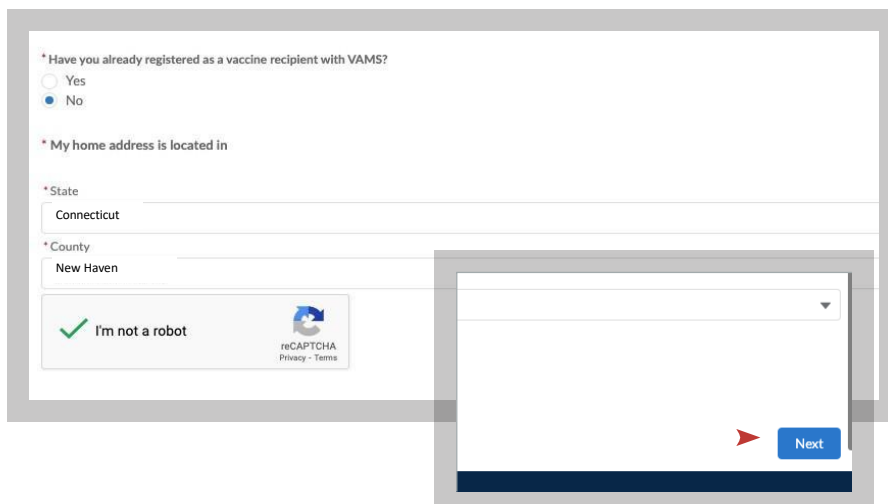
Follow these steps:

Step 1 -- When you are uploaded in the Vaccine Administration Management System (VAMS), an email is sent to your registered email account with a link to create your account and then schedule your first vaccination appointment. Click on the blue 'link' in the email to begin.



Note: Bookmark the VAMS Login page in your web browser to access it quickly.

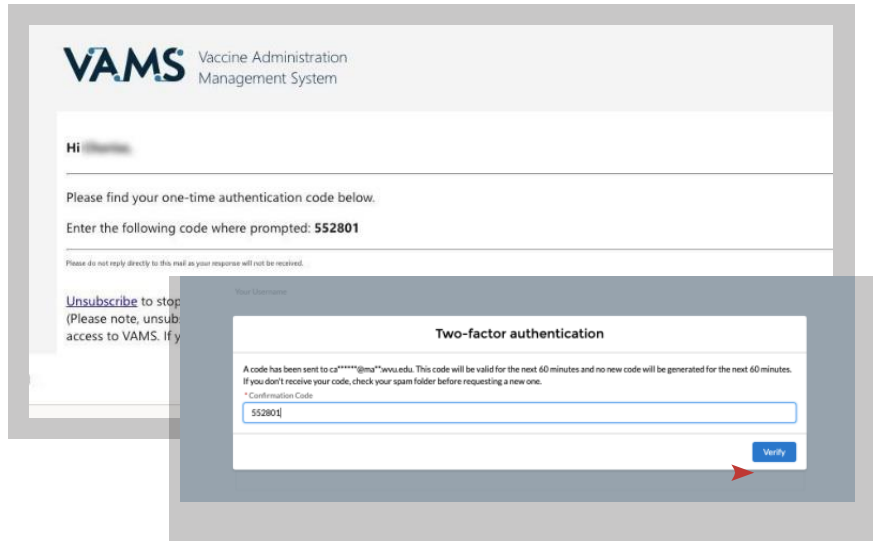
Step 2 -- On the **VAMS Welcome** page, select **No** indicating you have not previously registered in VAMS. Then use the drop-down menus to select Connecticut as your State and the County you live in. Click on the 'I'm not a robot' checkbox. Select **Next** when you are finished.



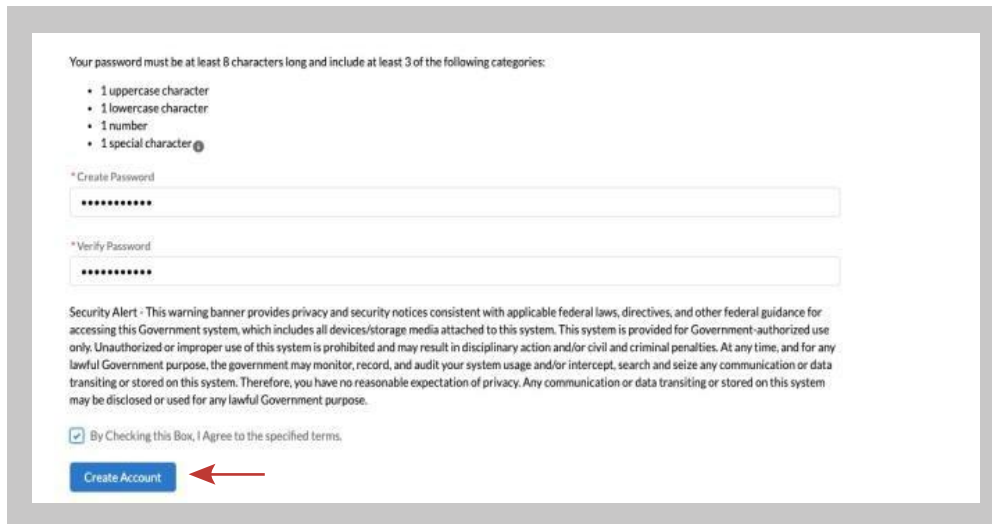
The screenshot shows the VAMS registration form. It includes the following fields and options:

- * Have you already registered as a vaccine recipient with VAMS?
 Yes
 No
- * My home address is located in
- * State
Connecticut
- * County
New Haven
- I'm not a robot (with reCAPTCHA logo and "Privacy - Terms" link)
- A blue "Next" button with a red arrow pointing to it.

Step 3 -- To confirm your identity, another email is sent to your registered email account with a 6 digit confirmation code. Open the email from VAMS/CDC and find the code. Enter that code in the Two-factor authentication window and select **Verify**.

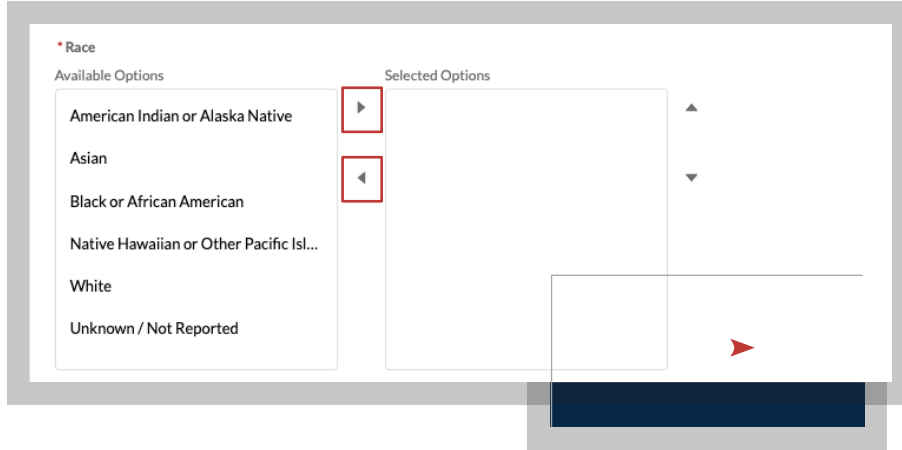


Step 4 -- Create your VAMS password according to the criteria indicated. Re-enter the password. Select the box to agree to the specified terms and then select **Create Account** when you are finished.



Note: Be sure to write down or save your password– you will need it each time you access VAMS.

Step 5 -- On the **My Information** tab, use the text fields and drop-down menus to complete your demographic information. Select **Next** when you are finished.



* Race

Available Options

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Isl...
- White
- Unknown / Not Reported

Selected Options

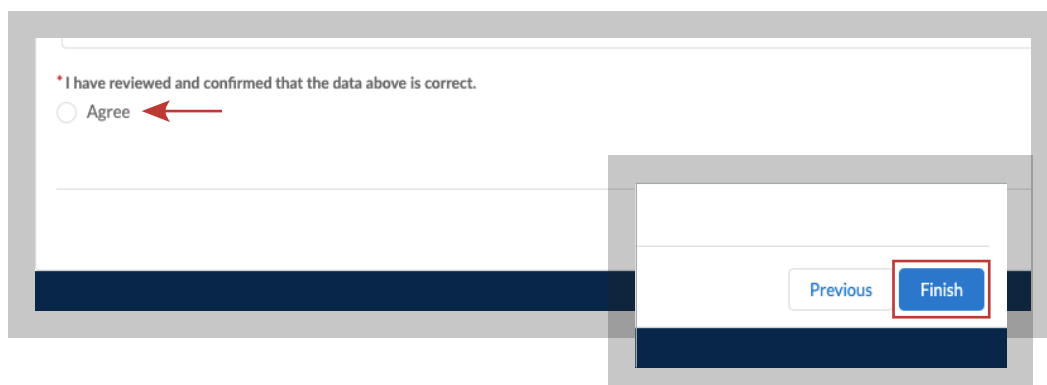


Note: Under Race, click on the Race and then click on the arrows to move selections to and from the Selected Options box. Further, do not use parentheses or dashes in the Cell Phone field. Enter your phone number in the following format: 2033456789



Note: Your insurance information is not required.

Step 6 -- On the **Review** tab, confirm all the information you have entered is correct. If not, click on Previous to make changes. Select **I Agree** then select **Finish** to proceed to scheduling your appointment.



* I have reviewed and confirmed that the data above is correct.

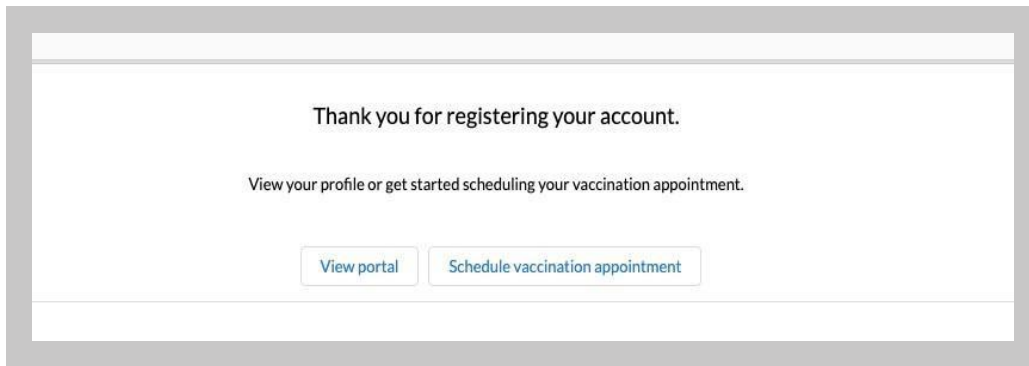
Agree

Previous Finish



Note: You will see a confirmation message saying that your account has been registered.

Step 7 -- Select **Schedule Vaccination Appointment** to move on to the next step.



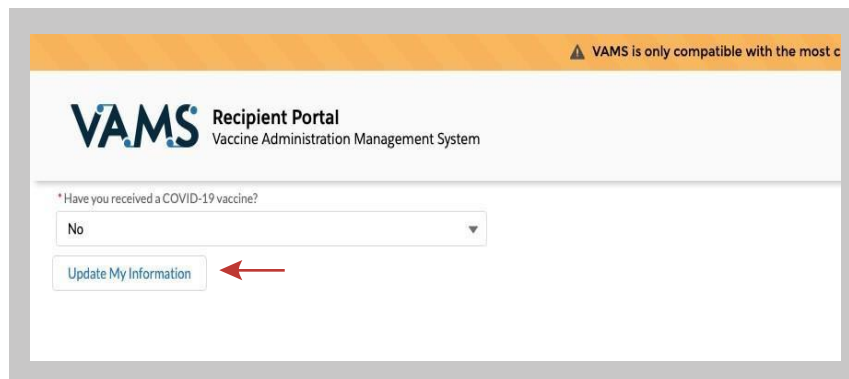
Thank you for registering your account.

View your profile or get started scheduling your vaccination appointment.

[View portal](#) [Schedule vaccination appointment](#)

Schedule Your Appointment (First Dose)

Step 1 -- After selecting **Schedule Vaccination Appointment**, select **No** indicating you have not previously received a COVID-19 vaccine. Click on **Update Information**.



VAMS is only compatible with the most c

VAMS Recipient Portal
Vaccine Administration Management System

* Have you received a COVID-19 vaccine?

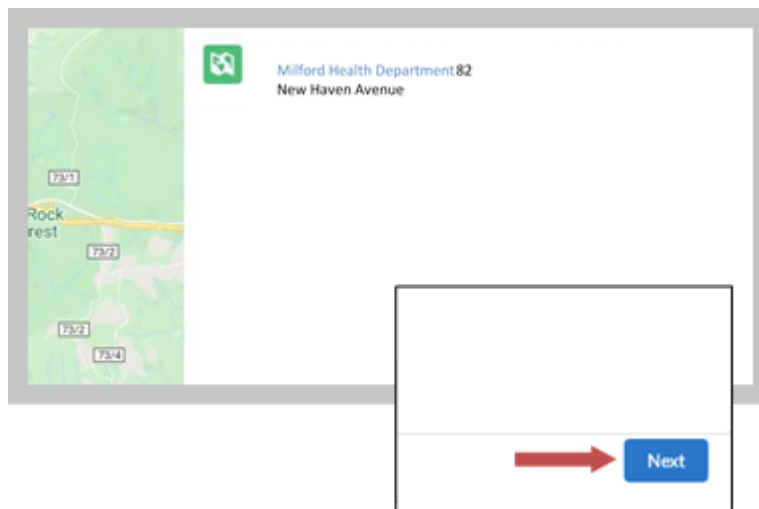
No

[Update My Information](#) ←

Step 2 -- In the **Zip Code** field, enter **your zip code** and select **Search**. You can expand your search results by clicking on **Within** to search within a 5-,10-, 20-, 50-, or 100-mile radius. Then select a clinic location from the results. Be sure to select **Next** when you are finished.



Address or ZIP code
06460
Search

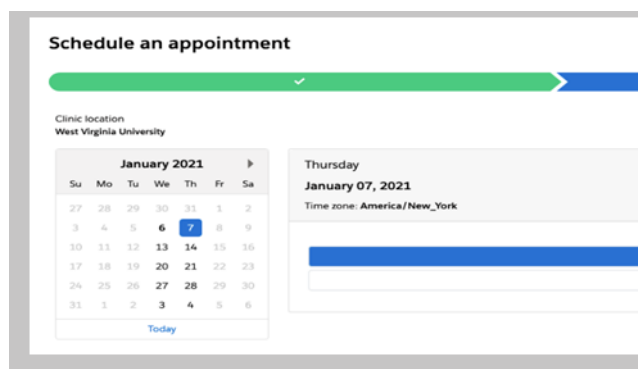


Milford Health Department 82
New Haven Avenue

Rock rest

Next

Step 3 -- Select your preferred vaccination date/ time. Available dates appear in black. If appointment slots do not appear for the date you picked, click on another date. Select **Next** to continue.



Schedule an appointment

Clinic location
West Virginia University

January 2021						
Su	Mo	Tu	We	Th	Fr	Sa
27	28	29	30	31	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31	1	2	3	4	5	6

Thursday
January 07, 2021
Time zone: America/New_York



Note: Due to limited vaccine doses, vaccine appointment times will be on a first-come, first-served basis. Please continue to check back as the vaccine scheduling system works like any other reservation system, and appointments are being rescheduled and cancelled at all times. Same-day appointments often become available within the hour.

Step 4 -- Review your information. Then click on **Submit** to schedule your appointment.

Step 5 -- You will be directed to a **Confirmation** page. You also will receive a confirmation notification (email or text) of your appointment. Review your information. *You will not need the QR code for your appointment at this time. Please have your ID ready for check in.*

To reschedule your appointment, you first must cancel your original appointment then create a new appointment. Find your appointment confirmation email and select the **Cancel Appointment** link.

Step 6 -- Complete the medical questionnaire and consent in VAMS prior to your scheduled appointment. You can complete this at the time you book your appointment, or you can log back into VAMS when you receive your reminder notification.



Note: If you do not complete the medical questionnaire prior to your appointment, the healthcare professional will ask you the questions before you receive your vaccination.

Pre-vaccination questionnaire form for s

* Are you currently sick?

Yes
 No

* Indicate any known allergies

Milk
 Fish (e.g. bass, flounder, cod)
 Eggs
 Crustacean shellfish (e.g. crab, lobster, shrimp)
 Peanuts
 Tree nuts (e.g. almonds, walnuts, pecans)
 Wheat
 Soybeans
 Latex
 Gelatin/Egg Protein
 Yeast
 Neomycin
 Thimerosal
 Other
 No existing or known allergies

* Have you ever had a serious reaction after receiving an immunization?

Yes
 No

* Have you ever fainted or felt dizzy after receiving an immunization?

Yes
 No