

Michigan Care Improvement Registry (MCIR)

I. Petition for Modification to MCIR Information


| | | | |
|---|------------------------------|----------------------|--------------------------|
| Child Information (As it currently appears in MCIR): | | | |
| Name (Last, First, Middle, Suffix (i.e., III)) | Date of Birth | MCIR Child ID | |
| | | | |
| If child has more than one record, please list duplicated record below: | | | |
| Name (Last, First, Middle, Suffix (i.e., III)) | Date of Birth | MCIR Child ID | |
| | | | |
| Correct Name (Last, First, Middle, Suffix (i.e., III)) | Correct Date of Birth | Sex | Deceased |
| | | M / F | <input type="checkbox"/> |

| Vaccine Encounter Information | | | |
|-------------------------------|--------------|---------------------|-------------------|
| Delete Encounter | | Change Encounter | |
| Immunization Date | Vaccine Type | Incorrect Date/Type | Correct Date/Type |
| | | | |
| | | | |
| | | | |
| | | | |

| | | | | | | |
|--|--|--|--|---------------------------------|---------------------------------|------------------------------|
| Responsible Party Information: <i>Only for use by offices unable to modify MCIR data!</i> | | | | Delete <input type="checkbox"/> | Modify <input type="checkbox"/> | Add <input type="checkbox"/> |
| Name (Last, First, Middle, Suffix) | | | | | | |
| | | | | | | |
| Address (Street, P.O. Box, City, County, State, Zip Code) | | | | | | |
| | | | | | | |

Documentation supporting requested changes must be submitted with this petition in order for changes to occur.

| Requester Information | |
|------------------------------------|----------------------|
| Signature: | Date: |
| | |
| Provider/Organization Name: | Phone Number: |
| | |
| Notes: | |
| | |

| For MCIR Use Only | |
|------------------------|--|
| Notes: | |
| | |
| Signature: | <div style="text-align: center;">  </div> <p>Mail to: MCIR Region 4 Genesee County Health Dept. 630 S. Saginaw St. Flint, MI 48502</p> <p>A. Fax to: 810-257-3809 B. Helpdesk: 1-888-217-3903</p> |
| Date Completed: | |
| | |

Michigan Care Improvement Registry (MCIR)

Region Four Petition for Modification Form

Errors that are discovered in a MCIR immunization record (e.g., incorrect data) may be modified by the user that entered the record in question (i.e., the original authorizer of the vaccine encounter record) using the MCIR; in these instances a Petition for Modification form is not indicated. All other users who need to have a record modified need to submit a Petition for Modification form.

A child's parent, guardian, or legal representative may also petition the MDCH or its authorized agents to amend the child's record.

Requests for modification require appropriate documentation to support modification of a vaccine encounter already existing in the MCIR. The MDCH or its authorized agents will be responsible for investigating and making the requested modification, if deemed appropriate. If a modification request is denied, the applicant shall be informed of the denial and the reason(s) for the denial. Corrections can be made and the modification request can be resubmitted.

Modifications that can be made to a MCIR record include:

- Deletion of an immunization encounter
- Correction of an encounter date
- Correction of vaccine type
- Correction of responsible party information
- Correction of a child's name
- Correction of a child's date of birth
- Correction of a child's gender
- Deletion of a duplicate record
- Documentation of a child's death

Each modified piece of information will be noted as such. The MCIR will record the date of the modification and the User ID of the person modifying the record. The MDCH or its authorized agent must retain the Petition for Modification for a minimum of 90 days. Accompanying paperwork documenting the modification will be shredded once modifications have been completed. The original encounter record will be retained in the database, but will not be displayed on any data reports and screens available to MCIR users. Furthermore, the original record will not be used for assessment purposes.