



## What You Should Know About Sharing Your Immunization Information

Harvard University Health Services (HUHS) is required by law to participate in the Massachusetts Immunization Information System (MIIS). The MIIS immunization registry (M.G.L c. 111, Section 24M), is a confidential, electronic system that collects and stores vaccination records for Massachusetts residents of all ages. The immunization program is operated by the Massachusetts Department of Public Health and is designed to help you, along with your health care providers, schools, and childcare centers, to keep track of the vaccinations that you and/or your family members have received.

### **Why is the MIIS important?**

The schedule of vaccinations that you need to stay healthy and that are required for you becomes more complicated with every new vaccine introduced. Keeping all of your vaccine records in one place helps to make sure that you get the complete schedule of immunizations – no more and no less. The registry allows secure yet easy access to your immunization information for all other Massachusetts clinicians outside of HUHS in the event of a referral or emergency.

### **What information about me will be entered into the MIIS?**

All residents of Massachusetts, including Harvard University students, will have their vaccine information (both historical and newly given by HUHS clinicians), entered into the MIIS. Your name, address, gender, date of birth, and the health care provider's location will be entered to identify you within the MIIS. All the information given through the MIIS is secure and confidential.

### **What does it mean if I do not want to participate in the MIIS?**

By state law, your immunization information will be sent to the MIIS. Massachusetts' residents have the right to limit who may see their or their child's information in the MIIS. If you prefer that your or your child's immunization history **not** be shared with other healthcare providers who use the MIIS, you must complete the "MIIS Objection (or Withdrawal of Objection) Form" ([mass.gov/eohhs/docs/dph/cdc/immunization/miis-objection-form.pdf](http://mass.gov/eohhs/docs/dph/cdc/immunization/miis-objection-form.pdf)). If at any point you change your mind, you can fill out this same form to withdraw your objection and allow your information to be shared in the MIIS with other health care

### **For more information about this process at HUHS or to receive/submit the objection form, please contact:**

HUHS Health Information Services/Medical Records  
75 Mt. Auburn Street, 6<sup>th</sup> Floor  
Cambridge, MA 02138  
Phone: (617) 495-2055  
Fax: (617) 495-8077

### **For more information about the MIIS, visit:**

<http://www.mass.gov/eohhs/gov/departments/dph/programs/id/immunization/miis/public-health-cdc-miis-info-parents-and-patients.html>