## Registration Desk Job Aid

Activity	Procedure	Forms
Confirm vaccination appointment	1. Review patient's name, photo identification, and verify appointment time against master schedule  If not on master schedule, signal for clinic manager and/or security  If early for appointment, ask patient to wait in waiting area or return at scheduled time	1. Master Schedule
Form Completion	<ol> <li>Give patient clipboard &amp; pen with Patient Medical History and Consent Form</li> <li>Ask patient to complete form including demographic information on all sheets. Show forms and point out name, address, SS# etc.</li> <li>Instruct patient to complete Self Pre-Screening pages in Pre-vaccination packet.</li> </ol>	Patient medical questionnaire     Self screening forms     Smallpox Vaccine Record of Immunization.
Referral	Direct patient to video viewing area with clipboard and forms.	