

ICON (安大略省免疫网络) 網頁指南:

如何將疫苗接種記錄輸入 ICON

1. 前往toronto.ca/StudentVaccines，點擊**Report or Access Vaccination Records**

Parents/guardians can submit and/or access their child's vaccination information to Toronto Public Health.

Report or Access
Vaccination Records ▾

2. 點擊「**Get Started!**」按鈕。

Immunizations Keep Ontarians Healthy!

COVID-19 Vaccine



Get Started!

View or Submit Immunizations

3. 選擇您正在使用的設備類型。

What type of device are you using?

Personal Device

Public Device

4. 閱讀使用政策同意書，並選擇「**I Accept**」或「**I Do Not Accept**」。
如果您不接受，請致電 416-338-7600，並選擇選項 2 免疫接種以獲得進一步幫助。

Acceptable Use Policy

TERMS OF USE AGREEMENT

GENERAL

The City of Toronto, Public Health Division ("City") maintains information collected via the Immunization Connect Ontario ("ICON") website for the City of Toronto Health Unit. ICON is a web-based service provided by the Ontario Ministry of Health and Long-Term Care to enable the public to electronically submit and retrieve certain immunization information.

I Accept

I Do Not Accept

5. 輸入您孩子的安大略省健康卡號碼 (OHCN) 和其他資料 (包括姓名和出生日期)，或您孩子的安大略省免疫號碼 (OIID號碼)，驗證患者身份。輸入資料後，選擇「**Verify ID**」或「**Verify Patient**」。
如果您曾收到多倫多公共衛生局 (TPH) 的信件，可在信件的右上角查看OIID 號碼。OIID號碼是一個 10 位數字。如果您沒有OIID號碼，請致電416-338-7600選擇選項2免疫接種。

Verify with Health Card Number

Ontario Health Card Number

Version Code

[View Example](#)

Stock Control Number (SCN)

This 9 digit alpha-numeric code can be found on the back of your Health Card. [View Example](#).

This Health Card Number belongs to:

Me

A Dependant

Patient First Name

Patient Last Name

Sex

Male

Female

Other

Date of Birth (YYYY-MM-DD)

OR

Verify Patient with Immunization ID

Ontario Immunization ID

[Learn more](#) about the Ontario Immunization ID and where it can be found.

[Learn more](#) about the Ontario Immunization ID and where it can be found.

Verify ID

[Return to top of page](#)

6. 如需查看疫苗接種情況：

- 選擇疫苗接種記錄的查看對象：
 - Dependent** = 您是15歲以下兒童/學生的家長
 - Me** = 您是年滿16歲的學生
- 輸入 PIN 碼並選擇「**Verify Patient**」。如果您忘記了PIN，請點擊「**Forgot PIN**」。

請注意：如果您多次輸入錯誤的PIN碼，您的帳戶可能會被鎖定，您將無法使用ICON。請致電416-338-7600以獲得進一步的幫助。

Verify PIN to View Immunizations

Ontario Immunization ID

This Ontario Immunization ID belongs to:

Me

A Dependant

PIN

[Forgot PIN](#)

Verify Patient

7. 進入兒童/學生記錄後，即可參閱所需接種疫苗清單。
例如：

- 百日咳
- 白喉
- 破傷風

8. 點擊「**Submit Immunizations**」開始輸入尚未登記的疫苗接種紀錄。

Missing information from the record above?

Submit Immunizations

9. 如果您曾收到 多倫多公共衛生局（TPH）的信件，請選擇「**Yes**」，否則請選擇「**No**」。
10. 如果您輸入的所有免疫接種紀錄都是在安大略省內接種的，請選擇「**Yes**」。如果一種或多種疫苗是在安大略省以外地區接種的，請選擇「**No**」。如果您不清楚，請選擇「**Unsure**」。

Immunizations

Have you received a letter from Toronto Public Health asking for updated immunization information? ^

- ☒ Yes
☐ No

Were ALL the immunizations that you are entering received in Ontario? ^

- ☐ Yes
☐ No
☐ Unsure

11. 輸入您要在ICON中輸入的疫苗接種紀錄格式（按日期或疫苗/品牌名稱）
12. 選擇您要輸入的免疫接種格式：按日期/ Yellow Card（疫苗接種記錄本/黃卡），或免疫記錄分組。

What format is the immunization record you are entering? ^

☐ Grouped by Date / Yellow Card

2012-03-26

DTaP-IPV-Hib
Pneu-C
Rota-5

☐ Grouped by Immunization

DTaP-IPV-Hib

2012-03-26
2012-05-21
2012-07-17

Save and Proceed to Documents

不論您選擇哪個輸入方式，以下步驟都是相似的。

13. 點擊「Add a Date & Immunization」。螢幕上會出現一個彈出窗口，您可以在此輸入疫苗接種資料。

14. 輸入接種疫苗的日期。輸入日期後，輸入「Immunization/Brand Name」。在下拉清單中點擊正確名稱。

兒童滿兩個月大後，即可接受安大略省公共資助免疫計劃。在您輸入免疫接種日期及品牌名稱時，請參閱螢幕側面板、您的 Yellow Card（疫苗接種記錄本/黃卡）或相關的圖表。

15. 確認患者資料。
16. 在「提交者資料」畫面中輸入所有資料欄位。點擊「**Save and Proceed to Review**」。

Additional Information

Please enter any missing information below. Please note that changes will not appear until reviewed by your local public health unit.

Phone

This will be used to contact you if there are any questions about your submission.

Ontario Health Card Number (optional)

We can send you an email confirmation

Email (optional)

Confirm Email (optional)

We will email you a confirmation when your submission has been processed. We will not share this email address with anyone else.

Back to Documents

Save and Proceed to Review

17. 檢查並確保所有資料正確。點選「**Submit Immunizations**」。您會收到一個追蹤號碼備用。

Submit Immunizations

Age at Vaccination	Vaccines	Vaccine/Brand Name	Product Name
2 months	Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenzae type b	DTaP-IPV-Hib	Pediacel or Pentacel or Infanrix-IPV/Hib
	Pneumococcal Conjugate 13	Pneu-C-13	Prevnar 13
	Pneumococcal Conjugate 15	Pneu-C-15	Vaxneuvance
	Rotavirus	Rot-1	Rotarix
		Rot-5	RotaTeq
		Rota	N/A
4 months	Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenzae type b	DTaP-IPV-Hib	Pediacel or Pentacel or Infanrix-IPV/Hib
	Pneumococcal Conjugate 13	Pneu-C-13	Prevnar 13
	Pneumococcal Conjugate 15	Pneu-C-15	Vaxneuvance
	Rotavirus	Rot-1	Rotarix
		Rot-5	RotaTeq
		Rota	N/A
6 months	Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenzae type b	DTaP-IPV-Hib	Pediacel or Pentacel or Infanrix-IPV/Hib
12 months	Pneumococcal Conjugate 13	Pneu-C-13	Prevnar 13
	Pneumococcal Conjugate 15	Pneu-C-15	Vaxneuvance
	Meningococcal Conjugate	Men-C-C	Menjugate or NeisVac-C
	Measles, Mumps, Rubella	MMR	Priorix or MMR II
15 months	Varicella	Var	Varivax III or Varilrix
18 months	Diphtheria, Tetanus, Pertussis, Polio, Haemophilus influenzae type b	DTaP-IPV-Hib	Pediacel or Pentacel or INFANRIX
4-6 years	Measles, Mumps, Rubella, Varicella	MMRV	Proquad or Priorix-Tetra
	Tetanus, Diphtheria, Pertussis, Polio	Tdap-IPV	Adacel-Polio; Boostrix-Polio

Table for How to enter vaccinations into ICON

Grade 7 Note: Meningococcal vaccine is mandatory for school attendance.	Hepatitis B	HB	Recombivax HB; Engerix- B; Twinrix (HAHB) or Prehevbrio
	Meningococcal Conjugate ACYW-135	Men-C-ACYW	Menactra or Nimenerix or MenQuadfi or Menveo
	Human Papillomavirus	HPV-9	Gardasil 9
14-16 years	Tetanus, diphtheria, pertussis	Tdap	Adacel; Boostrix