

NEW JERSEY IMMUNIZATION INFORMATION SYSTEM (NJIIS)  
**DUPLICATE RECORD**

**INSTRUCTIONS:**

1. Identify the duplicate records and choose which Registry ID to retain and which one is the duplicate.
2. Make sure the information is correct and all columns are completed.
3. The NJIIS Site Administrator (SA) should verify the information on the form, and sign and date the bottom portion of the form to authorize that the Duplicate Registry ID to be merged with Retained Registry ID is accurate.
4. **Fax the completed form to Central Maternal and Child Health Consortia (MCHC) – NJIIS QA Unit at 732-246-3102.**  
 If you have any questions, please call the Central MCHC – NJIIS QA Unit at 732-937-5437.

Duplicate Registry ID Number	Registrant's Name of record to be merged (if different)	Registrant's DOB of record to be merged (if different)	Retained Registry ID Number	Registrant's Name of record to be retained	Registrant's DOB of record to be retained	Additional Information/ Comments	SA's Initial

**TO BE COMPLETED BY SITE ADMINISTRATOR**

Site Name		Site Telephone Number	Date Submitted
Name of Site Administrator		Signature of Site Administrator	
<b>TO BE COMPLETED BY NJIIS →</b>	Date of Merge	Merge Performed By	