Abstract

The aims of this study were to determine if alert stickers as a practice-based intervention would effectively increase childhood immunization rates and survey practitioners about the statewide immunization registry. The quantitative phase addressed the first aim and reviewed 103 medical charts for delayed immunizations for children aged 19-36 months, 43 were included in the 60-day alert sticker intervention. The qualitative phase addressed the second aim and included a self-administered questionnaire distributed to the practice managers at the intervention office locations. The major findings of quantitative phase were that great discrepancies exist between immunization documentation in the medical chart and the statewide registry and the alert stickers are not an effective practice based intervention to increase immunization. The major finding of the qualitative phase was that ‘time’ within the practitioner office was identified as the main barrier to consistent entry of immunizations into the statewide registry.