Clinic Tools
Clinic Address & Delivery Hour Update Guide

Have your clinic's address or delivery hours changed? Access your Clinic Information in PhilaVax by selecting **Clinic Tools** from the left-side navigation panel. Then click on **Clinic Information** and follow the guide below to update your clinic's address and delivery hours.

Having trouble updating your information? Please email us at **dphproviderhelp@phila.gov** for assistance.

Address Change

Primary Address = mailing address   **Secondary Address** = shipping address where vaccine will be sent

If **Primary** and **Secondary** addresses are the same:

1. From the left-side navigation panel, select **Address/Name** under **Clinic Information**.

2. Enter the date you want the address change to go into effect.

3. Click **Clear** to remove the current address.

4. Enter the changes you wish to make to the site's address.*

5. If the **Primary** and **Secondary** addresses are the same, make sure the box next to "Make Secondary Address same as Primary Address?" is checked.

   - Remember: Your **Primary Address** is your mailing address. Your **Secondary Address** is your shipping address where vaccine will be sent.

6. Press **Create** in the upper righthand corner to submit your change request.

If your address change is on the same day that you are placing an order, add a comment to the order.

Department of
Public Health
CITY OF PHILADELPHIA

Clinic Tools
Clinic Address & Delivery Hour Update Guide

Having trouble updating your information? Please email us at **dphproviderhelp@phila.gov** for assistance.

Address Change

Primary Address = mailing address	**Secondary Address** = shipping address where vaccine will be sent

If **Primary** and **Secondary** addresses are different:

1. Update your Primary address, then uncheck the bottom box.

2. Enter your Secondary address.

3. Click **Create** in the upper righthand corner to submit your address change after making sure both addresses are correct.

Clinic Address / Name Change Request ⓘ

Effective Date *

MM/DD/YYYY

Submit a request to update the clinic address, name or email address. When the request is approved or denied it will show up in the history below.

Clinic Name *
PROJ01 - PDPH- DIVISION OF DISEASE CONTROL

E-mail
CHRISTINE.WILSON@PHILA.GOV

Primary Address **1**   Clear

Street # *	**Prefix**	**Street Name ***	**Type**	**Suffix**
1101	▼	MARKET	ST ▼	▼

Unit Number	**P.O. Box**
12TH FL 1810A	

City *	**Out of State City**	**County ***	**Out of State County**
PHILADELPHIA ▼		PHILADELPHIA ▼	

State *	**Country**	**Zip Code ***	**Census Tract**
PENNSYLVANIA ▼	UNITED STATES ▼	19107 🔍 ⊗	▼

☐ Make Secondary Address same as Primary Address?

Secondary Address **2**   Copy From Primary Address   Clear

Street # *	**Prefix**	**Street Name ***	**Type**	**Suffix**
1101	▼	MARKET	ST ▼	▼

Unit Number	**P.O. Box**
12TH FL 1810A	

City *	**Out of State City**	**County ***	**Out of State County**
PHILADELPHIA ▼		PHILADELPHIA ▼	

State *	**Country**	**Zip Code ***	**Census Tract**
PENNSYLVANIA ▼	UNITED STATES ▼	19107 🔍 ⊗	▼

Department of
Public Health
CITY OF PHILADELPHIA

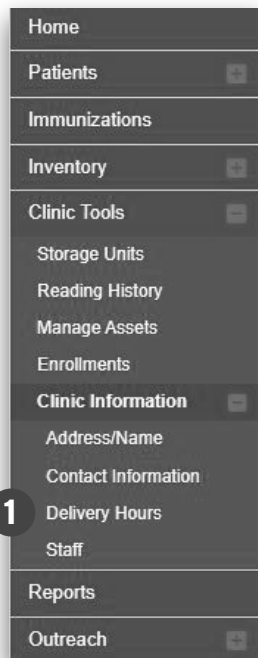# Clinic Tools
Clinic Address & Delivery Hour Update Guide

Having trouble updating your information? Please email us at **dphproviderhelp@phila.gov** for assistance.

Delivery Hours

1. Select **Delivery Hours** under **Clinic Information**.

2. Enter the times that deliveries will be accepted each day, Monday through Thursday. **Do not choose hours for Friday.** *At least one day must have 4 consecutive hours when you can accept shipments.*

3. If your office is closed for lunch during the day, account for the break (see example below).

4. Check this box if you want your shipment sent to your Secondary address and NOT your Primary address.

5. Write any special instructions that the shipping company should be aware of.

6. Click **Update**, located at both the top or bottom of the page, to save your changes.

Department of
Public Health
CITY OF PHILADELPHIA