# **Test Story**

# Description

 $The \ provider \ enters \ immunization \ data \ from \ a \ pharmacy \ as \ reported \ by \ the \ parent \ for \ Juana \ Mariana \ Gonzales.$ 

# Comments

No Comments

#### PreCondition

The EMR has recorded all of the pediatric demographic data in the record created for Juana Mariana Gonzales.

#### PostCondition

The immunization history from the pharmacy as reported by the parent is loaded into the record created for Juana Mariana Gonzales.

# **Test Objectives**

Record Past Immunizations: The EHR or other clinical software system allows providers to enter information about immunizations given elsewhere (e.g., by another doctor, at a public health clinic, pharmacy, etc.) with incomplete details.

### **Evaluation Criteria**

Evaluation Criteria: Vendor successfully records all immunization	on history data from the pharmacy as provided by the parent with all required attril	outes indicated by [Y]:
Historical Vaccine from Pharmacy Reported by Parent		
Entered BY	Sandra Molina	Y
Ordering Provider	Gina Ricci	Y
Entering Organization	Shoreline Pediatrics	Y
Vaccine Event information source	Historical information - from other provider (NIP001 02)	Y
Value/Text for Vaccine Type	Influenza vaccine	Y
Date/Time of Start of Administration	10/15/2013	Y
Vaccine Administered	influenza, live, intranasal, quadrivalent (CVX 149) FluMist Quadrivalent (NDC 66019-0301-10))	Y
Administered Amount (of Vaccine)	0.5	Y
Administered Units (of Measure)	mL	Y
Administration Notes		Y
Administering Provider	Gina Ricci	Y
Administered-at Location	Oceanview Pharmacy, 15 Post Road, Stamford Connecticut 06901	Y
Lot Number	8L4B3423	Y
Substance Expiration Date	7/1/2014	Y
Substance Manufacturer Name	MedImmune, LLC (MVX MED)	Y
Completion Status	СР	Y
Route of Administration	Nasal (NCIT NS)	Y
Administration Site		Y

#### Notes to Testers

No Note