

Description

The EHR vendor loads Polio immunization history data for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The immunization history for Polio known to the local practice is loaded into the record created for Juan Marcel 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 data known to the local practice as provided, with all required attributes indicated by [Y]:

Polio Dose 1 of 4			
Entered BY	Sandra Molina	Y	
Ordering Provider	Jane Carter	Y	
Entering Organization	Shoreline Pediatrics	Y	
Administration Notes (Vaccine Event information source)	Historical Immunization (NIP001 01)	Y	
Date/Time of Start of Administration	1/22/2012	Y	
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)	Y	
Administered Amount (of Vaccine)	0.5	Y	
Administered Units (of Measure)	mL	Y	
Administering Provider	Jane Carter	Y	
Administered-at Location	325 Shoreline Drive, Stamford Connecticut 06901	Y	
Lot Number	D333PV2444	Y	
Substance Expiration Date	10/4/2012	Y	
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y	
Completion Status	CP	Y	
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)	Y	
Administration Site	Left Deltoid (HL7 LD)	Y	
Polio Dose 2 of 4			
Entered BY	Sandra Molina	Y	
Ordering Provider	Carlos Herrera	Y	
Entering Organization	Shoreline Pediatrics	Y	
Vaccine Event information source	Historical Immunization (NIP001 01)	Y	
Value/Text for Vaccine Type	poliovirus vaccine, inactivated (CVX 10)	Y	
Date/Time of Start of Administration	3/22/2012	Y	
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)	Y	
Administered Amount (of Vaccine)	0.5	Y	
Administered Units (of Measure)	mL	Y	
Administering Provider	J. Martinez	Y	
Administered-at Location	333 Oceanview Lane, Stamford Connecticut 06901	Y	
Lot Number	D333PV4343	Y	
Substance Expiration Date	3/23/2012	Y	
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y	
Completion Status	CP	Y	
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)	Y	
Administration Site	Left Deltoid (HL7 LD)		
Polio Dose 3 of 4			
Entered BY	Sandra Molina		
Ordering Provider	Carlos Herrera		
Entering Organization	Shoreline Pediatrics		
Vaccine Event information source	Historical Immunization (NIP001 01)		
Value/Text for Vaccine Type	poliovirus vaccine, inactivated (CVX 10)		
Date/Time of Start of Administration	5/21/2012		

Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)
Administered Amount (of Vaccine)	0.5
Administered Units (of Measure)	mL
Administering Provider	J. Martinez
Administered-at Location	333 Oceanview Lane, Stamford Connecticut 06901
Lot Number	D335PV9654
Substance Expiration Date	2/22/2013
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)
Completion Status	CP
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)
Administration Site	Left Deltoid (HL7 LD)

Notes for Testers

No Note