

Description

The nurse administers the inactivated influenza vaccine
• Documents all required information for each vaccine

Comments

No Comments

Pre Condition

Order is placed for inactivated influenza vaccine.

Post Condition

The inactivated influenza vaccine administration is recorded in the EMR.

Test Objectives

Record Vaccine Administration: The EHR or other clinical software system records information about each vaccine administered. The EHR records this information as structured data elements, including, at a minimum: date administered, administering clinician, site of administration (e.g., left arm), immunization type, product, lot number, manufacturer, Vaccine Information Statement date, and quantity of vaccine/dose size.

Evaluation Criteria

EMR Records the following vaccine administration information:

Entered BY	Sandra Molina				
Ordering Provider	Frank Smith				
Entering Organization	Shoreline Pediatrics				
Vaccine Event information source (Administration Notes)	New immunization record (NIP001 00)				
Value/Text for Vaccine Type 	Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161), FLUZONE QUADRIVALENT (NDC 49281-0514-25)				
Date/Time of Start of Administration	Current Date				
Vaccine Administered	Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161), FLUZONE QUADRIVALENT (NDC 49281-0514-25)				
Administered Amount (of Vaccine)	0.25				
Administered Units (of Measure)	mL				
Administering Provider	Sandra Molina				
Administered-at Location	400 Shoreline Drive, Stamford Connecticut 06901				
Lot Number	D8043IN8855				
Substance Expiration Date	8/25/2015				
Substance Manufacturer Name	Sanofi Pasteur (MVX PMC)				

Completion Status	CP
Route of Administration	Intramuscular (NCIT C28161, HL70162: IM)
Administration Site	Left Thigh (HL7 LT)
VFC Eligibility	No

Notes for Testers

No Note

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