

**Description**

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

**Comments**

No Comments

**Pre Condition**

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

**Post Condition**

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.

**Request/Receive Patient Immunization Data and Identify Source:** The EHR or other clinical software is able to store immunization history accepted electronically from other sources (such as a public health immunization registry consistent with HL7 version 2.5.1, Implementation Guide for Immunization Messaging Release 1.5) or communicated by the patient and manually entered by the clinician. When viewing such information, the provider can determine which immunizations were administered by the practice, which were entered manually as patient-reported, and which were accepted electronically from the public health registry.

Supporting data for:

**Compare Public Health Immunization Registry (IIS) Immunization History to EHR Immunization History:** The public health immunization registry has returned the requested immunization history for a patient. The EHR is able to display the immunization history received from the registry as well as the immunization history already present in the EHR so that a user can compare them. The EHR provides a way for the provider to view both histories, determine what is different (if anything), and update the existing EHR immunization history with new information from the public health registry if he or she chooses to do so. The system must store the new information as structured data as part of the patient's local immunization history and include the time of the update and the source of the new information.

**Evaluation Criteria**

Evaluation Criteria: Vendor successfully records all immunization history data from the pharmacy as provided by the parent with all required attributes 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 (Administration Notes) | Historical information - from other provider (NIP001 02)                                      | Y |  |
| Value/Text for Vaccine Type                             | Influenza vaccine   | Y |  |
| Date/Time of Start of Administration                    | 10/15/2014  | Y |  |
| Vaccine Administered                                    | influenza, live, intranasal, quadrivalent (CVX 149) FluMist Quadrivalent (NDC 66019-0301-10)) | Y |  |
| Administered Amount (of Vaccine)                        | 0.2   | Y |  |
| Administered Units (of Measure)                         | mL  | 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                               | 06/03/2015  | Y |  |
| Substance Manufacturer Name                             | MedImmune, LLC (MVX MED)  | Y |  |
| Completion Status                                       | CP  | Y |  |
| Route of Administration                                 | Nasal (NCIT C28384)   | Y |  |
| Administration Site                                     |   | Y |  |

**Notes for Testers**

No Note