<u></u> ]	Description —	
	The EHR vendor loads Hib immunization history data for Juana Mariana Gonzales.	
_	Comments—	
	No Comments	
<u>-</u> ]	PreCondition—	
	The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.	
<u> </u>	PostCondition———————————————————————————————————	
	The immunization history for Hib known to the local practice is loaded into the record created for Juana Mariana Gonzales.	
	Fest 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]:	
	I I	

Hib Dose 1 of 4			
Entered BY	Sandra Molina	Y	
Ordering Provider	Carlos Herrera	Y	
Entering Organization	Shoreline Pediatrics	Y	
Administration Notes (Vaccine Event information source)	Historical Immunization (NIP001 01)	Y	
Date/Time of Start of Administration	1/22/2010	Y	
Vaccine Administered	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00)	Y	
Administered Amount (of Vaccine)	0.5	Y	
Administered Units (of Measure)	mL	Y	
Administering Provider	Y		
Administered-at Location	333 Oceanview Lane, Stamford Connecticut 06901	Y	
Lot Number	7M54K9245	Y	
Substance Expiration Date	3/24/2010	Y	
Substance Manufacturer Name	Merck Sharp & Dohme Corp (MVX MSD)	Y	
Completion Status	CP	Y	
Route of Administration	Intramuscular (NCIT C28161, HL70162: IM)	Y	
Administration Site	Right Thigh (HL7 RT)	Y	
Hib 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	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00)	Y	
Date/Time of Start of Administration	3/23/2010	Y	
Vaccine Administered	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) ENGERIX-B (NDC 58160-0820-11)	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	7M55K3342	Y	$\neg   \neg$
Substance Expiration Date	10/30/2010	Y	$\neg  $
Substance Manufacturer Name	Merck Sharp & Dohme Corp (MVX MSD)	Y	
Completion Status	СР	Y	
Route of Administration	Intramuscular (NCIT IM)	Y	
Administration Site	Left Thigh (HL7 LT)		
		i	$\neg$

	Hib 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	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00)	
	Date/Time of Start of Administration	5/22/2010	
	Vaccine Administered	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) ENGERIX-B (NDC 58160-0820-11)	
	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	7M75K4566	
	Substance Expiration Date	5/23/2010	
	Substance Manufacturer Name	Merck Sharp & Dohme Corp (MVX MSD)	
	Completion Status	СР	
	Route of Administration	Intramuscular (NCIT IM)	
	Administration Site	RightThigh (HL7 RT)	
Hib Dose 4 of 4			_
Entered BY		Sandra Molina	
Ordering Provider		Carlos Herrera	
Entering Organization	n	Shoreline Pediatrics	
Vaccine Event inform	nation source	Historical Immunization (NIP001 01)	
Value/Text for Vaccine Type		Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00)	
Date/Time of Start of	Administration	2/21/2011	
Vaccine Administered		Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00)	
Administered Amoun	it (of Vaccine)	0.5	_
Administered Units (	of Measure)	mL	
Administering Prov	ider	J. Martinez	
Administered-at Loca	ation	333 Oceanview Lane, Stamford Connecticut 06901	
Lot Number		7M53K5534	
Substance Expiration	Date	2/22/2011	
Substance Manufactu	rer Name	Merck Sharp & Dohme Corp (MVX MSD)	
Completion Status		СР	
Route of Administrat	ion	Intramuscular (NCIT IM)	
Administration Site		Left Deltoid (HL7 LD)	

## Notes to Testers-

No Note