

Description	
	The EHR vendor loads Hib immunization history data for Juana Mariana Gonzales.

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Comments

No Comments

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

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Post Condition	
The immunization history for Hib known to the local practice is loaded into the	record created for Juana Mariana Gonzales.

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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.

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Evaluation Criteria		
Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:		
Hib Dose 1 of 4		

Evaluation Criteria: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:
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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	7M55K53742	Y				
Substance Expiration Date	10/30/2010	Y				
Substance Manufacturer Name	Merck Sharp & Dohme Corp (MVX MSD)	Y				
Completion Status	CP	Y				
Route of Administration	Intramuscular (NCIT IM)	Y				
Administration Site	Left Thigh (HL7 LT)	 				
 	 	 				

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	CP
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	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	2/21/2011
Vaccine Administered	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00)
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	7M53K5534
Substance Expiration Date	2/22/2011
Substance Manufacturer Name	Merck Sharp & Dohme Corp (MVX MSD)
Completion Status	CP
Route of Administration	Intramuscular (NCIT IM)
Administration Site	Left Deltoid (HL7 LD)

Notes for Testers

No Note

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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: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

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) INGERIX-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
Substance Expiration Date	10/30/2010	Y
Substance Manufacturer Name	Merck Sharp & Dohme Corp (MVX MSD)	Y
Completion Status	CP	Y
Route of Administration	Intramuscular (NCIT IM)	Y
Administration Site	Left Thigh (HL7 LT)	
 	 	
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)	
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	CP	
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	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)
Date/Time of Start of Administration	2/21/2011
Vaccine Administered	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49)
Administered Amount (of Vaccine)	0.5
Administered Units (of Measure)	mL
Administering Provider	J. Martinez
Administered-at Location	333 Oceanview Lane, Stamford Connecticut
Lot Number	7M53K5534
Substance Expiration Date	2/22/2011
Substance Manufacturer Name	Merck Sharp & Dohme Corp (MVX MSD)
Completion Status	CP
Route of Administration	Intramuscular (NCIT IM)
Administration Site	Left Deltoid (HL7 LD)

No Note