

Description
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The nurse administers the MMRV vaccine
• Documents all required information for each vaccine
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Comments
No Comments
Pre Condition
Order is placed for MMRV vaccine.
Post Condition
The MMRV vaccination is recorded in the EMR.
Test Objectives
<b>Record Vaccine Administration:</b> 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 [Y]
Ordering
Provider: Frank Smith [Y]
Entering
Organization: Shoreline Pediatrics [Y]
Vaccine Event information source: New immunization record (NIP001 00) [Y] (also known as administration notes)
Vaccine Type: measles, mumps, rubella, and varicella virus vaccine (CVX 94 ), [Y]
Date/Time of Start of Administration: Current Date [Y]
Vaccine Administered: measles, mumps, rubella, and varicella virus vaccine (CVX 94 ), ProQuad (NDC 00006-4999-00) [Y]
Dose Number: 2
Doses in Series: 2
Administered Amount (of Vaccine): 0.5 [Y]
Administered Units (of Measure): mL [Y]
Administering Provider: Sandra Molina [Y]
Administered-at Location: 400 Shoreline Drive, Stamford Connecticut 06901 [Y]
Lot Number:
Substance Expiration Date: 8/15/2015 [Y]
Substance Manufacturer Name: Merck Sharp & Dohme Corp (MVX MSD) [Y]
Completion Status: CP [Y]
Route of Administration: Subcutaneous (NCIT C38299, HL70162: SC) [Y]
Administration Site: Left Deltoid (HL70162 LD)
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Notes for Testers
No Note

Order is placed for MMRV vaccine.

The MMRV vaccination is recorded in the EMR.

EMR Records the following vaccine administration information:

No Note