

Description

The EHR vendor loads Polio immunization history data for Juan Marcel Gonzales.

Comments

No Comments

Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

Post Condition

The immunization history for Polio known to the local practice is loaded into the record created for Juan Marcel 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.

Evaluation Criteria

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

Polio Dose 1 of 4	 				
Entered BY	Sandra Molina	Y			
Ordering Provider	Jane Carter	Y			
Entering Organization	Shoreline Pediatrics	Y			
Administration Notes (Vaccine Event information source)	Historical Immunization (NIP001 01)	Y			
Date/Time of Start of Administration	1/22/2012	Y			
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)	Y			
Administered Amount (of Vaccine)	0.5	Y			
Administered Units (of Measure)	mL	Y			
Administering Provider	Jane Carter	Y			
Administered-at Location	325 Shorline Drive, Stamford Connecticut 06901	Y			
Lot Number	D333PV2444	Y			
Substance Expiration Date	10/4/2012	Y			
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y			
Completion Status	CP	Y			
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)	Y			
Administration Site	Left Deltoid (HL7 LD)	Y			
 	 	 			
Polio 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 	poliovirus vaccine, inactivated (CVX 10)	Y			
Date/Time of Start of Administration	3/22/2012	Y			
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)	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	D333PV4343	Y			
Substance Expiration Date	3/23/2012	Y			
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y			

Completion Status	CP	Y				
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)	Y				
Administration Site	Left Deltoid (HL7 LD)	 				
Polio 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 	poliovirus vaccine, inactivated (CVX 10)					
Date/Time of Start of Administration	5/21/2012					
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)					
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	D335PV9654					
Substance Expiration Date	2/22/2013					
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)					
Completion Status	CP					
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)					
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.

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Polio Dose 1 of 4	 	 	
Entered BY	Sandra Molina	Y	
Ordering Provider	Jane Carter	Y	
Entering Organization	Shoreline Pediatrics	Y	
Administration Notes (Vaccine Event information source)	Historical Immunization (NIP001 01)	Y	
Date/Time of Start of Administration	1/22/2012	Y	
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)	Y	
Administered Amount (of Vaccine)	0.5	Y	
Administered Units (of Measure)	mL	Y	
Administering Provider	Jane Carter	Y	
Administered-at Location	325 Shorline Drive, Stamford Connecticut 06901	Y	
Lot Number	D333PV2444	Y	
Substance Expiration Date	10/4/2012	Y	
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y	
Completion Status	CP	Y	
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)	Y	

Administration Site	Left Deltoid (HL7 LD)	Y
 	 	
Polio 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 	poliovirus vaccine, inactivated (CVX 10)	Y
Date/Time of Start of Administration	3/22/2012	Y
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)	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	D333PV4343	Y
Substance Expiration Date	3/23/2012	Y
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y
Completion Status	CP	Y
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)	Y
Administration Site	Left Deltoid (HL7 LD)	
Polio 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 	poliovirus vaccine, inactivated (CVX 10)	
Date/Time of Start of Administration	5/21/2012	
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Administering Provider	J. Martinez	
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Completion Status	CP	
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Administration Site	Left Deltoid (HL7 LD)	
 		

No Note