

### Description

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

### Comments

No Comments

### PreCondition

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

### PostCondition

The immunization history for DTaP known to the local practice 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.

### Evaluation Criteria

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

DTaP Dose 1 of 5				
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	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01)	Y		
Dose Number	1			
Doses in Series	5			
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	D409QS2341	Y		
Substance Expiration Date	11/30/2011	Y		
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y		
Completion Status	CP	Y		
Route of Administration	Intramuscular (NCIT C28161, HL70162: IM)	Y		
Administration Site	Left Thigh (HL7 LT)	Y		
DTaP Dose 2 of 5				
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	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01)	Y		
Date/Time of Start of Administration	3/23/2010	Y		
Vaccine Administered	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) ENGRIX-B (NDC 58160-0820-11)	Y		
Dose Number	2			
Doses in Series	5			
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	D409QS2433	Y		
Substance Expiration Date	9/4/2011	Y		
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y		
Completion Status	CP	Y		
Route of Administration	Intramuscular (NCIT IM)	Y		
Administration Site	Right Thigh (HL7 RT)			
Adverse Reaction	31044-1 Reaction, VXC12^fever of >40.5C (105F) within 48 hours of dose			

DTaP Dose 3 of 5		
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	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01)	
Date/Time of Start of Administration	5/22/2010	
Vaccine Administered	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) ENGRIX-B (NDC 58160-0820-11)	
Dose Number	3	
Doses in Series	5	
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	D409QS3255	
Substance Expiration Date	12/1/2010	
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	
Completion Status	CP	
Route of Administration	Intramuscular (NCIT IM)	
Administration Site	Left Thigh (HL7 LT)	

  

DTaP Dose 4 of 5		
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	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01)	
Date/Time of Start of Administration	2/21/2011	
Vaccine Administered	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) ENGRIX-B (NDC 58160-0820-11)	
Dose Number	4	
Doses in Series	5	
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	D409QS249	
Substance Expiration Date	3/1/2011	
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	
Completion Status	CP	
Route of Administration	Intramuscular (NCIT IM)	
Administration Site	Left Deltoid (HL7 LD)	

Notes to Testers	
No Note	