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



-PreCondition-

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

-PostCondition -

The immunization history for HepA 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]: HepA Dose 1 of 2 Entered BY Sandra Molina Ordering Provider Jane Carter Y Entering Organization Shoreline Pediatrics Administration Notes (Vaccine Event information source) Historical Immunization (NIP001 01) Y Date/Time of Start of Administration 11/23/2011 Y hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-52) Vaccine Administered Dose Number 1 2 Doses in Series 0.5 Y Administered Amount (of Vaccine) Y Administered Units (of Measure) mL Administering Provider Jane Carter 325 Shorline Drive, Stamford Connecticut 06901 Y Administered-at Location Lot Number 6359RT33 Y Substance Expiration Date 1/4/2012 Y Y Substance Manufacturer Name GlaxoSmithKline Biologicals SA (MVX SKB) Completion Status Route of Administration Intramuscular (NCIT C28161, HL70162: IM) Administration Site Right Deltoid (HL7 RD) Y HepA Dose 2 of 2 Entered BY Sandra Molina Y Y Ordering Provider Carlos Herrera Entering Organization Shoreline Pediatrics Y Vaccine Event information source Historical Immunization (NIP001 01) Y Value/Text for Vaccine Type Y hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) Date/Time of Start of Administration hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) Y Vaccine Administered HAVRIX (NDC 58160-0825-52) Administered Amount (of Vaccine) 0.5 Y Y Administered Units (of Measure) mL Y Administering Provider J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 Administered-at Location 6359RT48 Lot Number 9/11/2012 Substance Expiration Date Y

GlaxoSmithKline Biologicals SA (MVX SKB)

Intramuscular (NCIT C28161, HL70162: IM)

Left Deltoid (HL7 LD)

Y

Y

Notes to Testers

Completion Status

Route of Administration
Administration Site

Substance Manufacturer Name

No Note