	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.
	The EMR has recorded an 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
j	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]:

Ordering Provider	Sandra Molina	Y
ordering riovider	Carlos Herrera	Y
	Shoreline Pediatrics	Y
Administration Notes (Vaccine Event information ource)	Historical Immunization (NIP001 01)	Y
	1/22/2010	Y
Vaccine Administered	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01)	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	D409QS2341	Y
Substance Expiration Date	11/30/2011	Y
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y
	CP	Y
-	Intramuscular (NCIT C28161, HL70162: IM)	Y
	Left Thigh (HL7 LT)	Y
OTaP Dose 2 of 5		
	Sandra Molina	Y
	Carlos Herrera	Y
<u> </u>	Shoreline Pediatrics	Y
	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
	3/23/2010	Y
Vaccine Administered	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-01) ENGERIX-B (NDC 58160-0820-11)	Y
,	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
	9/4/2011	Y
Substance Expiration Date	Sanofi Pasteur Inc (MVX PMC)	Y
1		
Substance Manufacturer Name	CP	Y
Substance Manufacturer Name Completion Status	CP	Y Y
Substance Manufacturer Name Completion Status Route of Administration		

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) 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	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) 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	D409QS249		
Substance Expiration Date	3/1/2011		
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)		
Completion Status	СР		
Route of Administration	Intramuscular (NCIT IM)		
Administration Site	Left Deltoid (HL7 LD)		

DTaP Dose 3 of 5

Notes to Testers			
No Note			