

#### Description

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

#### Comments

No Comments

#### PreCondition

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

#### PostCondition

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)<br>IPOL (NDC 49281-0860-55) | Y |
| Dose Number   | 1  |   |
| Doses in Series   | 4  |   |
| Administered Amount (of Vaccine)                        | 0.5  | Y |
| Administered Units (of Measure)                         | mL   | Y |
| Administering Provider                                  | Jane Carter  | Y |
| Administered-at Location                                | 325 Shoreline 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)<br>IPOL (NDC 49281-0860-55) | Y |
| Dose Number   | 2  |   |
| Doses in Series   | 4  |   |
| 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)<br>IPOL (NDC 49281-0860-55) |   |
| Dose Number   | 3  |   |
| Doses in Series   | 4  |   |
| 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)  |   |

No Note