Evaluated Immunization History and Immunization Forecast

Test Case ID	IZ-QR-1_Query_Child
Juror ID	
Juror Name	
HIT System Tested	
Inspection Date/Time	

	Pass	Fail
Inspection Settlement (Pass/Fail)	☐	☐

Reason Failed	
Juror Comments	

DISPLAY VERIFICATION

This Test Case-specific Juror Document provides a checklist for the Tester to use during certification testing for assessing the EHR technology's ability to display required core data elements from the information received in the Evaluated Immunization History and Immunization Forecast Z42 response message. Additional data from the message or from the EHR are permitted to be displayed by the EHR. Grayed-out fields in the Juror Document indicate where no data for the data element indicated were included in the Z42 message for the given Test Case.

The format of this Juror Document is for ease-of-use by the Tester and does not indicate how the EHR display must be designed.

The Evaluated Immunization History and Immunization Forecast data shown in this Juror Document are derived from the Z42 message provided with the given Test Case; equivalent data are permitted to be displayed by the EHR. The column headings are meant to convey the kind of data to be displayed; equivalent labels/column headings are permitted to be displayed by the EHR.

Patient Information

Patient Identifier	Patient Name	DOB	Gender	Tester Comment
171122	Cameron A Fairchild	02/14/2009	Male	

When displayed in the EHR with the Evaluated Immunization History and Immunization Forecast, these patient demographics data may be derived from either the received immunization message or the EHR patient record. When displaying demographics from the patient record, the EHR must be able to demonstrate a linkage between the demographics in the message (primarily the patient ID in PID-3.1) and the patient record used for display to ensure that the message was associated with the appropriate patient.

Evaluated Immunization History and Immunization Forecast

Immunization Schedule Used	Tester Comment
ACIP	

Evaluated Immunization History

Vaccine Group	Vaccine Administered	Date Administered	Valid Dose	Validity Reason	Completion Status*	Tester Comment
Hep B NOS	Hep B Unspec	04/15/2009	YES		Complete	
HIB NOS	HIB PRP-T	03/14/2009	NO	Too Young	Complete	
Hep B NOS	DTAP-Hep B-IPV	10/11/2009	YES		Complete	
IPV	DTAP-Hep B-IPV	10/11/2009	YES		Complete	
DTAP	DTAP-Hep B-IPV	10/11/2009	YES		Complete	
Hep B NOS	Hep BPEDS	04/11/2010	YES		Complete	
MMR	MMR	04/15/2010	YES		Complete	

* "Completion Status" refers to the status of the dose of vaccine administered on the indicated date and may be interpreted as "Dose Status". A status of "Complete" means that the vaccine dose was "completely administered" as opposed to "partially administered".

Immunization Forecast

Vaccine Group	Due Date	Earliest Date To Give	Latest Date to Give	Tester Comment
MMR	02/14/2015	06/14/2010		
IPV	02/14/2010			
DTAP	02/14/2010			