

### Description

The physician accesses the record for Juan Marcel Marina and:

- Accepts the vaccines provided by the registry as this is a new patient and there are no prior vaccines recorded

### Comments

There is no reconciliation step as there are no historical immunizations in the EMR. All will be imported from the Z42 response.

### Pre-condition

A Z44 query has been submitted to the Immunization Registry and a Z42 response is provided back to the EMR and the response is available in the EMR for reconciliation and import.

### Post-Condition

Evaluated Immunization History returned from the registry is reconciled and imported into the patient record (Juan Marcel Marina)

### Test Objectives

**Real Time Request/Receive Patient Immunization History:** The system sends a request to the public health immunization registry "on demand" (e.g., those without scheduled appointments). The request includes the identifying information the immunization registry needs to match each patient with those in the registry including, if present, the mother's maiden name, a multiple birth indicator, and the birth order. The request also is sent in a pre-determined format the registry can read and interpret (Query Response Grammar (RSP) - HL7 version 2.5.1 Implementation Guide for Immunization Messaging Release 1.5).

**Request/Receive Patient Immunization Data and Identify Source:** The EHR or other clinical software is able to store immunization history accepted electronically from other sources (such as a public health immunization registry consistent with HL7 version 2.5.1, Implementation Guide for Immunization Messaging Release 1.5) or communicated by the patient and manually entered by the clinician. When viewing such information, the provider can determine which immunizations were administered by the practice, which were entered manually as patient-reported, and which were accepted electronically from the public health registry.

**Compare Public Health Immunization Registry (IIS) Immunization History to EHR Immunization History:** The public health immunization registry has returned the requested immunization history for a patient. The EHR is able to display the immunization history received from the registry as well as the immunization history already present in the EHR so that a user can compare them. The EHR provides a way for the provider to view both histories, determine what is different (if anything), and update the existing EHR immunization history with new information from the public health registry if he or she chooses to do so. The system must store the new information as structured data as part of the patient's local immunization history and include the time of the update and the source of the new information.

**Review Patient Immunization History:** To assist with the ordering process, the EHR or other clinical software system allows a user to specify standard views of patient immunization information for each vaccine dose administration, including patient-specific data (e.g., age on dates of administration, etc.).

Supporting data for:

**Receive Dose Not Indicated Alert for Single Vaccine Order:** The EHR or other clinical software system notifies the provider in instances when there are single or combination vaccine orders that are inconsistent with the expected timing intervals included in the vaccine forecast. Inconsistencies include suggestion of different date(s) for ordering the vaccine(s) or indication the vaccine(s) is/are no longer required.

## Evaluation Criteria

1. The EMR displays the information returned from the Immunization Registry according to the Juror Document.
2. The user imports returned vaccinations as follows using only the vaccination, and administration dates returned from the Immunization Registry:

### a. Vaccinations Imported:

hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) administered 3/3/2017  
hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) administered 4/15/2017

diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) administered 5/15/2017  
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) administered 7/13/2017  
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) administered 9/16/2017  
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) administered 9/20/2018

Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) administered 5/14/2017  
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) administered 7/21/2017  
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) administered 9/27/2017  
Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) administered 5/4/2018

poliovirus vaccine, inactivated (CVX 10) administered 5/14/2017  
poliovirus vaccine, inactivated (CVX 10) administered 7/21/2017  
poliovirus vaccine, inactivated (CVX 10) administered 10/15/2017

pneumococcal conjugate vaccine, 13 valent (CVX 133) administered 5/18/2017  
pneumococcal conjugate vaccine, 13 valent (CVX 133) administered 7/21/2017  
pneumococcal conjugate vaccine, 13 valent (CVX 133) administered 9/27/2017  
pneumococcal conjugate vaccine, 13 valent (CVX 133) administered 5/4/2018

rotavirus, live, monovalent vaccine (CVX 119) administered 5/18/2017  
rotavirus, live, monovalent vaccine (CVX 119) administered 7/21/2017

Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) administered 9/27/2017  
Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) administered 10/20/2018

measles, mumps, rubella virus vaccine (CVX 03) administered 6/20/2018

## Notes

The EMR must minimally display the vaccine administered and the date of the immunization.