


Description	
The nurse administers the inactivated influenza vaccine  Documents all required information for each vaccine	
Comments	
No Comments	
Pre Condition	
Order is placed for inactivated influenza vaccine.	
Post Condition	
The inactivated influenza vaccine administration is recorded in the EMR.	
Test Objectives	
Record Vaccine Administration: The EHR or other clinical software system records information about each vaccine administered. The EHR records this information as structured data elements, including, at a minimum: date administered, administering clinician, site of administration (e.g., left arm), immunization type, product, lot number, manufacturer, Vaccine Information Statement date, and quantity of vaccine/dose size.	
Evaluation Criteria	
EMR Records the following vaccine administration information:	
Entered BY	Sandra Molina
Ordering Provider	Frank Smith
Entering Organization	Shoreline Pediatrics
Vaccine Event information source (Administration Notes)	New immunization record (NIP001 00)
Value/Text for Vaccine Type	Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161), FLUZONE QUADRIVALENT (NDC 49281-0514-25)
Date/Time of Start of Administration	Current Date
Vaccine Administered	Influenza, injectable,quadrivalent, preservative free, pediatric (CVX 161), FLUZONE QUADRIVALENT (NDC 49281-0514-25)
Administered Amount (of Vaccine)	0.25
Administered Units (of Measure)	mL
Administering Provider	Sandra Molina
Administered-at Location	400 Shoreline Drive, Stamford Connecticut 06901
Lot Number	D8043IN8855
Substance Expiration Date	10/31/2016
Substance Manufacturer Name	Sanofi Pasteur (MVX PMC)
Completion Status	CP
Route of Administration	Intramuscular (NCIT C28161, HL70162: IM)
Administration Site	Left Thigh (HL7 LT)
VFC Eligibility	No
Notes for Testers	
No Note	

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