

**Description**

The EHR vendor loads immunization history data from another practice into the record for Juana Mariana Gonzales.

**Comments**

No Comments

**Pre Condition**

The EMR has recorded all of the pediatric demographic in the record created for Juana Mariana Gonzales.

**Post Condition**

The immunization history from another practice is loaded into the record created for Juana Mariana 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 history data from another practice as provided, with all required attributes indicated by [Y]:

Historical Vaccine from Another Practice - Dtap				
Entered BY	Sandra Molina	Y		
Ordering Provider	J. Rodriguez	Y		
Entering Organization	Shoreline Pediatrics	Y		
Vaccine Event information source (Administration Notes)	Historical information - from parent's written record (NIP001 03)	Y		
Value/Text for Vaccine Type	DTaP	Y		
Date/Time of Start of Administration	11/20/2014	Y		
Vaccine Administered	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) (NDC 49281-0286-01)	Y		
Administered Amount (of Vaccine)	0.5	Y		
Administered Units (of Measure)	mL	Y		
Administering Provider	Linda Casera	Y		
Administered-at Location	4253 Standish Way, Stamford Connecticut 06903	Y		
Lot Number	D643QS8243	Y		
Substance Expiration Date	12/1/2014	Y		
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y		
Completion Status	CP	Y		
Route of Administration	Intramuscular (NCIT C28161)	Y		
Administration Site	Left Deltoid (HL70163 LD)	Y		
Historical Vaccine from Another Practice - Polio				
Entered BY	Sandra Molina	Y		
Ordering Provider	J. Rodriguez	Y		
Entering Organization	Shoreline Pediatrics	Y		
Vaccine Event information source	Historical information - from parent's written record (NIP001 03)	Y		
Value/Text for Vaccine Type	poliovirus vaccine, inactivated (CVX 10)	Y		
Date/Time of Start of Administration	2/21/2012	Y		
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10, NDC 49281-0860-55)	Y		
Administered Amount (of Vaccine)	0.5	Y		
Administered Units (of Measure)	mL	Y		
Administering Provider	Linda Casera	Y		
Administered-at Location	4253 Standish Way, Stamford Connecticut 06903	Y		
Lot Number	D335PV9644	Y		
Substance Expiration Date	2/22/2013	Y		

Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y	
Completion Status	CP	Y	
Route of Administration	Subcutaneous (NCIT C28399)	Y	
Administration Site	Left Deltoid (HL70163 LD)	Y	
Reaction	Adverse Reaction of (VXC12^fever of >40.5C (105F) within 48 hours of dose^CDCPHINVS	Y	

Notes for Testers
No Note