

Description

The EHR vendor loads HepB immunization history data for Mariela Gonzales Morales.

Comments

No Comments

PreCondition

The EMR has recorded all of the pediatric demographic in the record created for Mariela Gonzales Morales.

PostCondition

The immunization history for HepB known to the local practice is loaded into the record created for Mariela Gonzales Morales.

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]:

| | | | |
|---|--|---|--|
| HepB Dose 1 of 3 | | | |
| Entered BY | Sandra Molina | Y | |
| Ordering Provider | Justin Parker | Y | |
| Entering Organization | Shoreline Pediatrics | Y | |
| Administration Notes (Vaccine Event information source) | Historical Immunization (NIP001 01) | Y | |
| Date/Time of Start of Administration | 3/30/2015 | Y | |
| Vaccine Administered | hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) | Y | |
| Dose Number | 1 | | |
| Doses in Series | 3 | | |
| Administered Amount (of Vaccine) | 0.5 | Y | |
| Administered Units (of Measure) | mL | Y | |
| Administering Provider | Jane Carter | Y | |
| Administered-at Location | 15 Atlantic Avenue, Stamford, CT, 06903 | Y | |
| Lot Number | 6332FK34 | Y | |
| Substance Expiration Date | 12/14/2015 | Y | |
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA (MVX SKB) | Y | |
| Completion Status | CP | Y | |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y | |
| Administration Site | Left Thigh (HL7 LT) | Y | |

Notes to Testers

No Note