### Description

The EHR vendor loads Polio immunization history data for Juan Marcel Gonzales.

#### Comments

No Comments

Administered Units (of Measure)

Administering Provider

Administered-at Location

Substance Expiration Date

Substance Manufacturer Name

Lot Number

#### Pre Condition

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

#### **Post Condition**

The immunization history for Polio known to the local practice is loaded into the nbsp;record created for Juan Marcel 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: & nbsp; Vendor successfully records all immunization data known to the local practice as provided, with

all required attributes indicated by [Y]: Polio Dose 1 of 4 Entered BY Sandra Molina Y Ordering Provider Jane Carter Y Entering Organization Shoreline Pediatrics Y Administration Notes (Vaccine Event information Y Historical Immunization (NIP001 01) source) 1/22/2012 V Date/Time of Start of Administration poliovirus vaccine, inactivated (CVX 10) Vaccine Administered Y IPOL (NDC 49281-0860-55) Administered Amount (of Vaccine) 0.5 Administered Units (of Measure) mL Y Administering Provider Y Jane Carter 325 Shorline Drive, Stamford Connecticut 06901 Y Administered-at Location D333PV2444 Lot Number Substance Expiration Date 10/4/2012 Y Substance Manufacturer Name Y Sanofi Pasteur Inc (MVX PMC) Completion Status Y Subcutaneous (NCIT C38299, HL70162: SC) Y Route of Administration Administration Site Left Deltoid (HL7 LD) Polio Dose 2 of 4 Entered BY Sandra Molina Y Ordering Provider Carlos Herrera Y Entering Organization Shoreline Pediatrics Y Vaccine Event information source Historical Immunization (NIP001 01) Y Value/Text for Vaccine Type Y poliovirus vaccine, inactivated (CVX 10) Date/Time of Start of Administration 3/22/2012 poliovirus vaccine, inactivated (CVX 10) Y Vaccine Administered IPOL (NDC 49281-0860-55) Administered Amount (of Vaccine) 0.5

mL

J. Martinez

D333PV4343

Sanofi Pasteur Inc (MVX PMC)

3/23/2012

333 Oceanview Lane, Stamford Connecticut 06901

Y

Y

Y

Completion Status	CP	Y	
Route of Administration	Subcutaneous (NCIT C38299, HL70162:	SC) Y	
Administration Site	Left Deltoid (HL7 LD)		
Polio Dose 3 of 4			
Entered BY	Sandra Molina		
Ordering Provider	Carlos Herrera		
Entering Organization	Shoreline Pediatrics		
Vaccine Event information source	Historical Immunization (NIP001 01	)	
Value/Text for Vaccine Type	poliovirus vaccine, inactivated (CVX	(10)	
Date/Time of Start of Administration	5/21/2012		
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)		
Administered Amount (of Vaccine)	0.5		
Administered Units (of Measure)	mL		
Administering Provider	J. Martinez		
Administered-at Location	333 Oceanview Lane, Stamford Cor	333 Oceanview Lane, Stamford Connecticut 06901	
Lot Number	D335PV9654	D335PV9654	
Substance Expiration Date	2/22/2013	2/22/2013	
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Sanofi Pasteur Inc (MVX PMC)	
Completion Status	CP	СР	
Route of Administration	Subcutaneous (NCIT C38299, HL70	Subcutaneous (NCIT C38299, HL70162: SC)	
Administration Site	Left Deltoid (HL7 LD)	Left Deltoid (HL7 LD)	

## -Notes for Testers

No Note

The EHR vendor loads Polio immunization history data for Juan Marcel Gonzales.

No Comments

The EMR has recorded all of the pediatric demographic in the record created for Juan Marcel Gonzales.

The immunization history for Polio known to the local practice is loaded into the record created for Juan Marcel Gonzales.

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: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes indicated by [Y]:

Polio Dose 1 of 4		
Entered BY	Sandra Molina	Y
Ordering Provider	Jane Carter	Y
Entering Organization	Shoreline Pediatrics	Y
Administration Notes (Vaccine Event information source)	Historical Immunization (NIP001 01)	Y
Date/Time of Start of Administration	1/22/2012	Y
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)	Y
Administered Amount (of Vaccine)	0.5	Y
Administered Units (of Measure)	mL	Y
Administering Provider	Jane Carter	Y
Administered-at Location	325 Shorline Drive,  Stamford Connecticut 06901	Y
Lot Number	D333PV2444	Y
Substance Expiration Date	10/4/2012	Y
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y
Completion Status	СР	Y
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)	Y

Administration Site	Left Deltoid (HL7 LD)	Y
Polio Dose 2 of 4		
Entered BY	Sandra Molina	Y
Ordering Provider	Carlos Herrera	Y
Entering Organization	Shoreline Pediatrics	Y
Vaccine Event information source	Historical Immunization (NIP001 01)	Y
Value/Text for Vaccine Type	poliovirus vaccine, inactivated (CVX 10)	Y
Date/Time of Start of Administration	3/22/2012	Y
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)	Y
Administered Amount (of Vaccine)	0.5	Y
Administered Units (of Measure)	mL	Y
Administering Provider	J. Martinez	Y
Administered-at Location	333 Oceanview Lane, Stamford Connecticut 06901	Y
Lot Number	D333PV4343	Y
Substance Expiration Date	3/23/2012	Y
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y
Completion Status	CP	Y
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)	Y
Administration Site	Left Deltoid (HL7 LD)	
Polio Dose 3 of 4		
Entered BY	Sandra Molina	
Ordering Provider	Carlos Herrera	
Entering Organization	Shoreline Pediatrics	
Vaccine Event information source	Historical Immunization (NIP001 01)	
Value/Text for Vaccine Type	poliovirus vaccine, inactivated (CVX 10)	
Date/Time of Start of Administration	5/21/2012	
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-55)	
Administered Amount (of Vaccine)	0.5	
Administered Units (of Measure)	mL	
Administering Provider	J. Martinez	
Administered-at Location	333 Oceanview Lane, Stamford Connecticut 06901	
Lot Number	D335PV9654	
Substance Expiration Date	2/22/2013	
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	
Completion Status	CP	
Route of Administration	Subcutaneous (NCIT C38299, HL70162: SC)	
Administration Site	Left Deltoid (HL7 LD)	

No Note