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

Historical Vaccine from Another Practice - Dtap			T
Entered BY	Sandra Molina	Y	T
Ordering Provider	J. Rodriguez	Y	П
Entering Organization	Shoreline Pediatrics	Y	П
Vaccine Event information source	Historical information - from parent's written record (NIP001 03)	Y	
Value/Text for Vaccine Type	DTaP	Y	
Date/Time of Start of Administration	8/31/2014	Y	T
Vaccine Administered	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106)	Y	
Administered Amount (of Vaccine)	0.5	Y	
Administered Units (of Measure)	mL	Y	
Administration Notes		Y	
Administering Provider	Linda Casera	Y	
Administered-at Location	4253 Standish Way, Stamford Connecticut 06903	Y	
Lot Number	D643QS8243	Y	T
Substance Expiration Date	9/1/2014	Y	
Substance Manufacturer Name	Sanofi Pasteur Inc (MVX PMC)	Y	
Completion Status	CP	Y	Ш
Route of Administration	Intramuscular (NCIT IM)	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	DTaP	Y	T
Date/Time of Start of Administration	2/21/2011	Y	T
Vaccine Administered	poliovirus vaccine, inactivated (CVX 10)	Y	T
Administered Amount (of Vaccine)	0.5	Y	
Administered Units (of Measure)	mL	Y	T
Administration Notes		Y	T
Administering Provider	Linda Casera	Y	T
Administered-at Location	4253 Standish Way, Stamford Connecticut 06903	Y	T
Lot Number	D335PV9644	Y	T

Substance Manufacturer Name Completion Status	Sanofi Pasteur Inc (MVX PMC)	Y	\dagger	H	-
Route of Administration	Intramuscular (NCIT IM)	Y			
Administration Site	Left Deltoid (HL70163 LD)	Y			П
Reaction	VXC12^fever of >40.5C (105F) within 48 hours of dose^CDCPHINVS	Y			

Notes for Testers

No Note

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

No Comments

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

The immunization history from another practice is loaded into the record created for Juana Mariana 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 history data from another practice as provided, with all required attributes indicated by [Y]: Historical Vaccine from Another Practice - Dtap Entered BY Sandra Molina Ordering Provider J. Rodriguez **Entering Organization** Shoreline Pediatrics Historical information - from parent's written Vaccine Event information source record (NIP001 03) Value/Text for Vaccine Type DTaP Date/Time of Start of Administration 8/31/2014 diphtheria, tetanus toxoids and acellular pertussis Y Vaccine Administered vaccine, 5 pertussis antigens (CVX 106) Administered Amount (of Vaccine) 0.5 Administered Units (of Measure) mL Administration Notes Administering Provider Linda Casera 4253 Standish Way, Stamford Connecticut 06903 Administered-at Location Lot Number D643QS8243 Y Substance Expiration Date 9/1/2014 Y Substance Manufacturer Name Sanofi Pasteur Inc (MVX PMC) Completion Status Y Route of Administration Intramuscular (NCIT IM) Y Administration Site Left Deltoid (HL70163 LD) Historical Vaccine from Another Practice - Polio Entered BY Sandra Molina Ordering Provider J. Rodriguez **Entering Organization** Shoreline Pediatrics Historical information - from parent's written Vaccine Event information source record (NIP001 03) Value/Text for Vaccine Type DTaP Date/Time of Start of Administration 2/21/2011 Y Vaccine Administered poliovirus vaccine, inactivated (CVX 10) Y Administered Amount (of Vaccine) Y Administered Units (of Measure) mL Y Administration Notes Y Linda Casera Administering Provider Y Administered-at Location 4253 Standish Way, Stamford Connecticut 06903 Y Lot Number D335PV9644

Substance Expiration Date Substance Manufacturer Name	2/22/2011 Sanofi Pasteur Inc (MVX PMC)	Y Y
Completion Status	CP	Y
Route of Administration	Intramuscular (NCIT IM)	Y
Administration Site	Left Deltoid (HL70163 LD)	Y
Reaction	VXC12^fever of >40.5C (105F) within 48 hours of dose^CDCPHINVS	Y

No Note