

Description

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

Comments

No Comments

PreCondition

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

PostCondition

The immunization history for Hib known to the local practice is loaded into the 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: Vendor successfully records all immunization data known to the local practice as provided, with all required attributes:

| | | | | |
|---|--|---|--|--|
| Hib Dose 1 of 4 | | | | |
| Entered BY | Sandra Molina | Y | | |
| Ordering Provider | Carlos Herrera | 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 | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) | Y | | |
| Administered Amount (of Vaccine) | 0.5 | Y | | |
| Administered Units (of Measure) | mL | Y | | |
| Administering Provider | Y | | | |
| Administered-at Location | 333 Oceanview Lane, Stamford Connecticut 06901 | Y | | |
| Lot Number | 7M54K9255 | Y | | |
| Substance Expiration Date | 3/24/2012 | Y | | |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y | | |
| Completion Status | CP | Y | | |
| Route of Administration | Intramuscular (NCIT C28161, HL70162: IM) | Y | | |
| Administration Site | Right Thigh (HL7 RT) | Y | | |
| | | | | |
| Hib 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 | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) | Y | | |
| Date/Time of Start of Administration | 3/22/2012 | Y | | |
| Vaccine Administered | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) ENGRIX-B (NDC 58160-0820-11) | 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 | 7M55K3343 | Y | | |
| Substance Expiration Date | 10/30/2012 | Y | | |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | Y | | |
| Completion Status | CP | Y | | |
| Route of Administration | Intramuscular (NCIT IM) | Y | | |
| Administration Site | Left Thigh (HL7 LT) | | | |
| | | | | |

| Hib 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 | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) | |
| Date/Time of Start of Administration | 5/21/2012 | |
| Vaccine Administered | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) ENGERIX-B (NDC 58160-0820-11) | |
| 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 | 7M75K4577 | |
| Substance Expiration Date | 5/23/2012 | |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | RightThigh (HL7 RT) | |

| Hib Dose 4 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 | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) | |
| Date/Time of Start of Administration | 11/22/2012 | |
| Vaccine Administered | Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-00) | |
| 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 | 7M53K5535 | |
| Substance Expiration Date | 2/22/2012 | |
| Substance Manufacturer Name | Merck Sharp & Dohme Corp (MVX MSD) | |
| Completion Status | CP | |
| Route of Administration | Intramuscular (NCIT IM) | |
| Administration Site | Left Deltoid (HL7 LD) | |

| Notes to Testers | |
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| No Note | |