### Description

Since Anita is a healthcare worker with no evidence of immunity to Hepatitis B, the nurse administers a Hepatitis B vaccination to adult patient, Anita Francesca Marina:

- Documents all required information for the Hepatitis B vaccine

#### **Comments**

No Comments

#### **Pre-condition**

Order is placed for the Hepatitis B vaccine.

#### Post-Condition

The administration of the Hepatitis B vaccine is recorded in the EHR.

# **Test Objectives**

**Record Vaccine Administration:** The EHR or other clinical software system records information about each vaccine administered. The EHR records this information as structured data elements, including, at a minimum: date administered, administering clinician, site of administration (e.g., left arm), immunization type, lot number, manufacturer, Vaccine Information Statement date, quantity of vaccine/dose size and ordering clinician. The system also assures data quality, i.e., data entered are appropriate (e.g., avoid "oral" route for IM vaccines, and assure dose is appropriate for the vaccine).

Note: Adult Patient

### **Evaluation Criteria**

The EHR or other clinical software system records the following vaccine administration information. The coded values are not expected to be displayed to the user, but it is expected that the value selected has the identified meaning, and it is expected that the system will use the coded value when the attribute is conveyed in later transactions:

Entered BY	Jessica Mason
Ordering Provider	Shannon Price
Entering Organization	Metro Primary Care
Vaccine Event information source	New immunization record (NIP001 00)
Date/Time of Start of Administration	Current Date
Vaccine Administered	hepatitis B vaccine, adult dosage (CVX 43) ENERGIX-B (58160-0821-05)
2-D Data Matrix	
GTIN	10358160821056
Administered Amount (of Vaccine)	1
Administered Units (of Measure)	mL
Administration Notes	
Administering Provider	Jessica Mason
Administered-at Location	400 Shoreline Drive, Stamford Connecticut 06901
Lot Number	6942FL12
Substance Expiration Date	12/31/2021
Substance Manufacturer Name	GlaxoSmithKline Biologicals SA (MVX SKB)
Completion Status	Completed (CP)
Route of Administration	Intramuscular (NCIT C28161, HL70162: IM)
Administration Site	Left Deltoid (LD)
VFC Eligibility	No
Funding Source	Private
Dose	1 of 2
VIS Publication Date	8/15/2019
VIS Given Date	Current Date
VIS Fully Encoded Text-String	253088698300005911190815

## Notes

	y a 'new immunization', as long as there is a way to indicate that it is a new s is acceptable (e.g. the default interpretation of the data entry is that it is a new