Description

Following the vaccination visit, the patient/parent uses the specified interface to access the immunization report for the patient including all history (the report can be provided in various formats - e.g., print, send to patient portal, etc.).

Comments

No Comments

Pre-condition

Initial Data Load completed with demographic data, vaccination history, and clinical history. Historical Vaccination reconciled and loaded into the EHR. New vaccinations have been administered. The parent/patient is provided with an account to access the immunization history.

Post-Condition

The patient/parent has been provided a patient immunization history report.

Test Objectives

Provide Access to Patient Immunization Record: The EHR or other clinical software system provides patients and their authorized representatives with electronic access to immunization records (either directly or by interacting with an external system such as a patient portal).

Provide Access to Recommendations and Vaccine Information Statement(s): The immunization record displays immunization recommendations to be discussed with a provider, displaying the relevant Vaccine Information Statement.

Evaluation Criteria

Using the patient facing features (e.g. portal), show that the vaccine history can be displayed including today's vaccine/forecast:

The following patient demographics are displayed:

Patient Identifier Number:	Vendor Assigned
Patient Identifier Type Code:	Vendor Assigned
Patient Name:	Juana Mariana Vazquez
Date/Time of Birth:	11/01/2015 11:05am
Sex:	Female
Patient Address:	4345 Standish Way, Stamford, CT, 06903
Multiple Birth:	N
Birth Order:	NA

The following Vaccination History is displayed:

Hep B Peds NOS
hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGERIX-B (NDC 58160-0820-43)
11/01/2015
None
1
3
Y
Jane Carter
Lisa Sirtis
Shoreline Hospital
.05 mL
Jane Carter
325 Shoreline Drive, Stamford Connecticut 06901

Lot#: Exp Date:	6332FK33 12/14/2015
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group: Administered:	Hep B Peds NOS hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)
	ENGERIX-B (NDC 58160-0820-43)
Date Administered:	12/20/2015
Additional Observations:	None
Dose #:	2
Doses in Series:	3
Valid Dose:	Y
Ordering Provider:	Frank Smith
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	.05 mL
Administering Provider:	Sandra Molina
Administered at Location:	400 Shoreline Drive, Stamford Connecticut 06901
Lot#:	6352FK1
Exp Date:	12/31/2015
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	Hep B Peds NOS
Administered:	hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)
D	ENGERIX-B (NDC 58160-0820-43)
Date Administered:	05/20/2016
Additional Observations:	None
Dose #:	3
Doses in Series:	3
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	Sandra Molina
Administered at Location: Lot#:	333 Oceanview Lane, Stamford Connecticut 06901 6352FK24
Exp Date: Manufacturer:	8/31/2017
	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	1/22/2016
Additional Observations:	None
Dose #:	1
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez

Administered at Location: Lot#:	333 Oceanview Lane, Stamford Connecticut 06901 D409QS2341
Exp Date:	11/30/2016
Exp Date. Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	,
	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	3/23/2016
Additional Observations:	
Dose #:	2
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS2433
Exp Date:	9/4/2016
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	5/22/2016
Additional Observations:	
Dose #:	3
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS3255
Exp Date:	12/1/2016
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group: Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	2/21/2017
Additional Observations:	
Dose #:	4
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL

Administering Provider: Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS249
Exp Date:	3/1/2017
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	11/20/2019
Additional Observations:	
Dose #:	5
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	J. Rodriguez
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	.05 mL
Administering Provider:	Linda Casera
Administered at Location:	4253 Standish Way, Stamford Connecticut 06903
Lot#:	D643QS8243
Exp Date:	12/01/2019
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	Hib, unspecified formulation
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	1/22/2016
Additional Observations:	
Dose #:	1
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M54K9245
Exp Date:	3/24/2016
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	Hib, unspecified formulation
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	3/23/2016
Additional Observations:	
Dose #:	2
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics

Administered Amt: Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M55K3342
Exp Date:	10/30/2016
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	Hib, unspecified formulation
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	5/22/2016
Additional Observations:	
Dose #:	3
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M75K4566
Exp Date:	5/23/2016
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	Hib, unspecified formulation
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	11/21/2016
Additional Observations:	
Dose #:	4
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M53K5534
Exp Date:	2/22/2017
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	poliovirus vaccine, inactivated
Administered:	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-88)
Date Administered:	1/22/2016
Additional Observations:	
Dose #:	1
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Lincion Dy.	v. 17141 till (2)

Administered Amt: Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D333PV2431
Exp Date:	10/4/2016
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	poliovirus vaccine, inactivated
Administered:	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-88)
Date Administered:	3/23/2016
Additional Observations:	Adverse Reaction of (VXC11 [^] convulsions (fits, seizures) within 72 hours of dose [^] CDCPHINVS)
Dose #:	2
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D333PV4344
Exp Date:	3/23/2017
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	poliovirus vaccine, inactivated
Administered:	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-88)
Date Administered:	2/21/2017
Additional Observations:	Adverse Reaction of (VXC12 ^{fever} of >40.5C (105F) within 48 hours of dose ^{CDCPHINVS})
Dose #:	3
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	J. Rodriguez
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	.05 mL
Administering Provider:	Linda Casera
Administered at Location:	4253 Standish Way, Stamford Connecticut 06903
Lot#:	D335PV9644
Exp Date:	4/22/2017
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	pneumococcal, unspecified formulation
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	1/22/2015
Additional Observations:	
Dose #:	1
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez

Entering Organization: Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P243V3281
Exp Date:	1/30/2015
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	pneumococcal, unspecified formulation
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	3/23/2016
Additional Observations:	
Dose #:	2
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P343V8321
Exp Date:	3/30/2016
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	pneumococcal, unspecified formulation
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	5/22/2016
Additional Observations:	
Dose #:	3
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P853V2164
Exp Date:	8/30/2016
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	pneumococcal, unspecified formulation
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	1/11/2017
Additional Observations:	
Dose #:	4
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera

Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P853V58532
Exp Date:	4/18/2017
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	rotavirus, unspecified formulation
Administered:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01)
Date Administered:	1/22/2016
Additional Observations:	
Dose #:	1
Doses in Series:	3
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	1 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6359RV533
Exp Date:	2/15/2016
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Oral (NCIT C38288, HL70162: PO)
Site:	(NA)
Site.	
Vaccine Group:	rotovirus unenacified formulation
Vaccine Group: Administered:	rotavirus, unspecified formulation rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01)
Administered:	
Administered: Date Administered:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01)
Administered: Date Administered: Additional Observations:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016
Administered: Date Administered: Additional Observations: Dose #:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016
Administered: Date Administered: Additional Observations: Dose #: Doses in Series:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administering Provider:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administering Provider: Administered at Location:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administering Provider: Administered at Location: Lot#:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administered at Location: Lot#: Exp Date: Manufacturer:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB)
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administered at Location: Lot#: Exp Date: Manufacturer: Route:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB) Oral (NCIT C38288, HL70162: PO)
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB) Oral (NCIT C38288, HL70162: PO) (NA)
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB) Oral (NCIT C38288, HL70162: PO) (NA) influenza, unspecified formulation
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB) Oral (NCIT C38288, HL70162: PO) (NA) influenza, unspecified formulation Influenza, seasonal, injectable (CVX 161) FLUZONE (NDC 49281-0516-00)
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered: Date Administered:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB) Oral (NCIT C38288, HL70162: PO) (NA) influenza, unspecified formulation
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered: Date Administered: Additional Observations:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB) Oral (NCIT C38288, HL70162: PO) (NA) influenza, unspecified formulation Influenza, seasonal, injectable (CVX 161) FLUZONE (NDC 49281-0516-00) 9/25/2016
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered: Date Administered: Additional Observations: Dose #:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB) Oral (NCIT C38288, HL70162: PO) (NA) influenza, unspecified formulation Influenza, seasonal, injectable (CVX 161) FLUZONE (NDC 49281-0516-00) 9/25/2016
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered: Date Administered: Additional Observations: Dose #: Doses in Series:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB) Oral (NCIT C38288, HL70162: PO) (NA) influenza, unspecified formulation Influenza, seasonal, injectable (CVX 161) FLUZONE (NDC 49281-0516-00) 9/25/2016
Administered: Date Administered: Additional Observations: Dose #: Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered: Date Administered: Additional Observations: Dose #:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01) 3/23/2016 2 3 Y Carlos Herrera J. Martinez Oceanview Pediatrics 1 mL J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901 6359RV932 5/10/2016 GlaxoSmithKline Biologicals SA (MVX SKB) Oral (NCIT C38288, HL70162: PO) (NA) influenza, unspecified formulation Influenza, seasonal, injectable (CVX 161) FLUZONE (NDC 49281-0516-00) 9/25/2016

Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.25 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D8043IN8734
Exp Date:	3/12/2016
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	influenza, unspecified formulation
Administered:	Influenza, seasonal, injectable (CVX 161) FLUZONE (NDC 49281-0516-00
Date Administered:	10/29/2016
Additional Observations:	
Dose #:	2
Doses in Series:	2
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.25 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D8043IN8746
	3/12/2017
Exp Date: Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	influenza, unspecified formulation
Administered:	Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0517-00)
Date Administered:	10/2/2017
Additional Observations:	
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.25 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D9334IN9333
Exp Date:	5/22/2018
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	influenza, unspecified formulation
Administered:	Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161)
Doto Administras 1	FLUZONE QUADRIVALENT (NDC 49281-0518-00)
Date Administered:	11/4/2018
Additional Observations:	
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Carlos Herrera

Entered By:	J. Martinez
Entering Organization: Administered Amt:	Oceanview Pediatrics
	.25 mL
Administering Provider: Administered at Location:	J. Martinez
	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D9553IN2243 4/30/2019
Exp Date: Manufacturer:	
	Sanofi Pasteur Inc (MVX PMC) Intramuscular (NCIT C28161, HL70162: IM)
Route: Site:	Left Deltoid (HL7 LD)
Vaccine Group: Administered:	influenza, unspecified formulation Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161)
Date Administered:	FLUZONE QUADRIVALENT (NDC 49281-0519-00) 10/15/2019
Additional Observations:	10/13/2017
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Gina Ricci
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	.5 mL
Administering Provider:	Gina Ricci
Administering 1 Tovider. Administered at Location:	Oceanview Pharmacy, 15 Post Road, Stamford Connecticut 06901
Lot#:	8L4B3423
Exp Date:	12/30/2019
Manufacturer:	Sanofi Pasteur Inc. (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	influenza, unspecified formulation
Administered:	IInfluenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (49281-0520-00)
Date Administered:	Current Date
Additional Observations:	Adverse Reaction of (VXC14^Rash within 14 days of dose ^CDCPHINVS)
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Frank Smith
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	.5 mL
Administering Provider:	Sandra Molina
Administered at Location:	400 Shoreline Drive, Stamford Connecticut 06901
Lot#:	8L4B3521
Exp Date:	12/31/2020
Manufacturer:	Sanofi Pasteur (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	Hep A, unspecified formulation
Administered:	hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-43)
Date Administered:	11/23/2016
Additional Observations:	
Dose #:	1
Doses in Series:	2
Valid Dose:	Y

Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6359RT33
Exp Date:	1/4/2017
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Deltoid (HL7 RD)
Vaccine Group:	Hep A, unspecified formulation
Administered:	hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-43)
Date Administered:	5/23/2017
Additional Observations:	
Dose #:	2
Doses in Series:	2
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
	J. Martinez
Administering Provider: Administered at Location:	
	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6359RT48
Exp Date:	9/11/2017
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	MMR
Administered:	measles, mumps, rubella virus vaccine (CVX 03) MMR II (NDC 00006-4681 01)
Date Administered:	08/22/2016
Additional Observations:	Invalid because it was given too soon
Dose #:	
Doses in Series:	2
Valid Dose:	N
Ordering Provider:	Frank Smith
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
<u> </u>	0.5
	.05 mL
Administered Amt:	Sandra Molina
Administered Amt: Administering Provider:	
Administered Amt: Administering Provider: Administered at Location:	Sandra Molina
Administered Amt: Administering Provider: Administered at Location: Lot#:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC 12/15/2016 Merck Sharp & Dohme Corp (MVX MSD)
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer: Route:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC 12/15/2016 Merck Sharp & Dohme Corp (MVX MSD) Subcutaneous (NCIT C38299, HL70162: SC)
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC 12/15/2016 Merck Sharp & Dohme Corp (MVX MSD) Subcutaneous (NCIT C38299, HL70162: SC) Left Thigh (HL7 LT)
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC 12/15/2016 Merck Sharp & Dohme Corp (MVX MSD) Subcutaneous (NCIT C38299, HL70162: SC) Left Thigh (HL7 LT) MMR
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC 12/15/2016 Merck Sharp & Dohme Corp (MVX MSD) Subcutaneous (NCIT C38299, HL70162: SC) Left Thigh (HL7 LT) MMR measles, mumps, rubella virus vaccine (CVX 03) MMR II (00006-4681-01)
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered: Date Administered:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC 12/15/2016 Merck Sharp & Dohme Corp (MVX MSD) Subcutaneous (NCIT C38299, HL70162: SC) Left Thigh (HL7 LT) MMR
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered: Date Administered: Additional Observations:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC 12/15/2016 Merck Sharp & Dohme Corp (MVX MSD) Subcutaneous (NCIT C38299, HL70162: SC) Left Thigh (HL7 LT) MMR measles, mumps, rubella virus vaccine (CVX 03) MMR II (00006-4681-01) 9/22/2019
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered: Date Administered: Additional Observations: Dose #:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC 12/15/2016 Merck Sharp & Dohme Corp (MVX MSD) Subcutaneous (NCIT C38299, HL70162: SC) Left Thigh (HL7 LT) MMR measles, mumps, rubella virus vaccine (CVX 03) MMR II (00006-4681-01) 9/22/2019
Administered Amt: Administering Provider: Administered at Location: Lot#: Exp Date: Manufacturer: Route: Site: Vaccine Group: Administered: Date Administered: Additional Observations:	Sandra Molina 333 Oceanview Lane, Stamford Connecticut 06901 0853CC 12/15/2016 Merck Sharp & Dohme Corp (MVX MSD) Subcutaneous (NCIT C38299, HL70162: SC) Left Thigh (HL7 LT) MMR measles, mumps, rubella virus vaccine (CVX 03) MMR II (00006-4681-01) 9/22/2019

Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	0854FF
Exp Date:	4/13/2020
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	MMR
Administered:	measles, mumps, rubella virus vaccine (CVX 03) MMR II (NDC 00006-4681-01)
Date Administered:	14 days PRIOR to day of TEST
Additional Observations:	
Dose #:	2
Doses in Series:	2
Valid Dose:	Y
Ordering Provider:	Frank Smith
Entered By:	Sandra Molina
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	Sandra Molina
Administered at Location:	400 Shoreline Drive, Stamford Connecticut 06901
Lot#:	0934GG
Exp Date:	12/31/2021
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	Varicella
Administered:	
Date Administered:	Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) 12/15/2017
Additional Observations:	12/13/2017
Dose #:	
Doses in Series:	1 2
	Y
Valid Dose:	
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	2341BB
Exp Date:	12/1/2018
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Right Deltoid (HL7 RD)
Vaccine Group:	IPV
Due Date:	10/31/2019
Earliest Date to Give:	10/31/2019
Overdue Date:	10/31/2021
Immunization Schedule:	ACIP
Vaccine Group:	varicella
	10/31/2019
Due Date: Earliest Date to Give:	10/31/2019

Overdue Date:	10/31/2021
Immunization Schedule:	ACIP

Notes

If the same immunization report verified in TestCase 4 for Juana Mariana Vazquez is used for the patient access to the immunization record, then content verification does not need to be repeated.

Influenza vaccine should be due between September and October of the flu season, which may show as the prior year to testing or the year of testing.

Also, since MMR was given 2 weeks prior, forecasting of immunizations due may be adjusted by the vendor forecast to account for the requirement there must be at least 28 days between immunizations using a live virus. Tester should document incidences where the forecast is adjusted or annotated as a result of this requirement.