

### Description

The nurse administers the inactivated influenza vaccine  
- Documents all required information for the vaccine

### Comments

No Comments

### Pre-condition

Order is placed for inactivated influenza vaccine.

### Post-Condition

The inactivated influenza vaccinations is recorded in the EMR.

### 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, product, lot number, manufacturer, Vaccine Information Statement date, and quantity of vaccine/dose size.

### Evaluation Criteria

The tester Verifies that there is a choice for VFC stock as she is VFC Eligible. 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.

EMR Records the following vaccine administration information:

|   |   |
|---|---|
| Entered BY  | Sandra Molina   |
| Ordering Provider                                       | Frank Smith   |
| Entering Organization                                   | Shoreline Pediatrics  |
| Vaccine Event information source (Administration Notes) | New immunization record (NIP001 00)   |
| Value/Text for Vaccine Type                             | Influenza, seasonal, injectable, preservative free (CVX 140, NDC 58160-0881-41)         |
| Date/Time of Start of Administration                    | Current Date  |
| Vaccine Administered                                    | Influenza, seasonal, injectable, preservative free (CVX 140, NDC 58160-0881-41 FLUARIX) |
| Administered Amount (of Vaccine)                        | 0.5   |
| Administered Units (of Measure)                         | mL  |
| Administering Provider                                  | Sandra Molina   |
| Administered-at Location                                | 400 Shoreline Drive, Stamford Connecticut 06901   |
| Lot Number  | 8L4B3521  |
| Substance Expiration Date                               | 12/31/2019  |
| Substance Manufacturer Name                             | GlaxoSmithKline (SKB)   |
| Completion Status                                       | Completed (CP)  |
| Route of Administration                                 | Intramuscular (NCIT C28161, HL70162 1M)   |
| Administration Site                                     | Left Deltoid (HL70163 LD)   |
| VFC Eligibility   | Yes   |
| Funding Source  | Public  |

### Notes

The EMR does not need to specify a 'new immunization', as long as there is a way to indicate that it is a new immunization within the EMR, this is acceptable (e.g. the default interpretation of the data entry is that it is a new immunization and not historical).