Description

Juana Maria Gonzales is selected as the patient and her record is opened in the EMR.

Comments

No Comments

Pre-condition

Juana Maria Gonzales Initial Data Load completed.

Post-Condition

Juana Maria Gonzales is the active working patient in the EMR.

Test Objectives

Select New Patient: The system must allow a user to distinguish information about patients with similar names or identifying information in order to select the right patient from the providers' EHR or other clinical software. This information is crucial for identifying and selecting the correct patient. For example, twins living in the same household will have similar dates of birth, addresses, and may have similar sounding names. In order to match patients with those already in the immunization registry, the EHR or other clinical software should have the ability to record the mother's maiden name, whether the patient was part of a multiple birth, and if so, the order of birth (when such information is available). The provider should be aware of how often the protection indicator information must be updated based on local rules.

Evaluation Criteria

Tester shall verify that the product can distinguish Juana Maria Gonzales from similar sounding names and her twin using all of the pediatric demographics:

Patient ID (previously listed as "Medicaid Number")	Vendor supplied	
Patient ID: Assigning Authority ID (i.e., owning source)/Facility Name	Shoreline Pediatrics	
Patient ID: Type (e.g., medical record number, IIS ID)	Vendor supplied	
Patient Name: First	Juana	
Patient Name: Middle	Maria	
Patient Name: Last	Gonzales	
Patient Date of Birth	10/01/2019	
Birth Time	11:15	
Patient Gender (Administrative Sex)	F	
Patient Multiple Birth Indicator	Yes	
Patient Birth Order	2	
Responsible Person Name: First	Joanna	
Responsible Person Name: Middle	Elena	
Responsible Person Name: Last	Gonzales	
Responsible Person Name: Relationship to Patient	Mother	
Mother's Name: First	Joanna	
Mother's Name: Middle	Elena	
Mother's Name: Last	Gonzales	
Mother's Name: Maiden Last	Morales	
Patient Address: Street	3321 Standish Way	
Patient Address: City	Stamford	
Patient Address: State	СТ	
Patient Address: Country	US	
Patient Address: Zipcode	06903	
Patient Address: County of Residence	Fairfield	
Race	White	
Ethnicity	Hispanic or Latino	
Birthing Facility Name	Stamford Regional Hospital	
Birth Delivery Location Address (BDL)	15 Atlantic Avenue,	
, , ,	Stamford Connecticut	
	06903	
Patient Birth State	CT	
Patient Primary Language	English	
Patient Telephone Number	(203) 555-1214	
Patient Telephone Number Type (e.g., home, cell)	cell	
Patient E-mail Address	none	
Publicity Code	Reminder/recall - no calls (03 HL70215)	
Protection Indicator	Yes	
Protection Indicator Effective Date	10/1/2019	
Immunization Registry Status	NA	
Preferred Contact Method	Text	

Notes	
No Note	