Description

Following the vaccination visit, the provider uses the EHR to produce an 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.

Post-Condition

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

Test Objectives

Produce Standard Patient Immunization History Report: The EHR or other clinical software system produces a report of a patient's immunization history that is appropriate for various entities, such as schools and day-care centers.

Produce Immunization Forecast Report: The EHR or other clinical software system creates a list of immunizations to be administered within a specified time frame.

Evaluation Criteria

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:	11/01/2017 11:05am
Sex:	Female
Patient Address:	4345 Standish Way, Stamford, CT, 06903
Multiple Birth Indicator:	No
Birth Order:	N/A

The following Vaccination History is displayed:

Vaccine Group:	Hep B Peds NOS
Administered:	hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGERIX-B (NDC 58160-0820-43)
Date Administered:	11/01/2017
Additional Observations:	None
Dose #:	1
Doses in Series:	3
Valid Dose:	Y
Ordering Provider:	Jane Carter
Entered By:	Lisa Sirtis
Entering Organization:	Shoreline Hospital
Administered Amt:	0.5 mL
Administering Provider:	Jane Carter
Administered at Location:	325 Shoreline Drive, Stamford Connecticut 06901
Lot#:	6332FK33
Exp Date:	12/14/2017
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)

Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	Hep B Peds NOS
Administered:	hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGERIX-B (NDC 58160-0820-43)
Date Administered:	12/20/2017
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:	0.5 mL
Administering Provider:	Sandra Molina
Administered at Location:	400 Shoreline Drive, Stamford Connecticut 06901
Lot#:	6352FK1
Exp Date:	12/31/2017
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	Hep B Peds NOS
Administered:	hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGERIX-B (NDC 58160-0820-43)
Date Administered:	05/20/2018
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:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6352FK24
Exp Date:	08/31/2019
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigen (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	1/22/2018
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:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS2341
Exp Date:	11/30/2018

Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigen (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	3/23/2018
Additional Observations:	None
Dose #:	2
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS2433
Exp Date:	9/4/2018
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Right Thigh (HL70163: RT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigen (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	5/22/2018
Additional Observations:	None
Dose #:	3
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS3255
Exp Date:	12/1/2018
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigen (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	2/21/2019
Additional Observations:	None
Dose #:	4
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS249

Exp Date:	3/1/2019
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Deltoid (HL70163: LD)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigen (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	11/20/2021
Additional Observations:	None
Dose #:	5
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	J. Rodriguez
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	Linda Casera
Administered at Location:	4253 Standish Way, Stamford Connecticut 06903
Lot#:	D643QS8243
Exp Date:	12/01/2021
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Deltoid (HL70163: LD)
Vaccine Group:	Hib
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	1/22/2018
Additional Observations:	None
Dose #:	1
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M54K9245
Exp Date:	3/24/2018
Manufacturer:	Merck and Co Inc (MVX MSD)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Right Thigh (HL70163: RT)
Vaccine Group:	Hib
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	3/23/2018
Additional Observations:	None
Dose #:	2
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901

Lot#:	7M55K3342
Exp Date:	10/30/2018
Manufacturer:	Merck and Co Inc (MVX MSD)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	Hib
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	5/22/2018
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:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M75K4566
Exp Date:	5/23/2018
Manufacturer:	Merck and Co Inc (MVX MSD)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Right Thigh (HL70163: RT)
Vaccine Group:	Hib
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	11/21/2018
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:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M53K5534
Exp Date:	2/22/2019
Manufacturer:	Merck and Co Inc (MVX MSD)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Deltoid (HL70163: LD)
Vaccine Group:	poliovirus vaccine, inactivated
Administered:	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-88)
Date Administered:	1/22/2018
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:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901

Lot#:	D333PV2431
Exp Date:	10/4/2018
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Subcutaneous (NCIT: C38299, HL70162: SC)
Site:	Left Arm (HL70163: LA)
Vaccine Group:	poliovirus vaccine, inactivated
Administered:	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-88)
Date Administered:	3/23/2018
Additional Observations:	None
Dose #:	2
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D333PV4344
Exp Date:	3/23/2019
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Subcutaneous (NCIT: C38299, HL70162: SC)
Site:	Left Arm (HL70163: LA)
Vaccine Group:	poliovirus vaccine, inactivated
Administered:	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-88)
Date Administered:	2/21/2019
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:	0.5 mL
Administering Provider:	Linda Casera
Administered at Location:	4253 Standish Way, Stamford Connecticut 06903
Lot#:	D335PV9644
Exp Date:	4/22/2019
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Subcutaneous (NCIT: C38299, HL70162: SC)
Site:	Left Arm (HL70163: LA)
Vaccine Group:	pneumococcal
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	1/22/2018
Additional Observations:	
Dose #:	1
	4
Doses in Series:	
Doses in Series: Valid Dose:	Y
Valid Dose:	Y Carlos Herrera
Valid Dose: Ordering Provider:	-
Valid Dose: Ordering Provider: Entered By:	Carlos Herrera
Doses in Series: Valid Dose: Ordering Provider: Entered By: Entering Organization: Administered Amt:	Carlos Herrera J. Martinez

Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P243V3281
Exp Date:	1/30/2018
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	pneumococcal
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	3/23/2018
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:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P343V8321
Exp Date:	3/30/2018
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	pneumococcal
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	5/22/2018
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:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P853V2164
Exp Date:	8/30/2018
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Right Thigh (HL70163: LT)
Vaccine Group:	pneumococcal
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC
rammoutou.	00005-1971-01)
Date Administered:	1/11/2019
Additional Observations:	1/11/2017
Dose #:	4
Doses in Series:	
	Y
Valid Dose:	-
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	0.5 mL

Administering Provider: Administered at Location:	J. Martinez 333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P853V58532
Exp Date:	4/18/2019
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Deltoid (HL70163: LD)
Vaccine Group:	Rotavirus
Administered:	rotavirus, live, monovalent vaccine (CVX 119)
Administred.	ROTARIX (NDC 58160-0851-01)
Date Administered:	1/22/2018
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:	2/15/2018
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Oral (NCIT: C38288, HL70162 : PO)
Site:	(N/A)
Vaccine Group:	Rotavirus
Administered:	rotavirus, live, monovalent vaccine (CVX 119)
	ROTARIX (NDC 58160-0851-01)
Date Administered:	3/23/2018
Additional Observations:	
Dose #:	2
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#:	6359RV932
Exp Date:	5/10/2018
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Oral (NCIT: C38288, HL70162 : PO)
Site:	(N/A)
Vaccine Group:	Influenza
Administered:	Influenza, injectable, quadrivalent, preservative free (CVX 150) FLUARIX QUADRIVALENT (NDC 58160-0898-41)
Date Administered:	9/25/2018
Additional Observations:	
Dose #:	1
Doses in Series:	2
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Lincia Dj.	Oceanview Pediatrics

Administered Amt: Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D8043IN8734
Exp Date:	7/25/2019
Manufacturer:	GlaxoSmithKline (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	Influenza
Administered:	Influenza, injectable, quadrivalent, preservative free (CVX 150) FLUARIX QUADRIVALENT (NDC 58160-0898-41)
Date Administered:	10/29/2018
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:	0.5 mL
Administering Provider:	J. Martinez
Administering Flovider. Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D8043IN8746
	3/12/2019
Exp Date: Manufacturer:	
	GlaxoSmithKline (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Right Thigh (HL70163: RT)
Vaccine Group:	Influenza
Administered:	Influenza, injectable, quadrivalent, preservative free (CVX 150) FLUARIX QUADRIVALENT (NDC 58160-0896-41)
Date Administered:	10/02/2019
Additional Observations:	
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D9334IN9333
Exp Date:	5/22/2020
Manufacturer:	GlaxoSmithKline (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Deltoid (HL70163: LD)
Vaccine Group:	Influenza
Administered:	Influenza, injectable, quadrivalent, preservative free (CVX 150) FLUARIX QUADRIVALENT (NDC 58160-0885-41)
Date Administered:	11/4/2020
Additional Observations:	
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Carlos Herrera
Oracing rioviaci.	

Entering Organization: Administered Amt:	Oceanview Pediatrics 0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D9553IN2243
Exp Date:	4/30/2021
Manufacturer:	GlaxoSmithKline (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Deltoid (HL70163: LD)
Vaccine Group:	Influenza
Administered:	Influenza, injectable, quadrivalent, preservative free (CVX 150) FLUARIX QUADRIVALENT (NDC 58160-0887-41)
Date Administered:	10/15/2021
Additional Observations:	10/10/2021
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Gina Ricci
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	Gina Ricci
Administered at Location:	Oceanview Pharmacy, 15 Post Road, Stamford Connecticut 06901
Lot#:	8L4B3423
Exp Date:	12/30/2021
Manufacturer:	GlaxoSmithKline (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Deltoid (HL70163: LD)
Vaccine Group:	Influenza
Administered:	Influenza, injectable, quadrivalent, preservative free (CVX 150) FLUARIX QUADRIVALENT (NDC 58160-0890-41)
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:	0.5 mL
Administering Provider:	Sandra Molina
Administered at Location:	400 Shoreline Drive, Stamford Connecticut 06901
Lot#:	8L4B3521
Exp Date:	12/31/2023
Manufacturer:	GlaxoSmithKline (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Right Deltoid (HL70163: RD)
Vaccine Group:	Hep A
Administered:	hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-43)
Date Administered:	11/23/2018
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:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6359RT33
Exp Date:	1/4/2019
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Right Deltoid (HL70163: RD)
Vaccine Group:	Нер А
Administered:	hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-43)
Date Administered:	5/23/2019
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:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6359RT48
Exp Date:	9/11/2019
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Left Deltoid (HL70163: LD)
Vaccine Group:	MMR
Administered:	measles, mumps, rubella virus vaccine (CVX 03) MMR II (NDC 00006-4681-01)
Date Administered:	08/22/2018
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
Administered Amt:	0.5 mL
Administering Provider:	Sandra Molina
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	0853CC
Exp Date:	12/15/2018
Manufacturer:	Merck and Co Inc (MVX MSD)
Route:	Subcutaneous (NCIT: C38299, HL70162: SC)
Site:	Left Thigh (HL70163: LT)
Vaccine Group:	MMR
Administered:	measles, mumps, rubella virus vaccine (CVX 03) MMR II (NDC 00006-4681-01)
Date Administered:	9/22/2021
Additional Observations:	
Dose #:	1
	2
Doses in Series:	\mathcal{L}

Entering Organization: Oceanview Pediatrics Administered Amt: Administered Amt: O.5 mL Administered at Location: J. Martinez Administered at Location: J. Martinez Administered at Location: J. Martinez Administered at Location: O854FF Exp Date: A/13/2022 Manufacturer: Merek and Co Inc (MVX MSD) Route: Subcutaneous (NCIT: G38299, HL70162: SC) Site: Left Arm (HL70163: LA) Vaccine Group: MMR Administered: Hadays PRIOR to day of TEST Additional Observations: Dose #: Dose in Series: 2 Vacidid Dose: Yordering Provider: Entered By: Entering Organization: Administered at Location: Lot#: Dose March Administered Amt: Administered at Location: Lot#: Dose Incompared American Administered Amt: Administered at Location: Lot#: Dose Incompared American Administered Amt: Administered Amt: Administered Amt: Administered Amt: Administered Amt: Dose Incompared Amt: Administered Amt: Dose Incompared Amtinistered Amt: Administered Amt: Dose Incompared Amtinistered Amtinistered: Dose Incompared Amtinistered: Date Administered: Date Administer	6-4681
Administered Amt: 0.5 mL Administering Provider: 333 Oceanview Lane, Stamford Connecticut 06901 Lot#: 0854FF Exp Date: 4/13/2022 Manufacturer: Merck and Co Inc (MVX MSD) Route: Subcuttaneous (NCIT: C38299, HL70162: SC) Site: Left Arm (HL70163: LA) Vaccine Group: MMR Administered: measles, mumps, rubella virus vaccine (CVX 03) MMR II (NDC 0000 01) Date Administered: 14 days PRIOR to day of TEST Additional Observations: 2 Dose #: 2 Doses in Series: 2 Valid Dose: Y Ordering Provider: Frank Smith Entered By: Sandra Molina Administered Amt: 0.5 mL Administered Amt: 0.5 mL Administered at Location: 400 Shoreline Drive, Stamford Connecticut 06901 Lot#: 0934GG Exp Date: 12/31/2023 Manufacturer: Merck and Co Inc (MVX MSD) Route: Subcutaneous (NCIT: C38299, HL70162: SC) Site: Left Arm (HL70163: LA) Vaccine Group: Varicella Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01) Date Administered: Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01)	6-4681
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Administered at Location: 333 Oceanview Lane, Stamford Connecticut 06901	
Lot#: 2341BB	
Exp Date: 12/1/2020	
Manufacturer: Merck and Co Inc (MVX MSD)	
Route: Subcutaneous (NCIT: C38299, HL70162: SC)	
Site: Right Arm (HL70163: RA)	
Vaccine Group: IPV	
Due Date: 10/31/2021	
Earliest Date to Give: 10/31/2021	
Overdue Date: 10/31/2021	
Immunization Schedule: ACIP	
Vaccine Group: Varicella	
Due Date: 10/31/2021	
Earliest Date to Give: 10/31/2021	

Overdue Date:	10/31/2023
Immunization Schedule:	ACIP

Notes

The immunization report may provide a subset of demographic information sufficient to identify the patient. Any demographic information included should be evaluated against the listed demographic information for accuracy.

The immunization report does not need to display all of the information listed in the evaluation criteria for each vaccination, but they do need to produce the complete list of vaccines given and the date.

The tester is requested to document separately the success or failure of the Immunization History and the Immunization forecast as these two requirements are tested concurrently.

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