## 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:	11/01/2017 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

325 Shoreline Drive, Stamford Connecticut 06901 6332FK33
12/14/2017
GlaxoSmithKline Biologicals SA (MVX SKB)
Intramuscular (NCIT: C28161, HL70162: IM)
Left Thigh (HL70163: LT)
Hep B Peds NOS
hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08)
ENGERIX-B (NDC 58160-0820-43)
12/20/2017
None
2
3
Y
Frank Smith
Sandra Molina
Shoreline Pediatrics
0.5 mL
Sandra Molina
400 Shoreline Drive, Stamford Connecticut 06901
6352FK1
12/31/2017
GlaxoSmithKline Biologicals SA (MVX SKB)
Intramuscular (NCIT: C28161, HL70162: IM)
Left Thigh (HL70163: LT)
Hep B Peds NOS
hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGERIX-B (NDC 58160-0820-43)
05/20/2018
None
3
3
Y
Carlos Herrera
J. Martinez
Oceanview Pediatrics
0.5 mL
Sandra Molina
333 Oceanview Lane, Stamford Connecticut 06901
6352FK24
08/31/2019
GlaxoSmithKline Biologicals SA (MVX SKB)
Intramuscular (NCIT: C28161, HL70162: IM)
Left Thigh (HL70163: LT)
diphtheria, tetanus toxoids and acellular pertussis vaccine
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigen (CVX 106) DAPTACEL (NDC 49281-0286-58)
01/22/2018
None
1
5
Y
Carlos Herrera
J. Martinez Oceanview Pediatrics

J. Martinez  333 Oceanview Lane, Stamford Connecticut 06901
D409QS2341
11/30/2018
Sanofi Pasteur Inc (MVX PMC)
Intramuscular (NCIT: C28161, HL70162: IM)
Left Thigh (HL70163: LT)
diphtheria, tetanus toxoids and acellular pertussis vaccine diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens
(CVX 106) DAPTACEL (NDC 49281-0286-58)
3/23/2018
2
5
Y
Carlos Herrera
J. Martinez
Oceanview Pediatrics
0.5 mL
J. Martinez
333 Oceanview Lane, Stamford Connecticut 06901
D409QS2433
09/04/2018
Sanofi Pasteur Inc (MVX PMC)
Intramuscular (NCIT: C28161, HL70162: IM)
Right Thigh (HL70163: RT)
diphtheria, tetanus toxoids and acellular pertussis vaccine
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
5/22/2018
3
5
Y
Carlos Herrera
J. Martinez
Oceanview Pediatrics
0.5 mL
J. Martinez
333 Oceanview Lane, Stamford Connecticut 06901
D409QS3255
12/01/2018
Sanofi Pasteur Inc (MVX PMC)
Intramuscular (NCIT: C28161, HL70162: IM)
Left Thigh (HL70163: LT)
diphtheria, tetanus toxoids and acellular pertussis vaccine
diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens
(CVX 106) DAPTACEL (NDC 49281-0286-58)
02/21/2019
4
5
Y
Y Carlos Herrera J. Martinez

Administered Amt: Administering Provider:	J. Martinez
Administering Provider:  Administered at Location:	
	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS249
Exp Date:	03/01/2019
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:	
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
Exp Date.  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:	01/22/2018
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#:	7M54K9245
Exp Date:	03/24/2018
Manufacturer:	Merck and Co Inc (MVX MSD)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Right Thigh (HL70163: RT)
	Hib
Vaccine Group: Administered:	
	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
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: Administered Amt:	Oceanview Pediatrics 0.5 mL
Administering Provider:	J. Martinez
Administering Provider: 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:	05/22/2018
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:	05/23/2018
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:	02/22/2019
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:	01/22/2018
Additional Observations:	
Dose #:	1
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez

Entering Organization: Administered Amt:	Oceanview Pediatrics 0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D333PV2431
Exp Date:	10/04/2018
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:	03/23/2019
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
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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:	02/21/2019
Additional Observations:	Adverse Reaction of (VXC12 <sup>fever</sup> of >40.5C (105F) within 48 hours of dose <sup>CDCPHINVS</sup> )
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:	04/22/2019
Manufacturer:	
	Sanofi Pasteur Inc (MVX PMC) Suboutaneous (NCIT: C28200, HI 70162; SC)
Route: Site:	Subcutaneous (NCIT: C38299, HL70162: SC)
	Left Arm (HL70163: LA)
Vaccine Group:	pneumococcal
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	01/22/2018
Additional Observations:	
Dose #:	1
Doses in Series:	4
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Valid Dose:	Y

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#:	P243V3281
Exp Date:	01/30/2018
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:	03/30/2018
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:	05/22/2018
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:	08/30/2018
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT: C28161, HL70162: IM)
Site:	Right Thigh (HL70163: RT)
Vaccine Group:	pneumococcal
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	1/11/2019
Additional Observations:	
Dose #:	4
	4
Doses in Series:	4

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#:	P853V58532
Exp Date:	04/18/2019
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) ROTARIX (NDC 58160-0851-01)
Date Administered:	01/22/2018
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
Administering Provider.  Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
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Lot#:	6359RV533
Exp Date:	02/15/2018
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:	03/23/2018
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:	05/10/2018
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Oral (NCIT: C38288, HL70162 : PO)
Site:	(N/A)
	Influenza
Vaccine Group:	
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
Entering Organization:	Oceanview Pediatrics
Administered Amt:	0.5 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D8043IN8734
Exp Date:	07/25/2019
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
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D8043IN8746
Exp Date:	03/12/2019
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:	05/22/2020
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:	11/04/2020
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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#:	D9553IN2243
Exp Date:	04/30/2021
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:	
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)
	Intramuscular (NCIT: C28161, HL70162: IM)
Route:	
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 <sup>^</sup> Rash within 14 days of dose <sup>^</sup> 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
Administering 1 Tovider.  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)
D	HAVRIX (NDC 58160-0825-43)
Date Administered:	11/23/2018

Additional Observations:	
Dose #: Doses in Series:	1  2
	Y
Valid Dose:	
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization: Administered Amt:	Oceanview Pediatrics
	0.5 mL
Administering Provider: Administered at Location:	J. Martinez
Lot#:	333 Oceanview Lane, Stamford Connecticut 06901 6359RT33
	1/4/2019
Exp Date:  Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	· · · · · · · · · · · · · · · · · · ·
Site:	Intramuscular (NCIT: C28161, HL70162: IM) 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:	05/23/2019
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:	09/11/2019
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 (00006-4681-01)

Date Administered:	09/22/2021
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#:	0854FF
Exp Date:	4/13/2022
Manufacturer:	Merck and Co Inc (MVX MSD)
Route:	Subcutaneous (NCIT: C38299, HL70162: SC)
Site:	Left Arm (HL70163: LA)
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:	0.5 mL
Administering Provider:	Sandra Molina
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)
	Varicella
Vaccine Group:	
Administered:	Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01)
Date Administered:	12/15/2019
Additional Observations:	
Dose #:	
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#:	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:	10/31/2023
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

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.