## Description

A two month old male infant, Russell Clinton Richardson, is brought to a clinic for a well child visit by his mother Maria Elizabeth Richardson (nee Billington) and his father John William Richardson. A clinic staff member collects basic patient demographic information including name, date of birth and sex. A clinic provider, Wilma Thomas (physician ID 654) reviews the patient's vaccination history and determines that the child previously received Hepatitis B vaccine 1 day after birth and 1 month after birth. The staff member determines that the patient needs DTaP, Hib, IPV, Rotavirus and Pneumococcal vaccinations. Because of the patient's status of Native American, he qualifies for all Vaccine For Children (VFC) supplied vaccines under the status of VFC eligible - American Indian/Alaska Native. The parents are given 5 Vaccine Information Sheets (VIS) to review. After reading them, they agree that the child should receive all the vaccinations recommended. They also agree that the data should be shared once it is incorporated into the local IIS. They indicate that reminders and recalls may be sent by any method. Appropriate doses of DTaP/Hib/IPV (Pentacel), Rotavirus (RotaTeq) and Pneumococcal (Prevnar 13) are selected from the clinic's stock of publically funded vaccines. A clinician, Lily Jackson (ID 7824) prepares and administers the doses to the patient and then enters the data into the EHR and transmits it to the IIS.

#### **Comments**

No Comments

## Pre-condition

No PreCondition

## **Post-Condition**

No PostCondition

## **Test Objectives**

Create an administration message containing historical (using CVX) and new administrations (using NDC)

Support for next of kin

Support for patient consent

Support for VIS

Support for funding source

Support for VFC data.

# **Evaluation Criteria**

Message Validation Report

#### Notes

For new administration messages, the vaccine is communicated using NDC codes in RXA-5 (Administered Code). For a given vaccine, one or more NDC codes may be appropriate to message. For this reason, RXA-5.1 is categorized as "Value - Test Case Fixed List" and allows for multiple valid values. The Message Content and Example Message data contain a single representative valid NDC code for example purposes.

ONC has determined that, from a regulatory/program perspective, an HIT Module cannot be required to be able to generate messages with the Vaccine Funding Source OBX segment for 2015 Edition certification testing. For certification purposes, ONC permits Testers to ignore the error notification generated by the NIST Immunization Test Suite when this segment is missing. Since the product under test will have to meet state reporting requirements when implemented, and many states require this information, it may be beneficial for HIT Modules to demonstrate support for the Vaccine Funding Source OBX segment during 2015 Edition certification testing.