

Description

This step provides the details for the patient that should exist in the system under test before testing scenarios are performed.

Functions associated with this patient: 7.0.0

Name abbreviated in Function and Test Step title as: FIN

Pre-condition

Patient 7	
ID Number	7777
ID Type	Medical record number
Name	
First	Finley
Middle	Ira
Last	Nash
Suffix	
Date of Birth	04/05/1966
Sex	Male
Race ¹	Asian
Ethnicity ¹	Hispanic or Latino
Permanent Address ¹	
Address Line 1 ¹	700 Locust Ln
Address Line 2	
City ¹	Springfield
State ¹	OR
Zip Code ¹	97477
Country ¹	USA
Phone Number ¹	(541) 555-0007
Use ¹	Primary Residence Number
Type ¹	Cellular Phone
Part of a multiple birth? ¹	No
Birth order ¹	1
Reminder Recall ¹	Reminder/recall - any method
Protection Indicator ¹ : Consent= (No) /No Consent =(Yes)	No
IIS Status ¹	Active
Deceased? ¹	No
Vaccine Program Eligibility	Not VFC eligible
¹ - If required by the SUT	

Post-Condition

Data listed in this test case exists in the system under test.

Test Objectives

Patient Pre-load

Notes

The Protection Indicator is the consent to share information with the registry. When marking if the patient has consented or not consented the applicable field, PD1-12 shall be marked with "Y" =Yes, protect my information (No consent) or "N" =No, do not protect my information (Consent).