

Description

Juan Marcel Marina is selected as the patient and his record is opened in the EHR.

Comments

No Comments

Pre-condition

Juan Marcel Marina Initial Data Load completed.

Post-Condition

Juan Marcel Marina is the active working patient in the EHR.

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 system. 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 Juan Marcel Marina from similar sounding names 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	Juan
Patient Name: Middle	Marcel
Patient Name: Last	Marina
Patient Date of Birth	03/04/2019
Birth Time	11:00AM
Patient Gender (Administrative Sex)	M
Patient Multiple Birth Indicator	No
Patient Birth Order	NA
Responsible Person Name: First	Manuel
Responsible Person Name: Middle	Marcel
Responsible Person Name: Last	Marina
Responsible Person Name: Relationship to Patient	Father
Mother's Name: First	Anita
Mother's Name: Middle	Francesca
Mother's Name: Last	Marina
Mother's Name: Maiden Last	Morales
Patient Address: Street	4623 Standish Way
Patient Address: City	Stamford
Patient Address: State	CT
Patient Address: Country	US
Patient Address: Zipcode	06903
Patient Address: County of Residence	Fairfield
Race	White
Ethnicity	Hispanic or Latino
Birthing Facility Name	Shoreline Hospital
Birth Delivery Location Address (BDL)	325 Shoreline Drive, Stamford Connecticut 06901
Patient Birth State	CT
Patient Primary Language	English
Patient Telephone Number	(203) 555-1213
Patient Telephone Number Type (e.g., home, cell)	cell
Patient E-mail Address	None
Publicity Code- Reminder/recall	no calls (03 HL70215)
Protection Indicator	No
Protection Indicator Effective Date	NA
Immunization Registry Status	NA
Preferred Contact Method	Text

Notes

No Note