

Description

The physician accesses the record for Juana Maria Gonzales and:

- Views the vaccine forecast (either as provided by the Immunization Registry or as determined through EHR defined methods).

Comments

No Comments

Pre-condition

The EHR Vaccine History is imported from the Immunization History returned from the Immunization Registry (previous step 'View and import response to request for vaccination history for Juana Maria Gonzales').

Post-Condition

A vaccine forecast based upon the imported vaccine history is available to the user.

Test Objectives

View Reconciled Immunization Forecast: The EHR or other clinical software system has the ability to re-evaluate and update the immunization forecast using a patient's newly updated immunization history. Forecasts are updated following reconciliation of immunization data contained in the public health immunization registry with immunization data contained in the EHR. Processing the new forecast can be internal to the EHR or it can use an external forecasting service, but should reference the most recent recommendations.

Evaluation Criteria

1. Tester verifies that the vendor can display the immunization forecast based upon the reconciled vaccination history:

2. Verify that the EHR includes in the vaccine forecast:

Hep B Peds NOS due on 10/31/2021
DTaP due on 11/30/2021
Hib due on 11/30/2021
IPV due on 11/30/2021
Pneumococcal conjugate due on 11/30/2021
Rotavirus due on 11/30/2021
HepA due on 10/1/2022
MMR due on 10/1/2022
Varicella due on 10/1/2022
influenza, unspecified formulation due on Sept 1, 2022 or later

Notes

NOTE: Influenza does not have an overdue date. For DTaP: catchup schedule at this age doesn't really have an overdue date; same with Hib; Jan 14, 2021 is latest date to start rotavirus so depends on the date of the test; For these younger children, the EHR may follow a more detailed schedule based on age at the time of the test. This will result in variation in the forecast for this patient depending upon the date the test is run. Tester should document the rotavirus forecast implemented by the vendor. While there is not an expected recommendation for the earliest date to give for influenza, this may appear in some EHR implementations. Tester should note if this is included.

The due date must be in range for the date shown. Vaccine forecast dates may be plus or minus 10 days to accommodate differences in date handling.

Further variation should be documented in the notable exceptions, but minimally each forecast vaccine must be present.

