

#### Description

Following the vaccination visit, the patient/parent uses the specified interface to print the immunization report for the patient including all history and forecast information.

#### 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 printed copy of the 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 Printable Immunization Record:** The EHR or other clinical software system provides a printable version of the immunization record.

#### Evaluation Criteria

Using the patient facing features (e.g. portal), show that the vaccine history including today's vaccine/forecast can be printed:

The following patient demographics are included in the printable report:

Patient Identifier Number:	Vendor Assigned
Patient Identifier Type Code:	Vendor Assigned
Patient Name:	Juana Mariana Vazquez
Date/Time of Birth:	11/01/2015 11:05am
Sex:	Female
Patient Address:	4345 Standish Way, Stamford, CT, 06903
Multiple Birth:	N
Birth Order:	NA

The following Vaccination History is displayed:

Vaccine Group:	Hep B Peds NOS
Administered:	hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGRIX-B (NDC 58160-0820-43)
Date Administered:	11/01/2015
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:	.05 mL
Administering Provider:	Jane Carter
Administered at Location:	325 Shoreline Drive, Stamford Connecticut 06901
Lot#:	6332FK33
Exp Date:	12/14/2015
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)

Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	Hep B Peds NOS
Administered:	hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGRIX-B (NDC 58160-0820-43)
Date Administered:	12/20/2015
Additional Observations:	None
Dose #:	2
Doses in Series:	3
Valid Dose:	Y
Ordering Provider:	Frank Smith
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	.05 mL
Administering Provider:	Sandra Molina
Administered at Location:	400 Shoreline Drive, Stamford Connecticut 06901
Lot#:	6352FK1
Exp Date:	12/31/2015
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	Hep B Peds NOS
Administered:	hepatitis B vaccine, pediatric or pediatric/adolescent dosage (CVX 08) ENGRIX-B (NDC 58160-0820-43)
Date Administered:	05/20/2016
Additional Observations:	None
Dose #:	3
Doses in Series:	3
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	Sandra Molina
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6352FK24
Exp Date:	8/31/2017
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	1/22/2016
Additional Observations:	None
Dose #:	1
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS2341
Exp Date:	11/30/2016

Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	3/23/2016
Additional Observations:	
Dose #:	2
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS2433
Exp Date:	9/4/2016
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	5/22/2016
Additional Observations:	
Dose #:	3
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS3255
Exp Date:	12/1/2016
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	2/21/2017
Additional Observations:	
Dose #:	4
Doses in Series:	5
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D409QS249

Exp Date:	3/1/2017
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	diphtheria, tetanus toxoids and acellular pertussis vaccine, unspecified
Administered:	diphtheria, tetanus toxoids and acellular pertussis vaccine, 5 pertussis antigens (CVX 106) DAPTACEL (NDC 49281-0286-58)
Date Administered:	11/20/2019
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:	.05 mL
Administering Provider:	Linda Casera
Administered at Location:	4253 Standish Way, Stamford Connecticut 06903
Lot#:	D643QS8243
Exp Date:	12/01/2019
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	Hib, unspecified formulation
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	1/22/2016
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M54K9245
Exp Date:	3/24/2016
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	Hib, unspecified formulation
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	3/23/2016
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901

Lot#:	7M55K3342
Exp Date:	10/30/2016
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	Hib, unspecified formulation
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	5/22/2016
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M75K4566
Exp Date:	5/23/2016
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	Hib, unspecified formulation
Administered:	Haemophilus influenzae type b vaccine, PRP-OMP conjugate (CVX 49) PedvaxHIB (NDC 00006-4897-01)
Date Administered:	11/21/2016
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	7M53K5534
Exp Date:	2/22/2017
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	poliovirus vaccine, inactivated
Administered:	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-88)
Date Administered:	1/22/2016
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901

Lot#:	D333PV2431
Exp Date:	10/4/2016
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	poliovirus vaccine, inactivated
Administered:	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-88)
Date Administered:	3/23/2016
Additional Observations:	Adverse Reaction of (VXC11^convulsions (fits, seizures) within 72 hours of dose^CDCPHINVS)
Dose #:	2
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D333PV4344
Exp Date:	3/23/2017
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	poliovirus vaccine, inactivated
Administered:	poliovirus vaccine, inactivated (CVX 10) IPOL (NDC 49281-0860-88)
Date Administered:	2/21/2017
Additional Observations:	Adverse Reaction of (VXC12^fever of >40.5C (105F) within 48 hours of dose^CDCPHINVS)
Dose #:	3
Doses in Series:	4
Valid Dose:	Y
Ordering Provider:	J. Rodriguez
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	.05 mL
Administering Provider:	Linda Casera
Administered at Location:	4253 Standish Way, Stamford Connecticut 06903
Lot#:	D335PV9644
Exp Date:	4/22/2017
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	pneumococcal, unspecified formulation
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	1/22/2015
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:	.05 mL
Administering Provider:	J. Martinez

Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P243V3281
Exp Date:	1/30/2015
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	pneumococcal, unspecified formulation
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	3/23/2016
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P343V8321
Exp Date:	3/30/2016
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	pneumococcal, unspecified formulation
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	5/22/2016
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P853V2164
Exp Date:	8/30/2016
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	pneumococcal, unspecified formulation
Administered:	pneumococcal conjugate vaccine, 13 valent (CVX 133) PREVNAR 13 (NDC 00005-1971-01)
Date Administered:	1/11/2017
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:	.05 mL

Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	P853V58532
Exp Date:	4/18/2017
Manufacturer:	Pfizer, Inc (MVX PFR)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	rotavirus, unspecified formulation
Administered:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01)
Date Administered:	1/22/2016
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
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6359RV533
Exp Date:	2/15/2016
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Oral (NCIT C38288, HL70162: PO)
Site:	(NA)
Vaccine Group:	rotavirus, unspecified formulation
Administered:	rotavirus, live, monovalent vaccine (CVX 119) ROTARIX (NDC 58160-0851-01)"
Date Administered:	3/23/2016
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:	5/10/2016
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Oral (NCIT C38288, HL70162: PO)
Site:	(NA)
Vaccine Group:	influenza, unspecified formulation
Administered:	Influenza, seasonal, injectable (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0516-00)
Date Administered:	9/25/2016
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:	.25 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D8043IN8734
Exp Date:	3/12/2016
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	influenza, unspecified formulation
Administered:	Influenza, seasonal, injectable (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0516-00)
Date Administered:	10/29/2016
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:	.25 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D8043IN8746
Exp Date:	3/12/2017
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Thigh (HL7 RT)
Vaccine Group:	influenza, unspecified formulation
Administered:	Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0517-00)
Date Administered:	10/2/2017
Additional Observations:	
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez
Entering Organization:	Oceanview Pediatrics
Administered Amt:	.25 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D9334IN9333
Exp Date:	5/22/2018
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	influenza, unspecified formulation
Administered:	Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0518-00)
Date Administered:	11/4/2018
Additional Observations:	
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Carlos Herrera
Entered By:	J. Martinez

Entering Organization:	Oceanview Pediatrics
Administered Amt:	.25 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	D9553IN2243
Exp Date:	4/30/2019
Manufacturer:	Sanofi Pasteur Inc (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	influenza, unspecified formulation
Administered:	Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (NDC 49281-0519-00)
Date Administered:	10/15/2019
Additional Observations:	
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Gina Ricci
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	.5 mL
Administering Provider:	Gina Ricci
Administered at Location:	Oceanview Pharmacy, 15 Post Road, Stamford Connecticut 06901
Lot#:	8L4B3423
Exp Date:	12/30/2019
Manufacturer:	Sanofi Pasteur Inc. (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	influenza, unspecified formulation
Administered:	Influenza, injectable, quadrivalent, preservative free, pediatric (CVX 161) FLUZONE QUADRIVALENT (49281-0520-00)
Date Administered:	Current Date
Additional Observations:	Adverse Reaction of (VXC14^Rash within 14 days of dose ^CDCPHINVS)
Dose #:	
Doses in Series:	
Valid Dose:	
Ordering Provider:	Frank Smith
Entered By:	Sandra Molina
Entering Organization:	Shoreline Pediatrics
Administered Amt:	.5 mL
Administering Provider:	Sandra Molina
Administered at Location:	400 Shoreline Drive, Stamford Connecticut 06901
Lot#:	8L4B3521
Exp Date:	12/31/2021
Manufacturer:	Sanofi Pasteur Inc. (MVX PMC)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	Hep A, unspecified formulation
Administered:	hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-43)
Date Administered:	11/23/2016
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6359RT33
Exp Date:	1/4/2017
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Right Deltoid (HL7 RD)
Vaccine Group:	Hep A, unspecified formulation
Administered:	hepatitis A vaccine, pediatric/adolescent dosage, 2 dose schedule (CVX 83) HAVRIX (NDC 58160-0825-43)
Date Administered:	5/23/2017
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	6359RT48
Exp Date:	9/11/2017
Manufacturer:	GlaxoSmithKline Biologicals SA (MVX SKB)
Route:	Intramuscular (NCIT C28161, HL70162: IM)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	MMR
Administered:	measles, mumps, rubella virus vaccine (CVX 03) MMR II (NDC 00006-4681-01)
Date Administered:	08/22/2016
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:	.05 mL
Administering Provider:	Sandra Molina
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	0853CC
Exp Date:	12/15/2016
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Thigh (HL7 LT)
Vaccine Group:	MMR
Administered:	measles, mumps, rubella virus vaccine (CVX 03) MMR II (00006-4681-01)
Date Administered:	9/22/2019
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	0854FF
Exp Date:	4/13/2020
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
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:	.05 mL
Administering Provider:	Sandra Molina
Administered at Location:	400 Shoreline Drive, Stamford Connecticut 06901
Lot#:	0934GG
Exp Date:	12/31/2021
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Left Deltoid (HL7 LD)
Vaccine Group:	Varicella
Administered:	Varicella vaccine (CVX 21) Varivax (NDC 00006-4827-01)
Date Administered:	12/15/2017
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:	.05 mL
Administering Provider:	J. Martinez
Administered at Location:	333 Oceanview Lane, Stamford Connecticut 06901
Lot#:	2341BB
Exp Date:	12/1/2018
Manufacturer:	Merck Sharp & Dohme Corp (MVX MSD)
Route:	Subcutaneous (NCIT C38299, HL70162: SC)
Site:	Right Deltoid (HL7 RD)

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.