

2015 Edition §170.315(a)(2) Computerized Provider Order Entry - Laboratory

Testing Components:

| | | | | |
|-----|---|---|---|---|
| Gap |  |  |  |  |
|-----|---|---|---|---|

Test Procedure Version 1.0 – Last Updated 1/08/16

Please consult the Final Rule entitled: *2015 Edition Health Information Technology (Health IT) Certification Criteria, 2015 Edition Base Electronic Health Record (EHR) Definition, and ONC Health IT Certification Program Modifications* for a detailed description of the certification criterion with which these testing steps are associated. We also encourage developers to consult the Certification Companion Guide in tandem with the test procedure as they provide clarifications that may be useful for product development and testing.

Note: The order in which the test steps are listed reflects the sequence of the certification criterion and does not necessarily prescribe the order in which the test should take place.

Required Tests

(a)(2) Computerized Provider Order Entry – Laboratory

(i) Enable a user to record, change, and access laboratory orders.

Standard(s): None

| Criteria ¶ | System Under Test | Test Lab Verification |
|------------|--|--|
| (i) | <ol style="list-style-type: none"> 1. The user electronically records a patient’s laboratory order. 2. The user accesses the patient’s laboratory order and changes the order. | <ol style="list-style-type: none"> 1. The tester verifies the user can electronically record a patient’s laboratory order. 2. The tester verifies the user can access and change the patient’s laboratory order. |

(ii) Optional - Include a “reason for order” field.

Standard(s): None

| Criteria ¶ | System Under Test | Test Lab Verification |
|------------------|---|---|
| Optional (ii) | The user is able to include the “reason for order” field as part of the patient’s laboratory order demonstrated in section (i). | The tester verifies that laboratory order created in section (i) includes the “reason for order” field. |

Document History

| Version Number | Description of Change | Date |
|----------------|-----------------------|------------------|
| 1.0 | Final Test Procedure | January 08, 2016 |

Dependencies: For all related and required criteria, please refer to the [Master Table of Related and Required Criteria](#).