| Element | Data |
|----------------------|-----------------------------------|
| Patient Name | Manuel Diego Vasquez |
| Mother's Maiden Name | |
| ID Number | 21142 |
| Date/Time of Birth | 02/15/1947 |
| Administrative Sex | Male |
| Patient Address | 227 Park Ave Bozeman MT 59715 USA |
| Local Number | (406)555-5815 |
| Email | Manuel.Vasquez@isp.com |
| Race | White |
| Ethnic Group | Hispanic or Latino |
| Birth Order | 1 |

| Element | Data |
|---|--------------------|
| Immunization Registry Status | A |
| Immunization Registry Status Effective Date | 06/25/2015 |
| Publicity Code | No reminder/recall |
| Publicity Code Effective Date | 06/25/2015 |
| Protection Indicator | No |
| Protection Indicator Effective Date | 06/25/2015 |

| Element | Data |
|------------------------------------|---|
| Administered Code | Pneumococcal Conjugate, unspecified formulation |
| Date/Time Start of Administration | 10/21/2014 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical Administration |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Completion Status | CP |
| Action Code | Add |
| Route | |
| Administration Site | |
| Entering Organization | West Clinic |
| Entered By | Lily Jackson |
| Ordered By | |