

Element	Data
Patient Name	Lacy Wells
Mother's Maiden Name	
ID Number	22533
Date/Time of Birth	04/30/2011
Administrative Sex	Female
Patient Address	12 North Oak St Bozeman MT 59715 USA
Local Number	(406)555-2914
Race	White
Ethnic Group	Not Hispanic or Latino
Birth Order	1

Element	Data
Immunization Registry Status	A
Immunization Registry Status Effective Date	04/30/2011
Publicity Code	No reminder/recall
Publicity Code Effective Date	06/25/2015
Protection Indicator	Yes
Protection Indicator Effective Date	06/25/2015

Element	Data
Name	Janelle Trudeau
Relationship	Guardian
Address	12 North Oak St Bozeman MT 59715 USA
Phone Number	(406)555-2914

Element	Data
Administered Code	ProQuad
Date/Time Start of Administration	06/25/2015
Administered Amount	0.5
Administered Units	mL
Administration Notes	New Record
Administering Provider	Lily Jackson
Substance Lot Number	407453
Substance Expiration Date	10/15/2015
Substance Manufacturer Name	Merck and Co., Inc.
Substance/Treatment Refusal Reason	
Completion Status	CP
Action Code	Add
Route	Subcutaneous
Administration Site	Right Deltoid
Entering Organization	West Clinic
Entered By	Lily Jackson
Ordered By	Wilma Thomas

Observations

Element	Data
Vaccine Funding Source	Private
Vaccine Funding Program Eligibility	Not VFC Eligible
Document Type	Measles/Mumps/Rubella/Varicella VIS
Date Vis Presented	

Element	Data
Administered Code	KINRIX
Date/Time Start of Administration	06/25/2015
Administered Amount	0.5
Administered Units	mL
Administration Notes	New Record
Administering Provider	Lily Jackson
Substance Lot Number	88402
Substance Expiration Date	07/30/2015
Substance Manufacturer Name	GlaxoSmithKline
Substance/Treatment Refusal Reason	
Completion Status	CP
Action Code	Add
Route	Intramuscular
Administration Site	Left Deltoid
Entering Organization	West Clinic
Entered By	Lily Jackson
Ordered By	Wilma Thomas

Observations

Element	Data
Vaccine Funding Source	Private
Vaccine Funding Program Eligibility	Not VFC Eligible
Document Type	Polio VIS
Date Vis Presented	
Document Type	Diphtheria/Tetanus/Pertussis (DTaP) VIS
Date Vis Presented	