-Patient	Inform	ation -
- Рапеш		amon-

Element	Data
Patient Name	Tyler Owen Banks
Mother's Maiden Name	
ID Number	8891
Date/Time of Birth	06/02/2004
Administrative Sex	M
Patient Address 1	924 Sycamore Lane Bozeman MT 59715 USA
Local Number	(406) 555-5835
Race	White
Ethnic Group	Not Hispanic or Latino
Birth Order	1

## -Immunization Registry Information-

Element	Data
Immunization Registry Status	A
Publicity Code (Text)	Reminder/recall - any method
Protection Indicator	Y
Protection Indicator Effective Date	
Publicity Code Effective Date	06/24/2015
Immunization Registry Status Effective Date	06/02/2004

## -Guardian or Responsible Party-

	<u> </u>
Element	Data
Name	Karl Banks
Relationship	Father
Address	924 Sycamore Lane Bozeman MT 59715
Address (Country)	USA
Phone Number or Email address	(406) 555-5835

## -Vaccine Administration Information-

Element	Data
Administered Code - Text	Hep A, ped/adol, 2 dose
Date/Time Start of Administration	06/24/2015
Administered Amount	0.5
Administered Units	mL
Administration Notes	New Record
Administering Provider	Lily Jackson
Substance Lot Number	208490
Substance Expiration Date	01/20/2016
Substance Manufacturer Name	Merck and Co., Inc.
Substance/Treatment Refusal Reason	

Route	Intramuscular	
Administration Site	Right Thigh	

New Record	
Element	Data
Vaccine Funding Source	Private
Vaccine Funding Program Eligibility	Not VFC Eligible
Document Type	Hepatitis A VIS
Date Vis Presented	

	Order Information
Element	Data
Entered By	Lily Jackson
Ordered By	Wilma Thomas