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Element	Data
Patient Name	Tyler Owen Banks
Mother's Maiden Name	
ID Number	8891
Date/Time of Birth	06/02/2004
Administrative Sex	Male
Patient Address	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-

Data
A
06/02/2004
Reminder/recall - any method
06/24/2015
Yes
06/24/2015

Guardian or Responsible Party

Element	Data
Name	Karl Leonard Banks
Relationship	Father
Address	924 Sycamore Lane Bozeman MT 59715 USA
Phone Number	(406)555-5835

-Vaccine Administration Information-

Element	Data
Administered Code	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	
Completion Status	CP

Action Code	Update
Route	Intramuscular
Administration Site	Right Thigh
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	Hepatitis A VIS
Date Vis Presented	