

Patient Information

| Element | Data |
|----------------------|---|
| Patient Name | Mariela Gonzales Morales |
| Mother's Maiden Name | Joanna Gonzales |
| ID Number | 123456 |
| Date/Time of Birth | 03/30/2015 |
| Administrative Sex | F |
| Patient Address 1 | 3321 Standish Way Stamford CT 06903 USA |
| Patient Address 2 | 325 Shorline Drive Stamford CT 06901 |
| Local Number | (203)555-1214 |
| Race | Other Race |
| Ethnic Group | Hispanic or Latino |
| Birth Order | |

Immunization Registry Information

| Element | Data |
|---|------------------------------|
| Immunization Registry Status | A |
| Publicity Code (Text) | Reminder/Recall - any method |
| Protection Indicator | |
| Protection Indicator Effective Date | |
| Publicity Code Effective Date | 07/01/2012 |
| Immunization Registry Status Effective Date | 07/01/2012 |

Guardian or Responsible Party

| Element | Data |
|-------------------------------|-------------------------------------|
| Name | Joanna Morales |
| Relationship | Mother |
| Address | 4623 Standish Way Stamford CT 06903 |
| Address (Country) | |
| Phone Number or Email address | (203)555-1213 |

Vaccine Administration Information

| Element | Data |
|-----------------------------------|---|
| Administered Code - Text | hepatitis B vaccine, pediatric or pediatric/adolescent dosage |
| Date/Time Start of Administration | 11/23/2009 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | Historical information - from public agency |
| Administering Provider | Lisa Sirtis |
| Substance Lot Number | 6332FK33 |
| Substance Expiration Date | 12/14/2010 |

| | |
|------------------------------------|--------------------------------|
| Substance Manufacturer Name | GlaxoSmithKline Biologicals SA |
| Substance/Treatment Refusal Reason | |
| Route | IM |
| Administration Site | Left Thigh |

Historical information - from public agency

| Element | Data |
|---------|------|
|---------|------|

Vaccine Administration Information

| Element | Data |
|------------------------------------|--|
| Administered Code - Text | hepatitis B vaccine, unspecified formulation |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Route | |
| Administration Site | |

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

Vaccine Administration Information

| Element | Data |
|------------------------------------|-------------------------------|
| Administered Code - Text | DTaP, unspecified formulation |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |

| | |
|---------------------|--|
| Route | |
| Administration Site | |

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

Vaccine Administration Information

| Element | Data |
|------------------------------------|------------|
| Administered Code - Text | Hib |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Route | |
| Administration Site | |

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

Vaccine Administration Information

| Element | Data |
|-----------------------------------|---|
| Administered Code - Text | Pneumococcal Conjugate, unspecified formulation |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |

| | |
|------------------------------------|--|
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Route | |
| Administration Site | |

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

Vaccine Administration Information

| Element | Data |
|------------------------------------|------------------------------------|
| Administered Code - Text | rotavirus, unspecified formulation |
| Date/Time Start of Administration | 07/15/2015 |
| Administered Amount | 999 |
| Administered Units | |
| Administration Notes | |
| Administering Provider | |
| Substance Lot Number | |
| Substance Expiration Date | |
| Substance Manufacturer Name | |
| Substance/Treatment Refusal Reason | |
| Route | |
| Administration Site | |

| Element | Data |
|---|---|
| Vaccination contraindication | current fever with moderate-to-severe illness |
| Vaccination contraindication/precaution effective date | 07/15/2015 |
| Vaccination temporary contraindication/precaution expiration date | 08/15/2015 |

Order Information

| Element | Data |
|------------|-------------|
| Entered By | Lisa Sirtis |
| Ordered By | Jane Carter |

Order Information

| Element | Data |
|------------|---------------|
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

Order Information

| Element | Data |
|------------|---------------|
| Entered By | Sandra Molina |
| Ordered By | Frank Smith |

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| Element | Data |
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Order Information

| Element | Data |
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| Entered By | Sandra Molina |
| Ordered By | Frank Smith |