

Patient Information

| Element              | Data  |
|----------------------|---|
| Patient Name         | Elise Wong                                    |
| Mother's Maiden Name |   |
| ID Number            | 90012   |
| Date/Time of Birth   | 06/15/1983                                    |
| Administrative Sex   | Female  |
| Patient Address      | 9200 Wellington Trail Bozeman MT 59715<br>USA |
| Local Number         | (406)555-7896                                 |
| Email                | Elise.Wong@isp.com                            |
| Race                 | Asian   |
| Ethnic Group         | Not Hispanic or Latino                        |
| Birth Order          | 1   |

Immunization Registry Information

| Element                                     | Data                         |
|---|------------------------------|
| Immunization Registry Status                | A                            |
| Immunization Registry Status Effective Date | 06/15/1983                   |
| Publicity Code                              | Reminder/recall - any method |
| Publicity Code Effective Date               | 06/24/2015                   |
| Protection Indicator                        | No                           |
| Protection Indicator Effective Date         | 06/24/2015                   |

Vaccine Administration Information

| Element                            | Data           |
|------------------------------------|----------------|
| Administered Code                  | TENIVAC        |
| 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               | 315841         |
| Substance Expiration Date          | 12/16/2015     |
| Substance Manufacturer Name        | Sanofi Pasteur |
| Substance/Treatment Refusal Reason |                |
| Completion Status                  | CP             |
| Action Code                        | Add            |
| Route                              | Intramuscular  |
| Administration Site                | Right Deltoid  |
| Entering Organization              | West Clinic    |
| Entered By                         | Lily Jackson   |
| Ordered By                         | Wilma Thomas   |

Observations

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| Element                             | Data                        |
|-------------------------------------|-----------------------------|
| Vaccine Funding Source              | Private                     |
| Vaccine Funding Program Eligibility | Not VFC Eligible            |
| Document Type                       | Tetanus/Diphtheria (Td) VIS |
| Date Vis Presented                  |                             |

Vaccine Administration Information

| Element                            | Data                               |
|------------------------------------|------------------------------------|
| Administered Code                  | influenza, unspecified formulation |
| Date/Time Start of Administration  | 10/12/2014                         |
| 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                         |                                    |

Vaccine Administration Information

| Element                            | Data                               |
|------------------------------------|------------------------------------|
| Administered Code                  | influenza, unspecified formulation |
| Date/Time Start of Administration  | 11/12/2013                         |
| 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 |              |