

## BAPATECV00000001

## BORANG ADUAN PUSAT KAUNSELING DAN PUSAT LAPORAN UNTUK COVID-19 DAN KESAN SAMPINGAN VAKSIN

Email: test3@gmail.com

Did you fill out this form to: Diri

Vaccine recipient name: test

Vaccine Recipient Identification Card: 123456

Vaccine recipients phone: +601254789654

Vaccine recipient email: test3@gmail.com

Country: Afghanistan

Vaccine recipients zip code: 1234

Age: 13

Gender: Perempuan

Field of work: Pendidikan

Nation: China

Type of vaccine received: AstraZeneca

Complaints for side effects of the dose: Kedua

Date of injection: **03/12/2022** 

Injection reception location: dhaka

Available on the vaccine card received by you/your beneficiary is also the MySejahtera application When do side effect symptoms first appear after an injection?:1 jam What are the side effects experienced?: \*  $\sqrt{}$ Pengsan  $\overline{\mathsf{A}}$ Strok How does it affect the quality of life?: Meninggal dunia Are you/your next of kin hospitalized?: ya Ward type (if applicable): ordinary ward How long have you/your heirs been treated in the hospital?: 2-3 hari Name of hospital where treated / confirmed dead (if any): cms How long have you/your heirs experienced these side effects?: 2-3 hari How are you/heirs now?: Pulih sepenuhnya Choose only the worst one: What is your disease history/previous inheritance?: \*  $\sqrt{}$ Tiada sejarah penyakit  $\checkmark$ Kencing manis  $\sqrt{}$ Alahan (allergy) The doctor's reaction and diagnosis to the side effects you/your heirs receive: **Lorem** Ipsum is simply dummy text of the Did the doctor say it was related to the vaccine injection received?: ya Have you made a report in the MySejahtera application? ya

Vaccine batch number: 12345678

Have you made a report to the National Pharmaceutical Regulatory Agency (NPRA) ya

The doctor's reaction and diagnosis to the side effects you/your heirs receive: **Lorem Ipsum is simply dummy text of the** 

Did the doctor say it was related to the vaccine injection received?: ya

Have you made a report in the MySejahtera application? ya

Have you made a report to the National Pharmaceutical Regulatory Agency (NPRA): **va** 

Are you willing to be contacted? State information such as telephone/email number and name (if contacted on behalf of the beneficiary: **Lorem Ipsum is simply dummy text of the printing and typesetting industry** 

Additional comments or complaints about side effects and current living conditions: Lorem Ipsum is simply dummy text of the printing and typesetting industry