

Image not found or type unknown



BAPATECV00000001

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

Email: test6@gmail.com

Did you fill out this form to: **Diri**

Vaccine recipient name: **Rony**

Vaccine Recipient Identification Card: **1423456**

Vaccine recipients phone: **+60854215469**

Vaccine recipient email: **test6@gmail.com**

Country: **Afghanistan**

Vaccine recipients zip code: **1234**

Age: **21**

Gender: **Lelaki**

Field of work: **Surirumah**

Nation: **China**

Type of vaccine received: **Pfizer - Comirnaty**

Complaints for side effects of the dose: **Pertama**

Date of injection: **03/16/2022**

Injection reception location: **dhaka**

Vaccine batch number: **123456**

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?: *



Pengsan



Strok



Masalah pendengaran



Bells palsy (otot muka)



Sesak nafas

How does it affect the quality of life?: **Meninggal dunia**

Are you/your next of kin hospitalized?: **tidak**

Ward type (if applicable): **icu (intensive care unit)**

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?: **Sehari**

How are you/heirs now?: **Berkurang, masih ada baki kesakitan**

Choose only the worst one:

What is your disease history/previous inheritance?: *



Tiada sejarah penyakit



Kencing manis



Alahan (allergy)



Penyakit auto-imun



Masalah buah pinggang

The doctor's reaction and diagnosis to the side effects you/your heirs receive: **N/A**

Did the doctor say it was related to the vaccine injection received?: **N/A**

Have you made a report in the MySejahtera application? **N/A**

Have you made a report to the National Pharmaceutical Regulatory Agency (NPRA)
N/A

The doctor's reaction and diagnosis to the side effects you/your heirs receive: **N/A**

Did the doctor say it was related to the vaccine injection received?: **N/A**

Have you made a report in the MySejahtera application? **N/A**

Have you made a report to the National Pharmaceutical Regulatory Agency (NPRA):
N/A

Are you willing to be contacted? State information such as telephone/email number and name (if contacted on behalf of the beneficiary: **Ipsum has been the industry's standard dummy text ever since the 1500s**

Additional comments or complaints about side effects and current living conditions:
Ipsum has been the industry's standard dummy text ever since the 1500s