

Image not found or type unknown



BAPATECV00000001

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

Email: mr.mokaddes@hotmail.com

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

Vaccine recipient name: **My Name**

Vaccine Recipient Identification Card: **123456789**

Vaccine recipients phone: **+601234567890**

Vaccine recipient email: **email@gmail.cm**

Country: **Afghanistan**

Vaccine recipients zip code: **1234**

Age: **23**

Gender: **Lelaki**

Field of work: **Lain-lain**

Nation: **Permanent resident**

Type of vaccine received: **AstraZeneca**

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

Date of injection: **01/06/2022**

Injection reception location: **Location**

Vaccine batch number: **Batch No 4**

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?: **24 jam**

What are the side effects experienced?: *

How does it affect the quality of life?: **Teruk**

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

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

How long have you/your heirs been treated in the hospital?: **Sebulan dan ke atas**

Name of hospital where treated / confirmed dead (if any): **no**

How long have you/your heirs experienced these side effects?: **3 minggu**

How are you/heirs now?: **Pulih sepenuhnya**

Choose only the worst one:

What is your disease history/previous inheritance?: *

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

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

Have you made a report in the MySejahtera application? **tidak**

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

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

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

Have you made a report in the MySejahtera application? **tidak**

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

Are you willing to be contacted? State information such as telephone/email number and name (if contacted on behalf of the beneficiary: **bhrt**

Additional comments or complaints about side effects and current living conditions:
adition