

### Patient Information

Element	Data
Patient Name	Anita Francesca Marina
Mother's Maiden Name	Sophia Santos
ID Number	123456 987633
Date/Time of Birth	06/01/1985
Administrative Sex	Female
Patient Address	4623 Standish Way Stamford CT 06903 USA
Local Number	(203)555-1213
Race	White
Ethnic Group	Hispanic or Latino
Multiple Birth Indicator	No
Birth Order	

### Vaccine Administration Information[\*]

#### Vaccine Administration Information

Element	Data
Administered Vaccine	measles, mumps, rubella, and varicella virus vaccine
Date/Time Start of Administration	06/01/2016
Administered Amount	0.5
Administered Units	
Administration Notes	
Administering Provider	Jessica Mason
Substance Lot Number	6552FK16
Substance Expiration Date	12/31/2016
Substance Manufacturer Name	Merck Sharp and Dohme Corp
Substance/Treatment Refusal Reason	
Completion Status	Complete
Action Code	Add
Route	Intramuscular
Administration Site	Left Deltoid
Entering Organization	Metro Primary Care
Entered By	Jessica Mason
Ordered By	Shannon Price

#### Vaccine Administration Information

Element	Data
Administered Vaccine	tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine, adsorbed
Date/Time Start of Administration	06/01/2016
Administered Amount	0.5
Administered Units	
Administration Notes	
Administering Provider	Jessica Mason
Substance Lot Number	6932FK14
Substance Expiration Date	12/31/2016
Substance Manufacturer Name	Sanofi Pasteur
Substance/Treatment Refusal Reason	
Completion Status	Complete
Action Code	Add
Route	Intramuscular
Administration Site	Left Deltoid

Entering Organization	Metro Primary Care
Entered By	Jessica Mason
Ordered By	Shannon Price

#### Vaccine Administration Information

Element	Data
Administered Vaccine	influenza, recombinant, quadrivalent, injectable, preservative free
Date/Time Start of Administration	09/01/2019
Administered Amount	0.5
Administered Units	
Administration Notes	
Administering Provider	Jessica Mason
Substance Lot Number	6475FK21
Substance Expiration Date	12/31/2019
Substance Manufacturer Name	Sanofi Pasteur
Substance/Treatment Refusal Reason	
Completion Status	Complete
Action Code	Add
Route	Intramuscular
Administration Site	Left Deltoid
Entering Organization	Metro Primary Care
Entered By	Jessica Mason
Ordered By	Shannon Price

#### Vaccine Administration Information

Element	Data
Administered Vaccine	influenza, recombinant, quadrivalent, injectable, preservative free
Date/Time Start of Administration	09/01/2020
Administered Amount	0.5
Administered Units	
Administration Notes	
Administering Provider	Sophia Muir
Substance Lot Number	8L4B3423
Substance Expiration Date	12/31/2020
Substance Manufacturer Name	Sanofi Pasteur
Substance/Treatment Refusal Reason	
Completion Status	Complete
Action Code	Add
Route	Intramuscular
Administration Site	Right Deltoid
Entering Organization	Metro Primary Care
Entered By	Jessica Mason
Ordered By	John Jobs

#### Vaccine Administration Information

Element	Data
Administered Vaccine	COVID-19-Substitute
Date/Time Start of Administration	10/31/2020
Administered Amount	0.5
Administered Units	

Administration Notes	
Administering Provider	Jessica Mason
Substance Lot Number	8L7B3418
Substance Expiration Date	12/31/2021
Substance Manufacturer Name	Sanofi Pasteur
Substance/Treatment Refusal Reason	
Completion Status	Complete
Action Code	Add
Route	Intramuscular
Administration Site	Right Deltoid
Entering Organization	Metro Primary Care
Entered By	Jessica Mason
Ordered By	Shannon Price

Element	Data
Document Type	COVID-19-Substitute VIS
VIS Presentation Date	10/31/2020
vaccine fund pgm elig cat	Not VFC elig
Vaccine funding source	Federal funds

#### Vaccine Administration Information

Element	Data
Administered Vaccine	hepatitis B vaccine, adult dosage
Date/Time Start of Administration	10/31/2020
Administered Amount	1
Administered Units	
Administration Notes	
Administering Provider	Jessica Mason
Substance Lot Number	6942FL12
Substance Expiration Date	12/31/2021
Substance Manufacturer Name	GlaxoSmithKline Biologicals SA
Substance/Treatment Refusal Reason	
Completion Status	Complete
Action Code	Add
Route	Intramuscular
Administration Site	Left Deltoid
Entering Organization	Metro Primary Care
Entered By	Jessica Mason
Ordered By	Shannon Price

Element	Data
Document Type	Hepatitis B Vaccine VIS
VIS Presentation Date	10/31/2020
vaccine fund pgm elig cat	Not VFC elig
Vaccine funding source	Private funds

#### Vaccine Administration Information

Element	Data
Administered Vaccine	hepatitis A vaccine, adult dosage
Date/Time Start of Administration	05/15/2016

Administered Amount	999
Administered Units	
Administration Notes	
Administering Provider	
Substance Lot Number	
Substance Expiration Date	
Substance Manufacturer Name	
Substance/Treatment Refusal Reason	
Completion Status	Not Administered
Action Code	Add
Route	
Administration Site	
Entering Organization	Metro Primary Care
Entered By	Jessica Mason
Ordered By	Shannon Price

Element	Data
Diseases with serological evidence of immunity	Serology confirmed hepatitis A