

Patient Information

Element	Data
Patient Name	Wray Charles Paige
Mother's Maiden Name	
ID Number	8891
Date/Time of Birth	06/02/2002
Administrative Sex	Male
Patient Address	924 Sycamore Lane Arroyo PA 00714 USA
Local Number	(406)555-5835
Race	Native American
Ethnic Group	Not Hispanic or Latino
Multiple Birth Indicator	Yes
Birth Order	2

Immunization Registry Information

Element	Data
Immunization Registry Status	Active
Immunization Registry Status Effective Date	06/02/2004
Publicity Code	Reminder/recall - to provider
Publicity Code Effective Date	06/24/2015
Protection Indicator	No
Protection Indicator Effective Date	06/24/2015

Vaccine Administration Information

Element	Data
Administered Vaccine	COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL dose
Date/Time Start of Administration	01/23/2021
Administered Amount	999
Administered Units	
Administration Notes	
Administering Provider	
Substance Lot Number	
Substance Expiration Date	
Substance Manufacturer Name	
Substance/Treatment Refusal Reason	Patient decision
Completion Status	Refused
Action Code	Add
Route	
Administration Site	
Entering Organization	NISTEHRFacility
Entered By	Janet Prince
Ordered By	Harry Porter