

Patient Information

Element	Data
Patient Name	Mariela Gonzales Morales
Mother's Maiden Name	Joanna Gonzales
ID Number	123456
Date/Time of Birth	03/30/2015
Administrative Sex	F
Patient Address 1	3321 Standish Way Stamford CT 06903 USA
Patient Address 2	325 Shorline Drive Stamford CT 06901
Local Number	(203)555-1214
Race	Other Race
Ethnic Group	Hispanic or Latino
Birth Order	

Immunization Registry Information

Element	Data
Immunization Registry Status	A
Publicity Code (Text)	Reminder/Recall - any method
Protection Indicator	
Protection Indicator Effective Date	
Publicity Code Effective Date	07/01/2012
Immunization Registry Status Effective Date	07/01/2012

Guardian or Responsible Party

Element	Data
Name	Joanna Morales
Relationship	Mother
Address	4623 Standish Way Stamford CT 06903
Address (Country)	
Phone Number or Email address	(203)555-1213

Vaccine Administration Information

Element	Data
Administered Code - Text	hepatitis B vaccine, pediatric or pediatric/adolescent dosage
Date/Time Start of Administration	11/23/2009
Administered Amount	999
Administered Units	
Administration Notes	Historical information - from public agency
Administering Provider	Lisa Sirtis
Substance Lot Number	6332FK33
Substance Expiration Date	12/14/2010
Substance Manufacturer Name	GlaxoSmithKline Biologicals SA
Substance/Treatment Refusal Reason	
Route	IM

Administration Site

Left Thigh

Historical information - from public agency

Element

Data

Vaccine Administration Information

Element

Data

Administered Code - Text	hepatitis B vaccine, unspecified formulation
Date/Time Start of Administration	07/15/2015
Administered Amount	999
Administered Units	
Administration Notes	
Administering Provider	
Substance Lot Number	
Substance Expiration Date	
Substance Manufacturer Name	
Substance/Treatment Refusal Reason	
Route	
Administration Site	

Element

Data

Vaccination contraindication	current fever with moderate-to-severe illness
Vaccination contraindication/precaution effective date	07/15/2015
Vaccination temporary contraindication/precaution expiration date	08/15/2015

Vaccine Administration Information

Element

Data

Administered Code - Text	DTaP, unspecified formulation
Date/Time Start of Administration	07/15/2015
Administered Amount	999
Administered Units	
Administration Notes	
Administering Provider	
Substance Lot Number	
Substance Expiration Date	
Substance Manufacturer Name	
Substance/Treatment Refusal Reason	
Route	
Administration Site	

Element

Data

Vaccination contraindication	current fever with moderate-to-severe illness
Vaccination contraindication/precaution effective date	07/15/2015

Vaccination temporary contraindication/precaution expiration date	08/15/2015
--	------------

Vaccine Administration Information

Element	Data
Administered Code - Text	Hib
Date/Time Start of Administration	07/15/2015
Administered Amount	999
Administered Units	
Administration Notes	
Administering Provider	
Substance Lot Number	
Substance Expiration Date	
Substance Manufacturer Name	
Substance/Treatment Refusal Reason	
Route	
Administration Site	

Element	Data
Vaccination contraindication	current fever with moderate-to-severe illness
Vaccination contraindication/precaution effective date	07/15/2015
Vaccination temporary contraindication/precaution expiration date	08/15/2015

Vaccine Administration Information

Element	Data
Administered Code - Text	Pneumococcal Conjugate, unspecified formulation
Date/Time Start of Administration	07/15/2015
Administered Amount	999
Administered Units	
Administration Notes	
Administering Provider	
Substance Lot Number	
Substance Expiration Date	
Substance Manufacturer Name	
Substance/Treatment Refusal Reason	
Route	
Administration Site	

Element	Data
Vaccination contraindication	current fever with moderate-to-severe illness
Vaccination contraindication/precaution effective date	07/15/2015
Vaccination temporary	08/15/2015

contraindication/precaution expiration date	
---	--

Vaccine Administration Information

Element	Data
Administered Code - Text	rotavirus, unspecified formulation
Date/Time Start of Administration	07/15/2015
Administered Amount	999
Administered Units	
Administration Notes	
Administering Provider	
Substance Lot Number	
Substance Expiration Date	
Substance Manufacturer Name	
Substance/Treatment Refusal Reason	
Route	
Administration Site	

Element	Data
Vaccination contraindication	current fever with moderate-to-severe illness
Vaccination contraindication/precaution effective date	07/15/2015
Vaccination temporary contraindication/precaution expiration date	08/15/2015

Order Information

Element	Data
Entered By	Lisa Sirtis
Ordered By	Jane Carter

Order Information

Element	Data
Entered By	Sandra Molina
Ordered By	Frank Smith

Order Information

Element	Data
Entered By	Sandra Molina
Ordered By	Frank Smith

Order Information

Element	Data
Entered By	Sandra Molina
Ordered By	Frank Smith

Order Information

Element	Data
Entered By	Sandra Molina

Ordered By	Frank Smith
------------	-------------

Order Information	
Element	Data
Entered By	Sandra Molina
Ordered By	Frank Smith