

Auburn Montgomery Student Health Services

7461 East Dr
Montgomery AL, 36117
(334) 244-3281

Date: 08/16/19

PATIENT: WILLIAMS, PAM **DOB:** 02/24/1964 **Gender:** **MRN:** 1075 **AGE:** 55 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Needs Typhoid and Hep A vaccine

Symptoms: Traveling to China on 8/30/19

ORDERS:

Typhoid (1 unit(s)): Immunizations

Hepatitis A (1 unit(s)): Immunizations

RESULTS:

Typhoid:

Site Given: Left Deltoid

Dosage Given: 0.5 milliliter(s)

Administered By: Harvey, Melodye - CRNP

Hepatitis A:

Site Given: Right Deltoid

Dosage Given: 1 milliliter(s)

Administered By: Harvey, Melodye - CRNP

ASSESSMENT:

Z23 - ENCOUNTER FOR IMMUNIZATION (PRIMARY)

PLAN:

Typhoid, Hep A

RTC pm

Electronically signed by Melodye Harvey, CRNP on 08/16/19 10:27 AM