

Auburn Montgomery Student Health Services

7461 East Dr
Montgomery AL, 36117-8092
(334) 244-3281

Date: 10/14/20

PATIENT: BELL, TRACEY **DOB:** 08/12/1993 **Gender:** FEMALE **MRN:** 1110 **AGE:** 27 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Flu shot

Symptoms: No reported symptoms

Temp: 99.3

ORDERS:

Immunization Injection Administration (1 unit(s)): Injection

Influenza virus vaccine (1 unit(s)): Immunizations

RESULTS:

Influenza virus vaccine:

Site Given: Left Deltoid

Dosage Given: 0.5 milliliter(s)

Administered By: Havard, Jyssica - MA

ASSESSMENT:

Z23 - Encounter for immunization (PRIMARY).

PLAN:

Administered into (L) deltoid. Patient tolerated well.

Electronically signed by Jyssica Havard, MA on 10/14/20 3:26 PM

Electronically signed by Lindsey Barton, CRNP on 10/14/20 3:40 PM

A handwritten signature in blue ink that reads "J. Barton, CRNP". The signature is written in a cursive, flowing style.