

Auburn Montgomery Student Health Services

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

Date: 11/06/20

PATIENT: MORRIS, DARYL **DOB:** 04/03/1980 **Gender:** MALE **MRN:** 1370 **AGE:** 40 Years

VISIT TYPE: Office Visit Established

CHIEF COMPLAINT: Flu shot

Symptoms: No reported symptoms

Temp: 98.6

ALLERGIES: adhesive

MEDICATIONS:

No Known Medications

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 11/06/20 11:38 AM

Electronically signed by Lindsey Barton, CRNP on 11/06/20 11:45 AM

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