

ADULT IMMUNIZATION RECORD

Allergies:

Reactions:

Name: PEARSON, ELASIA MONAE
 DOB: 12/22/1998
 CHR#: 261019839
 Date of Service: 11/16/2020

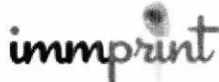
Vaccine Family	Type of Vaccine (no Brand Name)	Date Given (mm/dd/yy)	Age at Adm	Dose (cc/mL)	Route & Site	Mfr.	Lot #	VIS Date	Vaccinator Signature
Tetanus, Diphtheria, (Pertussis) (e.g., Td, Tdap)	DTAP	03/10/99	2 m	0.5					
	DTAP	05/11/99	4 m	0.5					
	DTAP	07/15/99	6 m	0.5					
	DTAP	05/30/01	2 y	0.5					
	DTAP	05/18/04	5 y	0.5					
	TDAP	09/21/10	11 y	0.5					
Hepatitis A (e.g., HepA, HepA-HepB)	HEP A	08/18/14	15 y	0.5					OUTSIDE CLINIC
Hepatitis B (e.g., HepB, HepB-Hib, DTaP-HepB-IPV, HepA-HepB)	HEP B UNS	12/24/98	0 m	0.5					OUTSIDE CLINIC
	HEP B ADOL/PED	03/10/99	2 m	0.5					
	HEP B ADOL/PED	07/15/99	6 m	0.5					
	HEP B UNS	12/22/99	12 m	0.5					
Human Papillomavirus (e.g., HPV)	HPV (GARDASIL)	09/21/10	11 y	0.5					
	HPV (GARDASIL)	09/19/12	13 y	0.5					OUTSIDE CLINIC
	HPV (GARDASIL)	08/18/14	15 y	0.5					OUTSIDE CLINIC
Measles, Mumps, Rubella (MMR, MMRV)	MMR	05/30/01	2 y	0.5					
	MMR	05/18/04	5 y	0.5					
Meningococcal (MCV4, MPSV4)	MCV4P (MENACTRA)	09/21/10	11 y	0.5					
Pneumococcal (e.g. PCV, PPV)	PCV7	05/30/01	2 y	0.5					
	PCV7	08/15/01	2 y	0.5					
	PCV7	09/24/01	2 y	0.5					
Polio (e.g., IPV, DTaP-HepB-Hib)	OPV	03/11/99	2 m	0.5	PO				
	OPV	05/11/99	4 m	0.5	PO				
	OPV	07/15/99	6 m	0.5					
	IPV	05/18/04	5 y	0.5					
Varicella (Var, MMRV)	VARICELLA	05/30/01	2 y	0.5					
	VARICELLA	09/21/10	11 y	0.5					
Influenza (e.g., TIV, LAIV)									
Zoster									
Other	HIB (HBOC)	03/10/99	2 m	0.5					
	HIB (HBOC)	05/11/99	4 m	0.5					
	HIB (HBOC)	07/15/99	6 m	0.5					
	HIB (HBOC)	05/30/01	2 y	0.5					

CHR- 8A

ELMORE CO HLTH DEPT
 6501 US HWY 231 NORTH

WETUMPKA, AL36092-0006
 334 5671171

PPD	Date	Results	PPD	Date	Results
Mantoux			Maxtoux		
Mantoux			Mantoux		
Mantoux			Mantoux		



Vaccine Forecast for : PEARSON, ELASIA MONAE

As of: 11/16/2020

DOB: 12/22/1998

Age: 21 Yrs 10 Mo 24 days

<u>Given Vaccine</u>	<u>Evaluated Vaccine</u>	<u>Vaccination Date</u>	<u>Evaluation</u>	<u>Invalid Reason</u>
DTAP UNS	DTAP UNS	03/10/1999	Valid	
DTAP UNS	DTAP UNS	05/11/1999	Valid	
DTAP UNS	DTAP UNS	07/15/1999	Valid	
DTAP UNS	DTAP UNS	05/30/2001	Valid	
DTAP UNS	DTAP UNS	05/18/2004	Valid	
HEP A PED/ADOL 2 DOSE	HEP A PED/ADOL 2 DOSE	08/18/2014	Valid	
HEP B ADOL/PED	HEP B ADOL/PED	03/10/1999	Valid	
HEP B ADOL/PED	HEP B ADOL/PED	07/15/1999	Valid	
HEP B UNS	HEP B UNS	12/24/1998	Valid	
HEP B UNS	HEP B UNS	12/22/1999	Accepted	Extra Dose
HIB (HBOC)	HIB (HBOC)	03/10/1999	Valid	
HIB (HBOC)	HIB (HBOC)	05/11/1999	Valid	
HIB (HBOC)	HIB (HBOC)	07/15/1999	Valid	
HIB (HBOC)	HIB (HBOC)	05/30/2001	Valid	
HPV (GARDASIL)	HPV (GARDASIL)	09/21/2010	Valid	
HPV (GARDASIL)	HPV (GARDASIL)	09/19/2012	Valid	
HPV (GARDASIL)	HPV (GARDASIL)	08/18/2014	Valid	
IPV	IPV	05/18/2004	Valid	
MCV4P (MENACTRA)	MCV4P (MENACTRA)	09/21/2010	Valid	
MMR	MMR	05/30/2001	Valid	
MMR	MMR	05/18/2004	Valid	
OPV	OPV	03/11/1999	Valid	
OPV	OPV	05/11/1999	Valid	
OPV	OPV	07/15/1999	Valid	
PCV7	PCV7	05/30/2001	Valid	
PCV7	PCV7	08/15/2001	Valid	
PCV7	PCV7	09/24/2001	Accepted	Extra Dose
TDAP	TDAP	09/21/2010	Valid	
VARICELLA	VARICELLA	05/30/2001	Valid	
VARICELLA	VARICELLA	09/21/2010	Valid	



Vaccine Forecast for : PEARSON, ELASIA MONAE

Recommended Vaccines:			Not Recommended Vaccines:	
<u>Vaccine</u>	<u>Dose Number</u>	<u>Date Needed</u>	<u>Vaccine</u>	<u>Reason</u>
HepA	2	Due Now	HPV	Series Complete
INFLUENZA	1	Due Now	HepB	Series Complete
Td (Adult), Adsorbed		Due Now	Hib	Series Complete
PneumoPPV	1	12/22/2063	MMR	Series Complete
Men B	1	Provider Discretion	Polio	Series Complete
Meningococcal		Conditional High Risk	Varicella	Series Complete
Pneumococcal Conjugate		Conditional High Risk	Rotavirus	Too Old

*This information, based on ACIP recommendations, is only a guide and should not be used exclusively to determine your patients' vaccination needs.