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AUM Student Health Services
Immunization Record

Patient Name: Bala Prudhvi

Birthdate: 2-18-1999

Allergies/Medical Alert: NKA

Immunization	Date	Site	Dose	MFR	Comments	V.I. S.	Initials
Tdap							
Td Booster							
MMR							
HEP A							
HEP B							
Other							

	Date Given:	Date Read:	Results:	MFR	LOT#	Comments	Initials
Tuberculin Testing PPD (MANTOUX) 0.1 ml ID	10/6/2021	10-8-21	+	sunifi	LS734AA	WFA exp 8/22/22	WFB

Initials	Signature	Initials	Signature
WFB	WFB [Signature]		

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STUDENT HEALTH CENTER
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P.O. BOX 244023
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