

AUM Student Health Services

Immunization Record

Patient Name: Satya GorrathiBirthdate: 11.13.96Allergies/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	10/18/21	10-17-21		Surufi	G9736AA	(D)FA exp 8/22/22	WRB

Initials	Signature	Initials	Signature
WRB			

AUBURN UNIVERSITY MONTGOMERY
STUDENT HEALTH CENTER
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