

Auburn Montgomery Student Health Services

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

Date: 10/27/21

PATIENT: COCHRAN, COURTNEY **DOB:** 04/24/1987 **Gender:** FEMALE **MRN:** 392 **AGE:** 34 Years

VISIT TYPE: Lab Only

CHIEF COMPLAINT: flu vaccine and COVID booster vaccine

MEDICATIONS:

Lo Loestrin Fe 1 mg-10 mcg (24)/10 mcg (2) tablet
Synthroid 137 mcg tablet
amoxicillin 875 mg-potassium clavulanate 125 mg tablet (TAKE 1 TABLET BY ORAL ROUTE EVERY 12 HOURS)
cetirizine 10 mg tablet (TAKE 1 TABLET (10 MG) BY ORAL ROUTE ONCE DAILY)
guaifenesin ER 600 mg tablet, extended release 12 hr (TAKE 1 TABLET (600 MG) BY ORAL ROUTE EVERY 12 HOURS AS NEEDED)

ORDERS:

Immunization Injection Administration (1 unit(s)): Injection
Influenza virus vaccine (1 unit(s)): Immunizations
COVID-19, mRNA, LNP-S, PF (Moderna) (1 unit(s)): Immunizations
Third Dose- Moderna (1 unit(s)): Injection

RESULTS:

Influenza virus vaccine:
Site Given: Right Deltoid
Dosage Given: 0.5 milliliter(s)
Administered By: Bicknell, Miranda - RN

COVID-19, mRNA, LNP-S, PF (Moderna):
Site Given: Left Arm
Dosage Given: 0 unit(s)

ASSESSMENT:

Z23 - ENCOUNTER FOR IMMUNIZATION (PRIMARY)

Electronically signed by Lindsey Barton, CRNP on 10/27/21 1:47 PM

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