

**AUM Student Health Services
Immunization Record**

Patient Name: Kaelen Brunson

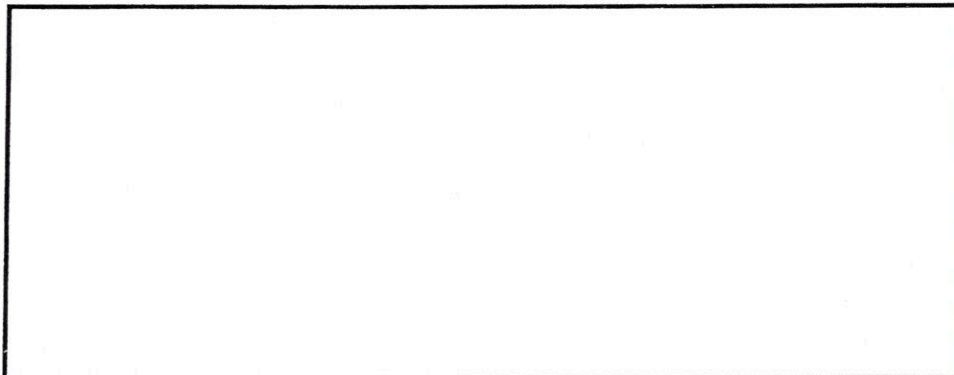
Birthdate: 11/8/1999

Allergies/Medical Alert: NKDA

Immunization	Date	Site	Dose	MFR	Comments	V.I. S.	Initials
Tdap	8/24/21	Deltoid	2372H EXP: 04/01/23			✓	MB
			NDC 56180-842-43 Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis Vaccine, Adsorbed BOOSTRIX 0.5 mL				
Td Booster			496018				
MMR							
HEP A							
HEP B							
Other	Typhoid	Deltoid	0.5mL	Sunofi	Lot T2A371m exp. 4/13/22	✓	MB
					NDC:49281-790-51		

Tuberculin Testing PPD (MANTOUX) 0.1 ml ID	Date Given:	Date Read:	Results:	MFR	LOT#	Comments	Initials

Initials	Signature	Initials	Signature
MB			



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