

**AUM Student Health Services  
Immunization Record**

Patient Name: Shimira Greene

Birthdate: 2/8/1982

Allergies/Medical Alert: shellfish

| Immunization | Date    | Site                         | Dose                                                                                                                                                        | MFR    | Comments                                                                                                                                                                                                                                                                               | V.I. S.      | Initials |
|--------------|---------|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----------|
| Tdap         | 8/10/21 | (L) Deltoid                  | LOT: 237ZH<br>EXP: 04/01/23<br>NDC 58160-842-43<br>Tetanus Toxoid,<br>Reduced Diphtheria<br>Toxoid and Acellular Pertussis<br>Vaccine, Adsorbed<br>BOOSTRIX |        |                                                                                                                                                                                                                                                                                        |              | MS       |
| Td Booster   |         |                              | 0.5 mL<br>Mfr. by<br>GlaxoSmithKline<br>Biologics                                                                                                           |        | 1 Single-dose 0.5-mL Vial<br>MEASLES, MUMPS, AND<br>RUBELLA VIRUS VACCINE LIVE<br>M-M-R®<br>Rx only<br>Lot Exp.<br>T013724<br>2022APR21<br>Manufactured and Distributed by:<br>Merck Sharp & Dohme Corp.,<br>a subsidiary of<br>MERCK & CO., INC.<br>Whitehouse Station, NJ 08889, USA |              |          |
| MMR          | 8/25/21 | (L) upper<br>arm             | 496018<br>LOT: G99R4<br>EXP: 05/20/22<br>NDC 58160-826-43<br>Hepatitis A<br>Vaccine<br>HAVRIX®<br>144 ELU./mL<br>Mfr. by<br>GlaxoSmithKline<br>Biologics    |        |                                                                                                                                                                                                                                                                                        |              | MS       |
| HEP A        | 8/25/21 | (L) Deltoid                  |                                                                                                                                                             |        |                                                                                                                                                                                                                                                                                        |              | MS       |
| HEP B        |         |                              |                                                                                                                                                             |        |                                                                                                                                                                                                                                                                                        |              |          |
| Other        | 8/20/21 | Typhoid (L) Deltoid          | 0.5 mL                                                                                                                                                      | Sanofi | Lot # T2A371m                                                                                                                                                                                                                                                                          | ✓            | MS       |
|              | 8/20/21 | Polio (L) upper<br>arm Sub Q |                                                                                                                                                             | Sanofi | Lot # T2E872m                                                                                                                                                                                                                                                                          | exp. 4/13/22 | MS       |
|              |         |                              |                                                                                                                                                             |        | NDL: 49281-790-88                                                                                                                                                                                                                                                                      |              |          |
|              |         |                              |                                                                                                                                                             |        | NDL: 49281-800-78                                                                                                                                                                                                                                                                      |              |          |

| Tuberculin Testing<br>PPD (MANTOUX)<br>0.1 ml ID | Date Given: | Date Read: | Results: | MFR | LOT# | Comments | Initials |
|--------------------------------------------------|-------------|------------|----------|-----|------|----------|----------|
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|                                                  |             |            |          |     |      |          |          |

| Initials | Signature      | Initials | Signature |
|----------|----------------|----------|-----------|
| MS       | MS [Signature] |          |           |
|          |                |          |           |
|          |                |          |           |

**AUBURN UNIVERSITY MONTGOMERY  
STUDENT HEALTH CENTER  
IRMA B. MOORE HALL RM. 102  
P.O. BOX 244023  
MONTGOMERY, AL 36124-4023**

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