

Auburn Montgomery Warhawk Health Services

7461 East Dr STE 102
Montgomery AL, 36117-8092
(334) 244-3281

Date: 08/30/24

PATIENT: CRUTCHFIELD, KAITLYN **DOB:** 04/20/2008 **Gender:** FEMALE **MRN:** 4941 **AGE:** 16 Years

VISIT TYPE: Lab Only

CHIEF COMPLAINT: Meningococcal vaccine

GROWTH PERCENTILES:

Weight/Age: N/A
Height/Age: N/A
Weight/Height: N/A
BMI/Age: N/A
Head Circumference/Age: N/A

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

Bromfed DM 2 mg-30 mg-10 mg/5 mL oral syrup (TAKE 10 MILLILITERS BY ORAL ROUTE EVERY 8 HOURS as needed for cough/congestion)

ORDERS:

Immunization Injection Administration (1 unit(s)): Injection
Meningococcal (1 unit(s)): Immunizations

RESULTS:

Meningococcal:
Site Given: Left Deltoid
Dosage Given: 0.5 milliliter(s)
Administered By: Bicknell, Miranda - RN

ASSESSMENT:

Z23 - Encounter for immunization (PRIMARY).

Electronically signed by Lindsey Barton, CRNP on 08/30/24 8:53 AM

L. Barton, DNP, CRNP