

**AUM Student Health Services  
Immunization Record**

Patient Name: Survani Gudavalli

Birthdate: 8/11/1998

Allergies/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<br>PPD (MANTOUX)<br>0.1 ml ID | 8/27/21     | 8/30/21    | ⊕        | Survani | GS804AA | WFA exp. 12/3/23 | WFS      |
|                                                  |             |            |          |         |         |                  |          |
|                                                  |             |            |          |         |         |                  |          |
|                                                  |             |            |          |         |         |                  |          |

| Initials | Signature | Initials | Signature |
|----------|-----------|----------|-----------|
| WFS      | WFS D RN  |          |           |
|          |           |          |           |
|          |           |          |           |

**AUBURN UNIVERSITY MONTGOMERY**  
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