

ADULT IMMUNIZATION RECORD

Allergies: _____

Reactions: _____

Name: PRIMM, DAVEENYAH ALEECE
 DOB: 03/12/2000
 Chart #: _____
 Date of Service: 06/08/2022

Vaccine Family	Type of Vaccine (no Brand Name)	Date Given (mm/dd/yy)	Age at Adm	Dose (cc/mL)	Route & Site	Mfr.	Lot #	VIS Date	Vaccinator Signature
Tetanus, Diphtheria, (Pertussis) (e.g., Td, Tdap)	DTAP	07/28/00	4 m	0.5					
	DTAP	09/14/00	6 m	0.5					
	DTAP	06/04/01	14 m	0.5					
	DTAP	08/13/01	17 m	0.5					
	DTAP	03/17/04	4 y	0.5	LA	AP	U1006CA		OUTSIDE CLINIC
Hepatitis A (e.g., HepA, HepA-HepB)									
Hepatitis B (e.g., HepB, HepB-Hib, DTaP-HepB-IPV, HepA-HepB)	HEP B ADOL/PED	03/15/00	0 m	0.5					
	HEP B UNS	04/28/00	1 m	0.5					
	HEP B UNS	06/15/00	3 m	0.5					
	HEP B UNS	09/14/00	6 m	0.5					
Human Papillomavirus (e.g., HPV)									
Measles, Mumps, Rubella (MMR, MMRV)	MMR	06/04/01	14 m	0.5					
	MMR	03/17/04	4 y	0.5	RA	MSD	0813N		OUTSIDE CLINIC
Meningococcal (MCV4, MPSV4)									
Pneumococcal (e.g. PCV, PPV)	PCV7	08/13/01	17 m	0.5					
Polio (e.g., IPV, DTaP-HepB-Hib)	IPV	07/28/00	4 m	0.5					
	IPV	09/14/00	6 m	0.5					
	IPV	06/04/01	14 m	0.5					
	IPV	03/17/04	4 y	0.5	LA				OUTSIDE CLINIC
Varicella (Var, MMRV)	VARICELLA	08/13/01	17 m	0.5					
Influenza (e.g., TIV, LAIV)	IIV4 - P FREE	10/12/21	21 y	0.5	IM	PMC	UT7330MA		OUTSIDE CLINIC
Zoster									
Other	HIB UNS	07/28/00	4 m						
	HIB UNS	09/14/00	6 m						
	HIB (PRP-T)	06/04/01	14 m						
	HIB (PRP-T)	08/13/01	17 m						
	Pfizer Covid19	02/27/21	20 y	0.3	IM LD	PFR	EL9264		OUTSIDE CLINIC
	Pfizer Covid19	03/19/21	21 y	0.3	IM LD	PFR	EN6200		OUTSIDE CLINIC

WARHAWK HEALTH SERVICES
 7461 EAST DRIVE
 RM 102 MOORE HALL
 MONTGOMERY, AL36117
 334 2443281

PPD	Date	Results	PPD	Date	Results
Mantoux			Maxtoux		
Mantoux			Mantoux		
Mantoux			Mantoux		