

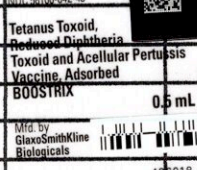
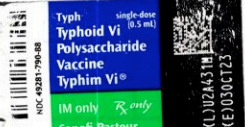
AUM Student Health Services

Immunization Record

Patient Name: Elaine Fincannon

Birthdate: 11/21/56

Allergies/Medical Alert: NKDA

Immunization	Date	Site	Dose	MFR	Comments	V.I. S.	Initials
Tdap	4/8/22		One Td			8/6/2021	WB
Td Booster							
MMR							
HEP A							
HEP B							
Other	4/8/22		One			10/30/2019	WB

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

Initials	Signature	Initials	Signature
WB			

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

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