

AUM Student Health Services

Immunization Record

Patient Name:

Jaehoon Jung

Birthdate:

3-5-98

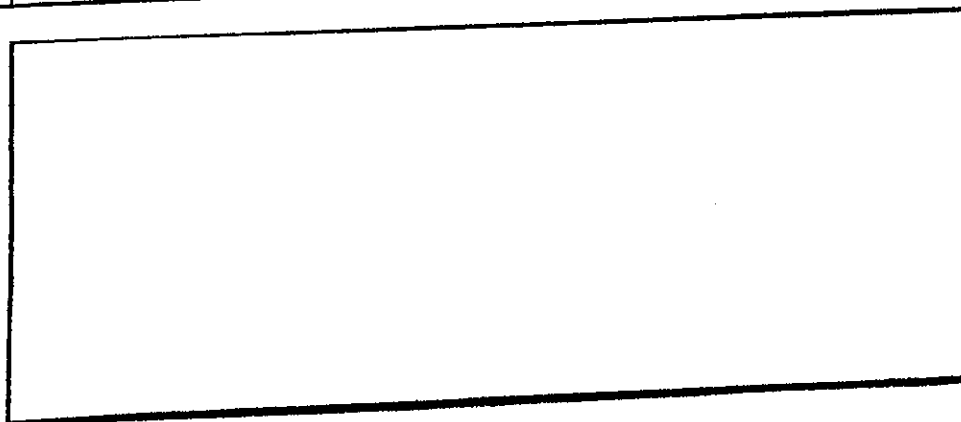
Allergies/Medical Alert:

0

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 PPD (MANTOUX) 0.1 ml ID	1-5-22			Sanofi	CS736AA 8/22/22	RT FA	MF

Initials	Signature	Initials	Signature
MF	Dr. J. Jung		



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