



CEACBC AA009QM5TP

Vaccination Worksheet

OMB No. 1405-0230
FORM No. DS-7794
EXPIRATION DATE: 30 Jun 2021
ESTIMATED BURDEN: 60 minutes

Visit date: 06 Apr 2021

Applicant personal details

Family name: **MARIANO**
Given names: **JOHN CARL**
Sex: **MALE**
Date of birth: **09 Nov 2001**
Country of birth: **PHILIPPINES**
City of birth: **Sto Niño Cagayan**
Prior Country of Residence: **PHILIPPINES**

Applicant identity details

Identity document presented: **Original Passport**
Identity document number: **P4327518B**
Issuing country: **PHILIPPINES**
Date of issue: **07 Jan 2020**
Date of expiry: **06 Jul 2030**
Source: **Clinic**

Applicant visa details

Applicant Category: **Immigrant Visa (Includes SIV, Diversity and Parolees)**
CEAC Barcode: **AA009QM5TP**
Case number: **MNL2020615130**
CEAC Barcode plus suffix: **AA009QM5TP_1**

951 Vaccinations

Exam description: **Applicant's full vaccination history is required.**
Exam status: **Finalized**
Reason requested: **Required under policy**
Clinic: **St Lukes Medical Center Extension Clinic**
Exam date: **06-Apr-2021**

Confirm identity

Was the applicant's identity confirmed? **Yes**

Examiner declaration

User name of person making declaration: **Dr MARIANO II DUMIA**
Date that the declaration was made: **07 Apr 2021**
I declare that this health examination report is a true and correct record of my findings: **Yes**

Record results

Vaccination requirements complete: **Yes**
Reason: **-**
Remarks: **-**
Other contra-indications: **-**

Vaccination Worksheet

Vaccination history

Vaccine
Administered by clinic
Vaccination history
Disease
Waiver reasons(s)
Date
Has the applicant had the disease?

-
-
-
-
-
-
-

Vaccinations

Vaccine	Dates given
Td	
History	
This Clinic	
Immunity Positive	
History	
Waiver reasons	Insufficient time interval to complete series
Pota Teq (RV5)	
History	
This Clinic	
Immunity Positive	
History	
Waiver reasons	Not age appropriate
Hepatitis A	
History	
This Clinic	
Immunity Positive	
History	
Waiver reasons	Not age appropriate
Hepatitis B	
History	
This Clinic	
Immunity Positive	
History	
Waiver reasons	Not age appropriate
Influenza	
History	
This Clinic	
Immunity Positive	
History	
Waiver reasons	Flu vaccine not available
Hib	
History	
This Clinic	
Immunity Positive	
History	
Waiver reasons	Not age appropriate
PCV13	
History	
This Clinic	
Immunity Positive	
History	

Vaccination Worksheet

Waiver reasons	Not age appropriate
MCV4	
History	
This Clinic	
Immunity Positive	
History	
Waiver reasons	Not age appropriate
PPSV 23	
History	
This Clinic	
Immunity Positive	
History	
Waiver reasons	Not age appropriate
MMR	
History	
This Clinic	07 Apr 2021
Immunity Positive	
History	
Waiver reasons	
IPV	
History	
This Clinic	
Immunity Positive	
History	
Waiver reasons	Not routinely available
Tdap	
History	
This Clinic	07 Apr 2021
Immunity Positive	
History	
Waiver reasons	
Varicella Vaccine	
History	
This Clinic	07 Apr 2021
Immunity Positive	
History	No
Waiver reasons	Insufficient time interval to complete series

Attachments

Document Type	Attached
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PAPERWORK REDUCTION ACT STATEMENT

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CONFIDENTIALITY STATEMENT

Vaccination Worksheet

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