

**AUM Student Health Services
Immunization Record**

Patient Name: Tessa Fain

Birthdate: 11/23/96

Allergies/Medical Alert: latex

Immunization	Date	Site	Dose	MFR	Comments	V.I. S.	Initials
Tdap							
Td Booster							
MMR							
HEP A							
HEP B							
Other <u>varicella</u>	<u>11/18/2022</u>	<u>U arm</u> <u>Sub Q</u>					



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

Initials	Signature	Initials	Signature
<u>MF</u>	<u>MF [Signature]</u>		

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