

**AUM Student Health Services
Immunization Record**

Patient Name: Marion Smith

Birthdate: 9-2-1950

Allergies/Medical Alert: Achromycin

Immunization	Date	Site	Dose	MFR	Comments	V.I. S.	Initials
Tdap							
Td Booster							
MMR							
HEP A	11/9/2023	(R) Deltoid Im		LOT: 55M72 EXP: 12/13/24 NDC 58160-826-43 Hepatitis A Vaccine HAVRIX 1440 ELU./mL Mfg. by GlaxoSmithKline Biologicals 495654		10/15/21	WRB
HEP B							
Other							

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

Initials	Signature	Initials	Signature
WRB	WRB [Signature]		

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