

**AUM Student Health Services
Immunization Record**

Patient Name: Versie Jones

Birthdate: 4/12/1955

Allergies/Medical Alert: NKA

Immunization	Date	Site	Dose	MFR	Comments	V.I.S.	Initials
Tdap							
Td Booster							
MMR							
HEP A							
HEP B	11/12/23	(2) deltoid Im		LOT: NT9X3 EXP: 09/09/24 NDC 58160-921-43 Hepatitis B Vaccine (Recombinant) ENGRIX-B 20 mcg/mL Mfg. by GlaxoSmithKline Biologicals		10/15/21	WJB
Other							

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

Initials	Signature	Initials	Signature
WJB	WJB [Signature]		

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