

Auburn Montgomery Warhawk Health Services

7461 East Dr STE 102
Montgomery AL, 36117-8092
(334) 244-3281

Date: 01/12/24

PATIENT: FINKLEA, CHRISYONA **DOB:** 12/18/2002 **Gender:** FEMALE **MRN:** 5325 **AGE:** 21 Years

VISIT TYPE: Lab Only

CHIEF COMPLAINT: Hepatitis B Vaccine

ALLERGIES: No Known Drug Allergies

ORDERS:

Immunization Injection Administration (1 unit(s)): Injection
Hepatitis B (1 unit(s)): Immunizations

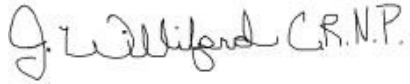
RESULTS:

Hepatitis B:
Site Given: Left Deltoid
Dosage Given: 1 milliliter(s)
Administered By: Marzette, Daedra

ASSESSMENT:

Z23 - Encounter for immunization (PRIMARY).

Electronically signed by Joyce Williford, CRNP on 01/12/24 3:01 PM

A handwritten signature in black ink that reads "J. Williford CRNP". The signature is written in a cursive, flowing style.