Concentra

Adult (18 years or older)
Vaccine Administration Record (VAR)

Patient name: Bagley, Carlton Birth date: 11-24-90

Before administering any vaccines, give the patient copies of all pertinent Vaccine Information Statements (VIS) and make sure he/she understands the risks and benefits of the vaccine(s). Update the patient's personal vaccine card/ international certificate of vaccination or prophylaxis (ICVP) or provide a new ICVP if for travel. Give the patient a copy of this sheet for the patient's PCP if ICVP not used.

Date Vaccine and VIS Given	VACCINE	SCHEDULE	VIS Date	DOSE	RT	Vaccine Information: Manufacturer	Lot #	Exp.	SITE: R/L	Part	ADMINSTERED BY (Signature)	CLINICIAN ORDER (Sign & Date)
	Hepatitis A	Initial 6 months		1.0 ml (0.5ml if ≤18)	IM							
8.31.17	Hepatitis B	Initial / Initial / Initial 1m / 7d / 1m 4-6m / 21d / 2m — / 12m / 12m		1.0 ml	IM	GSK	Lot#KG5YT	ex: 10.11.19			[illegible]	
	Hep A/B Twinrix	Initial / Initial 1 mo. / 7d 6 mo. / 21d — / 12m		1.0 ml	IM	GSK GSK GSK GSK						
	Polio (IPV)			0.5 ml	IM SC							
	Influenza (Inactivated)			0.5 ml	IM							
	Japanese Encephalitis (Ixiaro)	Initial Day 28 Booster		0.5 ml	IM	Valneva Valneva Valneva						
8.31.17	MMR	Initial ≥28 days		0.5 ml	SC	Merck Merck	Lot#N009171	ex: 3.20.19			[illegible]	
	Meningitis Menactra Menveo			0.5 ml	IM							
	Pneumonia Pneumovax			0.5 ml	IM SC	Merck						
	Rabies PRE-EXPOSURE (i.e. travel health)	Initial day 7 day 21 or day 28		1.0 ml	IM							
	Rabies POST-EXPOSURE (5th dose day 28 only if immune compromised)	Initial day 3 day 7 day 14		1.0 ml	IM							
	Td Tetanus/Diphtheria			0.5 ml	IM	Sanofi						
	Tdap Tet/Dip/Pertussis			0.5 ml	IM							
	Injectable Typhoid			0.5 ml	IM	Sanofi Sanofi						
	Oral Typhoid	1 cap every other day		4 caps	PO	PaxVax						
	Varicella Chicken Pox	Initial ≥28 days		0.5 ml	SC	Merck Merck						
	Yellow Fever			0.5 ml	SC	Sanofi						