

Vaccine Administration Record for Adults

Patient name: _____

Birthdate: _____

Chart number: _____

Before administering any vaccines, give the patient copies of all pertinent Vaccine Information Statements (VISs) and make sure he/she understands the risks and benefits of the vaccine(s). Update the patient's personal record card or provide a new one whenever you administer vaccine.

Vaccine	Type of Vaccine ¹ (generic abbreviation)	Date given (mo/day/yr)	Source (F,S,P) ²	Site ³	Vaccine		Vaccine Information Statement		Signature/ initials of vaccinator
					Lot #	Mfr.	Date on VIS ⁴	Date given ⁴	
Tetanus, Diphtheria, (Pertussis) (e.g., Td, Tdap) Give IM.									
Hepatitis A⁵ (e.g., HepA, HepA-HepB) Give IM.									
Hepatitis B⁵ (e.g., HepB, HepA-HepB) Give IM.									
Human Papillomavirus (HPV) Give IM.									
Measles, Mumps, Rubella (MMR) Give SC.									
Varicella (Var) Give SC.									
Pneumococcal, polysaccharide (PPV) Give SC or IM.									
Meningococcal (e.g., MCV4, conjugate; MPSV4, polysaccharide) Give MCV4 IM. Give MPSV4 SC.									
Zoster (Zos) Give SC.									
Influenza (e.g., TIV, inactivated; LAIV, live, attenuated) Give TIV IM. Give LAIV IN.									
Other									
Other									

1. Record the generic abbreviation for the type of vaccine given (e.g., PPV, HepA-HepB), *not* the trade name.
2. Record the source of the vaccine given as either F (Federally-supported), S (State-supported), or P (supported by Private insurance or other Private funds).

3. Record the site where vaccine was administered as either RA (Right Arm), LA (Left Arm), RT (Right Thigh), LT (Left Thigh), IN (Intranasal).
4. Record the publication date of each VIS as well as the date it is given to the patient.
5. For combination vaccines, fill in a row for each separate antigen in the combination.

Vaccine Administration Record for Adults

Patient name: Mohammed Sharik

Birthdate: April 15, 1978

Chart number: 06-132543

Before administering any vaccines, give the patient copies of all pertinent Vaccine Information Statements (VISs) and make sure he/she understands the risks and benefits of the vaccine(s). Update the patient's personal record card or provide a new one whenever you administer vaccine.

Vaccine	Type of Vaccine ¹ (generic abbreviation)	Date given (mo/day/yr)	Source (F,S,P) ²	Site ³	Vaccine		Vaccine Information Statement		Signature/ initials of vaccinator
					Lot #	Mfr.	Date on VIS ⁴	Date given ⁴	
Tetanus, Diphtheria, (Pertussis) (e.g., Td, Tdap) Give IM.	<i>Td</i>	<i>8/01/02</i>	<i>P</i>	<i>LA</i>	<i>U0376AA</i>	<i>AVP</i>	<i>6/10/94</i>	<i>8/01/02</i>	<i>JTA</i>
	<i>Td</i>	<i>9/01/02</i>	<i>P</i>	<i>LA</i>	<i>U0376AA</i>	<i>AVP</i>	<i>6/10/94</i>	<i>9/01/02</i>	<i>PWS</i>
	<i>Td</i>	<i>3/01/03</i>	<i>P</i>	<i>LA</i>	<i>U0376AA</i>	<i>AVP</i>	<i>6/10/94</i>	<i>3/01/03</i>	<i>TAA</i>
					1 shot, 2 different VIS dates				
Hepatitis A⁵ (e.g., HepA, HepA-HepB) Give IM.	<i>HepA-HepB</i>	<i>8/01/02</i>	<i>P</i>	<i>RA</i>	<i>HAB239A4</i>	<i>GSK</i>	<i>8/25/98</i>	<i>8/01/02</i>	<i>JTA</i>
	<i>HepA-HepB</i>	<i>9/01/02</i>	<i>P</i>	<i>RA</i>	<i>HAB239A4</i>	<i>GSK</i>	<i>8/25/98</i>	<i>9/01/02</i>	<i>TAA</i>
	<i>HepA-HepB</i>	<i>2/01/03</i>	<i>P</i>	<i>RA</i>	<i>HAB239A4</i>	<i>GSK</i>	<i>8/25/98</i>	<i>2/01/03</i>	<i>TAA</i>
Hepatitis B⁵ (e.g., HepB, HepA-HepB) Give IM.	<i>HepA-HepB</i>	<i>8/01/02</i>	<i>P</i>	<i>RA</i>	<i>HAB239A4</i>	<i>GSK</i>	<i>7/11/01</i>	<i>8/01/02</i>	<i>JTA</i>
	<i>HepA-HepB</i>	<i>9/01/02</i>	<i>P</i>	<i>RA</i>	<i>HAB239A4</i>	<i>GSK</i>	<i>7/11/01</i>	<i>9/01/02</i>	<i>TAA</i>
	<i>HepA-HepB</i>	<i>2/01/03</i>	<i>P</i>	<i>RA</i>	<i>HAB239A4</i>	<i>GSK</i>	<i>7/11/01</i>	<i>2/01/03</i>	<i>TAA</i>
Human Papillomavirus (HPV) Give IM.									
Measles, Mumps, Rubella (MMR) Give SC.	<i>MMR</i>	<i>8/01/02</i>	<i>P</i>	<i>RA</i>	<i>0025L</i>	<i>MRK</i>	<i>6/13/02</i>	<i>8/01/02</i>	<i>JTA</i>
	<i>MMR</i>	<i>11/01/02</i>	<i>P</i>	<i>RA</i>	<i>0025L</i>	<i>MRK</i>	<i>6/13/02</i>	<i>11/01/02</i>	<i>PWS</i>
Varicella (Var) Give SC.									
Pneumococcal, polysaccharide (PPV) Give SC or IM.	<i>PPV</i>	<i>10/01/02</i>	<i>P</i>	<i>LA</i>	<i>0443A</i>	<i>MRK</i>	<i>7/29/97</i>	<i>10/01/02</i>	<i>TAA</i>
Meningococcal (e.g., MCV4, conjugate; MPSV4, polysaccharide) Give MCV4 IM. Give MPSV4 SC.	<i>MCV4</i>	<i>10/9/06</i>	<i>P</i>	<i>RA</i>	<i>U1766AA</i>	<i>SPI</i>	<i>10/7/05</i>	<i>10/9/06</i>	<i>KKC</i>
Zoster (Zos) Give SC.									
Influenza (e.g., TIV, inactivated; LAIV, live, attenuated) Give TIV IM. Give LAIV IN.	<i>TIV</i>	<i>10/01/02</i>	<i>P</i>	<i>RA</i>	<i>U088211</i>	<i>AVP</i>	<i>6/26/02</i>	<i>10/01/02</i>	<i>PWS</i>
	<i>TIV</i>	<i>10/10/03</i>	<i>P</i>	<i>LA</i>	<i>U091145</i>	<i>AVP</i>	<i>5/6/03</i>	<i>10/10/03</i>	<i>DLW</i>
	<i>TIV</i>	<i>10/8/04</i>	<i>P</i>	<i>RA</i>	<i>U100461</i>	<i>AVP</i>	<i>5/24/04</i>	<i>10/08/04</i>	<i>TAA</i>
	<i>TIV</i>	<i>10/12/05</i>	<i>P</i>	<i>LA</i>	<i>U101059</i>	<i>SPI</i>	<i>7/18/05</i>	<i>10/12/05</i>	<i>JTA</i>
	<i>TIV</i>	<i>10/9/06</i>	<i>P</i>	<i>LA</i>	<i>71211</i>	<i>NOV</i>	<i>6/30/06</i>	<i>10/9/06</i>	<i>KKC</i>
(This is a record for a 25-year-old health care worker with diabetes who is planning to travel to Saudi Arabia for the annual Hajj.)									
How to record combination vaccines given to adults (i.e., HepA-HepB)									
Other									
Other									

1. Record the generic abbreviation for the type of vaccine given (e.g., PPV, HepA-HepB), *not* the trade name.
2. Record the source of the vaccine given as either F (Federally-supported), S (State-supported), or P (supported by Private insurance or other Private funds).

3. Record the site where vaccine was administered as either RA (Right Arm), LA (Left Arm), RT (Right Thigh), LT (Left Thigh), IN (Intranasal).
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