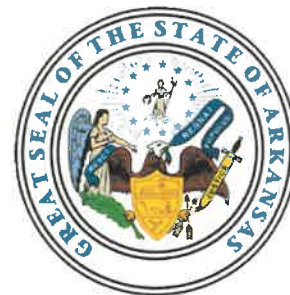


COVID-19 Vaccination Record



Please keep this record card, which includes medical information about the vaccines you have received.

Por favor, guarde esta tarjeta de registro, que incluye información médica sobre las vacunas que ha recibido.

GILL	JOEL	C
Last Name	First Name	Middle Name
01/19/1979	2422140	
Date of birth	Patient number (medical record or IIS record number)	

Vaccine	Product Name / Manufacturer Lot Number	Date	Administering Clinic
1st Dose COVID-19	COVID-19 (Pfizer) / Pfizer, Inc. (includes Wyeth, Lederle, and Praxis) EL3249	01/22/2021	THE PHARMACY AT WELLINGTON (PHAR WELL)
2nd Dose COVID-19	COVID-19 (Pfizer) / Pfizer, Inc. (includes Wyeth, Lederle, and Praxis) EM9809	02/12/2021	THE PHARMACY AT WELLINGTON (PHAR WELL)
Other	COVID-19 (Pfizer) / Unknown Manufacturer	02/21/2021	LITTLE ROCK FAM PRACTICE WEST- RP (LRFPCR)
Other		__ / __ / __	



**Arkansas
Immunization Record**
Official Document

Name: JOEL C GILL
Date of Birth: 01/19/1979
Gender: M
Arkansas WebIZ ID#: 2422140
Date of Next Vaccination: 11/18/2021

Present this document at each medical visit.

Immunization Provider:

THE PHARMACY AT WELLINGTON
 15400 CHENAL PKWY
 UNIT 100
 LITTLE ROCK, AR 72211
Phone: 501-708-4320

History/Allergies/Precautions/Contraindications

Vaccine	Date Given MM/DD/YYYY	Doctor or Clinic	Date Next Due MM/DD/YYYY	
Influenza (Five Most Recent)				
1	Influenza Quad Inj PF	12/21/2020	WAG # 11345	10/21/2021
2	Influenza Injectable Qi	10/24/2019	WAG # 11345	
3	Influenza Quad Inj PF	10/21/2018	WAG # 11345	
4	Influenza Quad Inj PF	10/10/2017	WAG # 11345	
5	Influenza Quad Inj PF	10/14/2015	ADH PERRY	
COVID-19 (Five Most Recent)				
1	COVID-19 (Pfizer)	02/21/2021	LRFPCR	
2	COVID-19 (Pfizer)	02/12/2021	PHAR WELL	
3	COVID-19 (Pfizer)	01/22/2021	PHAR WELL	
4				
5				
Travel				
1				
2				
3				
Other				
1				
2				
3				
Meningococcal B				
1				

* = Adverse reaction ! = Invalid Min Age/Interval ⊘ = Determined Invalid by Provider

Vaccine	Date Given MM/DD/YYYY	Doctor or Clinic	Date Next Due MM/DD/YYYY
DTaP / TD / Tdap			
1			10/21/2021
2			
3			
4			
5			
Polio			
1			
2			
3			
4			
Hib			
1			
2			
3			
4			
Pneumococcal			
1			01/19/2044
2			
3			
4			
Rotavirus			
1			
2			
3			
Hep A			
1			
2			
3			
Hep B			
1			
2			
3			
MMR			
1			10/21/2021
2			
Varicella (CPOX)			
1			10/21/2021
2			
Meningococcal			
1			
2			
HPV			
1			
2			
3			