Vaccine Administration Record for Adults

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). Always provide or update the patient's personal record card.

Patient name	
Birthdate	Chart number
PRACTICE NAME AND ADDRESS	

Vaccine	Type of	Date vaccine given			Vaccine		Vaccine Information Statement (VIS)		Vaccinator ⁵ (signature or
Vaccine	Vaccine ¹	(mo/day/yr)	(F,S,P) ²	Site ³	Lot #	Mfr.	Date on VIS⁴	Date given⁴	initials and title)
Tetanus, Diphtheria, Pertussis (e.g., Tdap, Td)									
Give IM. ³									
Hepatitis A (e.g., HepA, HepA-HepB ⁶) Give IM. ³									
Hepatitis B¹ (e.g., Engerix-B, Recombivax HB, Heplisav-B, HepA-HepB⁶) Give IM.³									
Human papillomavirus (HPV2*, HPV4*, HPV9) Give IM. ³									
Measles, Mumps, Rubella (MMR) Give Subcut. ³									
Varicella (chickenpox,VAR) Give Subcut. ³									
Meningococcal ACWY (e.g., MenACWY, MPSV4*) Give MenACWY IM. ³									
Meningococcal B (e.g., MenB) Give MenB IM. ³									

^{*}HPV2, HPV4, and MPSV4 vaccines are no longer available in the U.S., but should be included in patient records for historical purposes.

See page 2 to record influenza, pneumococcal, zoster, Hib, and other vaccines (e.g., travel vaccines).

How to Complete this Record

- 1. With the exception of hepatitis B vaccines, record the generic abbreviation (e.g., Tdap) or the trade name for each vaccine; for hepatitis B vaccines, record the trade name (see table at right).
- 2. Record the funding source of the vaccine given as either F (federal), S (state), or P (private).
- 3. Record the route by which the vaccine was given as either intramuscular (IM), subcutaneous (Subcut [SC]), intradermal (ID), intranasal (NAS), or oral (PO) and also the site where it was administered as either RA (right arm), LA (left arm), RT (right thigh), or LT (left thigh).
- 4. Record the publication date of each VIS as well as the date the VIS is given to the patient.
- 5. To meet the space constraints of this form and federal requirements for documentation, a healthcare setting may want to keep a reference list of vaccinators that includes their initials and titles.
- 6. For combination vaccines, fill in a row for each antigen in the combination.

Abbreviation	Trade Name and Manufacturer
Tdap	Adacel (Sanofi Pasteur); Boostrix (GlaxoSmithKline [GSK])
Td	Decavac, Tenivac (Sanofi Pasteur); generic Td (MA Biological Labs)
НерА	Havrix (GSK); Vaqta (Merck)
For hepatitis B, see footnote #1.	Engerix-B (GSK); Recombivax HB (Merck); Heplisav-B (Dynavax)
НерА-НерВ	Twinrix (GSK)
HPV2*	Cervarix (GSK)
HPV4*, HPV9	Gardasil, Gardasil 9 (Merck)
MMR	MMRII (Merck)
VAR	Varivax (Merck)
MenACWY	Menactra (Sanofi Pasteur); Menveo (GSK)
MPSV4*	Menomune (Sanofi Pasteur)
MenB	Bexsero (GSK); Trumenba (Pfizer)

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Technical content reviewed by the Centers for Disease Control and Prevention

Vaccine Administration Record for Adults (continued)

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). Always provide or update the patient's
personal record card.

Patient name	
Birthdate	Chart number
PRACTICE NAME AND ADDRESS	

Vaccine	Type of Vaccine ¹	Date vaccine given	Funding	Funding Route ³ Source and	Vaccine		Vaccine Information Statement (VIS)		Vaccinator ⁵ (signature or
Vaccine	Vaccine ¹	(mo/day/yr)	(F,S,P) ²	Site ³	Lot #	Mfr.	Date on VIS⁴	Date given⁴	initials and title)
Influenza									
(e.g., IIV3, IIV4, ccIIV4, RIV3, RIV4, LAIV4)									
Give IIV3, IIV4, ccIIV3, RIV3, and RIV4 IM. ³									
Give LAIV4 NAS. ³									
Pneumococcal conjugate (e.g., PCV13) Give PCV13 IM. ³									
Pneumococcal polysac-									
charide (e.g., PPSV23) Give PPSV23 IM or									
Subcut. ³									
Zoster (shingles) Give RZV IM ³									
Give ZVL Subcut ³									
Hib Give IM. ³									
Other									

➤ See page 1 to record Tdap/Td, hepatitis A, hepatitis B, HPV, MMR, varicella, MenACWY, and MenB vaccines.

How to Complete this Record

- 1. Record the generic abbreviation (e.g., Tdap) or the trade name for each vaccine (see table at right).
- 2. Record the funding source of the vaccine given as either F (federal), S (state), or P (private).
- Record the route by which the vaccine was given as either intramuscular (IM), subcutaneous (Subcut [SC]), intradermal (ID), intranasal (NAS), or oral (PO) and also the site where it was administered as either RA (right arm), LA (left arm), RT (right thigh), or LT (left thigh).
- 4. Record the publication date of each VIS as well as the date the VIS is given to the patient.
- 5. To meet the space constraints of this form and federal requirements for documentation, a healthcare setting may want to keep a reference list of vaccinators that includes their initials and titles.

Abbreviation	Trade Name and Manufacturer				
IIV3/IIV4 (inactivated influenza vaccine, trivalent or quadrivalent); ccIIV4 (cell culture-based inactivated influenza vaccine, quadrivalent); RIV3/RIV4 (inactivated recombinant influenza vaccine, trivalent or quadrivalent)	Fluarix, FluLaval (GSK); Afluria, Fluad, Flucelvax, Fluvirin (Seqirus); Flublok, Fluzone, Fluzone Intradermal, Fluzone High-Dose (Sanofi Pasteur)				
LAIV (live attenuated influenza vaccine, quadrivalent]	FluMist (MedImmune)				
PCV13	Prevnar 13 (Pfizer)				
PPSV23	Pneumovax 23 (Merck)				
RZV (recombinant zoster vaccine) ZVL (zoster vaccine, live)	Shingrix, RZV (GSK); Zostavax, ZVL (Merck)				
Hib	ActHIB (Sanofi Pasteur); Hiberix (GSK); PedvaxHib (Merck)				

Vaccine Administration Record for Adults

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). Always provide or update the patient's personal record card.

Patient name	Mike Schultz	
Birthdate	5/31/1967	Chart number 010406

Small Rural Clinic 135 County Road 42 Smallville, IN 46902

PRACTICE NAME AND ADDRESS

Vaccine	Type of	Date vaccine given	Funding Source		Vaccine	Vaccine		Vaccine Information Statement (VIS)	
	Vaccine ¹	(mo/day/yr)	(F,S,P) ²	Site ³	Lot #	Mfr.	Date on VIS ⁴	Date given ⁴	(signature or initials and title)
Tetanus,	Td	8/1/02	P	IM/LA	U0376AA	AVP	6/10/94	8/1/02	JTA
Diphtheria, Pertussis (e.g., Tdap, Td)	Td	9/1/02	P	IM/LA	U0376AA	AVP	6/10/94	9/1/02	RVO
Give IM. ³	Td	3/1/03	P	IM/LA	U0376AA	AVP	3/1/03	3/1/03	TAA
Give IM.	Tdap	3/1/15	P	IM/LA	AC52B009AA	G5K	2/24/15	3/1/15	JTA
Hepatitis A (e.g., HepA, HepA-HepB ⁶) Give IM. ³									
GIVE IIVI.									
Hepatitis B ¹	Heplisav-B	2/5/18	P	IM/LA	TDG007	DVX	7/20/16	2/5/18	TAA
(e.g., Engerix-B, Recombivax HB, Heplisav-B, HepA-HepB ⁶) Give IM. ³	Heplisav-B	3/12/18	P	IM/LA	TDG007	DVX	7/20/16	3/12/18	TAA
Human papillomavirus (HPV2*, HPV4*, HPV9) Give IM. ³									
Measles, Mumps, Rubella	MMR	8/1/02	P	SC/RA	0025L	MSD	6/13/02	8/1/02	JTA
(MMR) Give Subcut. ³	MMR	11/1/02	P	SC/RA	0025L	MSD	6/13/02	11/1/02	TAA
Varicella (chickenpox,VAR)	VAR	8/1/02	P	SC/LA	0799M	MSD	12/16/98	8/1/02	JTA
Give Subcut. ³	VAR	11/1/02	P	SC/LA	0799M	MSD	12/16/98	11/1/02	TAA
Meningococcal ACWY	MenACWY	7/12/11	P	IM/RA	M28011	NOV	3/2/08	7/12/11	RVO
(e.g., MenACWY, MPSV4*) Give MenACWY IM. ³	Menveo	7/15/16	P	IM/LA	M12115	NOV	3/31/16	7/15/16	RVO
Meningococcal B	MenB	1/14/16	P	IM/LA	J296203	PFR	8/14/15	1/14/16	RVO
(e.g., MenB) Give MenB IM. ³	Trumenba	9/15/16	P	IM/LA	J296203	PFR	8/14/15	9/15/16	RVO

^{*}HPV2, HPV4, and MPSV4 vaccines are no longer available in the U.S., but should be included in patient records for historical purposes.

See page 2 to record influenza, pneumococcal, zoster, Hib, and other vaccines (e.g., travel vaccines).

How to Complete this Record

- 1. With the exception of hepatitis B vaccines, record the generic abbreviation (e.g., Tdap) or the trade name for each vaccine; for hepatitis B vaccines, record the trade name (see table at right).
- 2. Record the funding source of the vaccine given as either F (federal), S (state), or P (private).
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For hepatitis B, see footnote #1.	Engerix-B (GSK); Recombivax HB (Merck); Heplisav-B (Dynavax)
НерА-НерВ	Twinrix (GSK)
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Technical content reviewed by the Centers for Disease Control and Prevention

Vaccine Administration Record for Adults (continued)

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). Always provide or update the patient's personal record card.

Patient nam	e Mike Schultz	
Birthdate	5/31/1967	Chart number_ 010406

PRACTICE NAME AND ADDRESS

Small Rural Clinic 135 County Road 42 Smallville, IN 46902

Vaccine	Type of	Date vaccine given	Funding Source	Route ³	Vaccine		Vaccine Information Statement (VIS)		Vaccinator ⁵
Vaccine	Vaccine ¹	(mo/day/yr)	(F,S,P) ²	Site ³	Lot #	Mfr.	Date on VIS⁴	Date given⁴	(signature or initials and title)
Influenza	Flulaval	10/2/09	P	IM/RA	2F600411	G5K	8/11/09	10/2/09	PW5
(e.g., IIV3, IIV4, ccIIV4, RIV3, RIV4, LAIV4)	H1N1	12/7/09	P	IM/RA	10092224P	NOV	10/2/09	12/7/09	DLW
,	Afluria	9/12/10	P	IM/RA	06949111A	NOV	8/10/10	9/12/10	TAA
Give IIV3, IIV4, ccIIV3, RIV3, and RIV4 IM. ³	Flulaval	10/1/11	P	IM/LA	2F750345	G5K	8/10/11	10/1/11	JTA
Give LAIV4 NAS. ³	IIV3	9/5/12	P	IM/RA	M50907	CSL	7/2/12	9/5/12	KKC
	RIV3	12/2/13	P	IM/RA	350603F	PSC	7/26/13	12/2/13	DCP
	IIV4	10/5/14	P	IM/RA	UI196AA	PMC	8/19/14	10/5/14	JTA
	IIV4	11/2/15	P	IM/LA	123773P	NOV	8/7/15	11/2/15	DCP
	11V 4	10/1/16	P	IM/LA	U1206AA	PMC	8/7/15	10/1/16	TAA
	ccIIV4	9/30/17	P	IM/LA	185128	SEQ	8/7/15	9/30/17	RVO
-									
Pneumococcal conjugate (e.g., PCV13) Give PCV13 IM. ³	PCV13	11/1/12	P	IM/RA	7-5096-06A	WYE	4/16/10	11/1/12	CJP
Pneumococcal polysac-	PPSV23	9/12/10	P	IM/RA	663012/1163X	MSD	10/6/09	9/12/10	TAA
charide (e.g., PPSV23) Give PPSV23 IM or	PPSV23	11/2/15	P	IM/RA	663012/1163X	MSD	10/6/09	11/2/15	DCP
Subcut. ³									
Zoster (shingles)	RZV	3/15/18	P	IM/RA	A1283	G5K	2/12/18	3/15/18	CJP
Give RZV IM ³ Give ZVL Subcut ³	Shingrix	5/17/18	P	IM/RA	A1283	G5K	2/12/18	5/17/18	CJP
Hib Give IM. ³	ActHIB	11/1/12	P	IM/RA	D05561	PMC	4/16/10	11/1/12	CJP
Other									

See page 1 to record Tdap/Td, hepatitis A, hepatitis B, HPV, MMR, varicella, MenACWY, and MenB vaccines.

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LAIV (live attenuated influenza vaccine, quadrivalent]	FluMist (MedImmune)
PCV13	Prevnar 13 (Pfizer)
PPSV23	Pneumovax 23 (Merck)
RZV (recombinant zoster vaccine) ZVL (zoster vaccine, live)	Shingrix, RZV (GSK); Zostavax, ZVL (Merck)
Hib	ActHIB (Sanofi Pasteur); Hiberix (GSK); PedvaxHib (Merck)