



Immunization Summary

Zoe G Carroll
MRN: 5002092340

Patient Information

Patient Name	Legal Sex	DOB
Carroll, Zoe G	Female	2/3/2011

📌 Immunizations Administered as of 6/23/2023

Name	Date
DTaP	2/10/2016 (5 y.o.)
DTaP, Unspecified	8/10/2012 (18 m.o.) , 8/12/2011 (6 m.o.) , 6/10/2011 (4 m.o.) , 4/8/2011 (2 m.o.)
Hepatitis A Pediatric	2/10/2016 (5 y.o.) , 8/10/2012 (18 m.o.) , 2/10/2012 (12 m.o.)
Hepatitis B	11/11/2011 (9 m.o.) , 3/8/2011 (4 wk.o.) , 2/4/2011 (1 days)
Hib (HbOC)	8/10/2012 (18 m.o.) , 8/12/2011 (6 m.o.) , 6/10/2011 (4 m.o.) , 4/8/2011 (2 m.o.)
INFLUENZA IIV4 6MO OR > FLUARIX/FLUZONE/AFLURIA 90686	10/8/2020 (9 y.o.) , 11/8/2016 (5 y.o.)
INFLUENZA QUAD 4YO OR >FLUCELVAX 90674	9/14/2022 (11 y.o.)
IPV	2/10/2016 (5 y.o.) , 8/12/2011 (6 m.o.) , 6/10/2011 (4 m.o.) , 4/8/2011 (2 m.o.)
Influenza IIV3 3YO OR >	10/25/2013 (2 y.o.) , 1/10/2013 (23 m.o.)
Influenza, Injectable, Quadrivalent, Preservative Free	10/12/2019 (8 y.o.) , 9/15/2018 (7 y.o.)
Influenza, Quadrivalent Nasal	10/15/2014 (3 y.o.)
Influenza, Quadrivalent Nasal (FluMist Quad)	10/20/2015 (4 y.o.)
Influenza, Seasonal, Injectable	10/2/2021 (10 y.o.)
Influenza, Unspecified	9/10/2022 (11 y.o.) , 10/1/2021 (10 y.o.)
MMR	5/18/2012 (15 m.o.)
MMRV (ProQuad)	2/10/2016 (5 y.o.)
Menquadfi Meningococcal Polysaccharide A, C, Y, W-135 TT Conjugate	6/23/2023 (12 y.o.)
Pfizer SARS-CoV-2 Vaccination Peds 5yrs-11yrs	9/14/2022 (11 y.o.) , 12/11/2021 (10 y.o.) , 11/20/2021 (10 y.o.)
Prevnar 13	5/18/2012 (15 m.o.) , 8/12/2011 (6 m.o.) , 6/10/2011 (4 m.o.) , 4/8/2011 (2 m.o.)

Name	Date
Rotavirus Pentavalent (RotaTeq)	8/12/2011 (6 m.o.) , 6/10/2011 (4 m.o.) , 4/8/2011 (2 m.o.)
Tdap	6/23/2023 (12 y.o.)
VARICELLA	2/10/2012 (12 m.o.)