

# Vaccine Administration Record for Children and Teens

Patient name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Chart number: \_\_\_\_\_

Before administering any vaccines, give the parent/guardian all appropriate copies of Vaccine Information Statements (VISs) and make sure they understand 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* (generic abbreviation)	Date given (mo/day/yr)	Route	Site given (RA, LA, RT, LT)	Vaccine		Vaccine Information Statement		Signature/ Initials of vaccinator
					lot #	mfr.	Date on VIS <sup>§</sup>	Date given <sup>§</sup>	
<b>Hepatitis B<sup>†</sup></b> (e.g., HepB, Hib-HepB, DTaP-HepB-IPV)			IM						
			IM						
			IM						
			IM						
<b>Diphtheria, Tetanus, Pertussis<sup>†</sup></b> (e.g., DTaP, DT, DTaP-Hib, DTaP-HepB-IPV, Td)			IM						
			IM						
			IM						
			IM						
			IM						
			IM						
			IM						
<b>Haemophilus influenzae type b<sup>†</sup></b> (e.g., Hib, Hib-HepB, DTaP-Hib)			IM						
			IM						
			IM						
			IM						
<b>Polio<sup>†</sup></b> (e.g., IPV, DTaP-HepB-IPV)			IM•SC						
			IM•SC						
			IM•SC						
			IM•SC						
<b>Pneumococcal conjugate (PCV)</b>			IM						
			IM						
			IM						
			IM						
<b>Measles, Mumps, Rubella (MMR)</b>			SC						
			SC						
<b>Varicella (Var)</b>			SC						
			SC						
<b>Hepatitis A<sup>**</sup></b> (HepA)			IM						
			IM						
<b>Influenza<sup>**</sup></b> (Flu)			IM						
			IM						
			IM						
			IM						
			IM						
<b>Other<sup>**</sup></b>									
<b>Other<sup>**</sup></b>									

\*Record the generic abbreviation for the type of vaccine given (e.g., DTaP-Hib, PCV), not the trade name.

†For combination vaccines, fill in the row for each individual antigen composing the combination.

§ Record the publication date of each VIS as well as the date it is given to the patient. According to federal law, VISs must be given to patients (or parent/

guardian of a minor child) before administering each dose of DTaP, Td, Hib, polio, MMR, varicella, PCV, or HepB vaccine, or combinations thereof.

\*\*Influenza, pneumococcal polysaccharide (PPV23), hepatitis A, and/or meningococcal vaccines are recommended for certain high-risk children.