

Verbundkatalog Kalliope

Immunization Register

Mann, Erika

1943-07-05

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IMMUNIZATION REGISTER¹

LAST NAME <i>Mann, Erika</i>		FIRST NAME		ARMY SERIAL NO.	
GRADE <i>War Correspondent</i>	COMPANY	REGT. OR STAFF CORPS	AGE	RACE	

SMALLPOX VACCINE

DATE <i>5 July 43</i> <i>4-30-45</i>	TYPE OF REACTION ⁶ <i>Vaccinated</i> <i>Trace</i>	MED. OFFICER ³ <i>E.K.</i> <i>J.H.W.</i>
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TRIPLE TYPHOID VACCINE

DATES OF ADMINISTRATION				MED. OFFICER ²
SERIES	1ST DOSE	2D DOSE	3D DOSE	
1st	<i>5 July 43</i>	<i>7/15/43</i>	<i>7/25/43</i>	<i>E.K.</i>
2d	<i>4-30-45</i>	<i>Still</i>	<i>P.A.</i>	<i>J.H.W.</i>
3d				

TETANUS TOXOID

INITIAL VACCINATION			STIMULATING DOSES		
	DATE	MED. OFF. ²		DATE	MED. OFF. ²
1st dose	<i>6 July 43</i>	<i>E.K.</i>		<i>Still May 3/44</i>	<i>J.H.W.</i>
2d dose	<i>16 July 43</i>	<i>H.W.</i>			
3d dose	<i>July 31-43</i>	<i>H.W.</i>			

YELLOW FEVER VACCINE

DATE	LOT NO.	AMOUNT	MED. OFF. ³
<i>July 19, 1943</i>			<i>R.R.</i>

OTHER VACCINES

DISEASE	DATE	TYPE OF VACCINE	DOSES	MED. OFF. ²
<i>Typhus</i>	<i>6 July 43</i>	<i>conv.</i>	<i>1cc</i>	<i>E.K.</i>
<i>"</i>	<i>7/15/43</i>	<i>5-3-45</i>	<i>J.H.W.</i>	
<i>Cholera</i>	<i>11/11/43</i>	<i>7/25/43</i>	<i>P.A.</i>	
<i>Typhus</i>	<i>July 31-43</i>	<i>H.W.</i>		

Typhus *Still May 3/44* *E.K.*
E.K. Jenner *5/31/46* *J.H.W.*
1st Lt. H.W. *M. C.,*
U. S. Army.

INSTRUCTIONS

1. A record will be kept on this form of all vaccinations given under the direction of medical officers to military and civilian personnel resident with military commands. See A. R. 40-215 for further details.

2. Appropriate entries will be made at the time prophylactic vaccinations are made *and the entries will be authenticated by the initials of the medical officer making the inoculation.*

3. In the case of a civilian employee, the character of his employment (clerk, teamster, etc.) and the staff corps or department in which he is employed will be noted in the space *Regiment or Staff Corps*. A brief notation of the status of other civilians will be made in the same spaces.

4. All officers and warrant officers furnished completed vaccination registers will preserve them and will exhibit them to examining medical officers at the annual physical examination. The medical examining officer will transcribe pertinent immunization data to the report of the annual physical examination.

5. The duplicate copy of the immunization register will be filed alphabetically in a Medical Department immunization file at the station or command to which the individual belongs.

6. Record as vaccina, vaccinoid, or immune reaction. If there is no reaction, or if the reaction fails to conform to any of the three recognized types, *vaccination will be repeated.* The use of the term "unsuccessful vaccination" on official records will not be used.

Form 81
MEDICAL DEPARTMENT, U. S. A.
(Revised January 23, 1941)