IMMUNIZATION RECORD:

|  |  |  |
| --- | --- | --- |
| Date | Type of Vaccine | Remarks |
|  | BCG |  |  |
|  |  |  |  |
|  | Polio | first | OPV ・　IPV |
|  |  | second | OPV ・　IPV |
|  |  | third | OPV ・　IPV |
|  |  | fourth | OPV ・　IPV |
|  |  |  |  |
|  | DTP primary | first |  |
|  |  | second |  |
|  |  | third |  |
|  | DTP secondary |  |  |
|  | DTP tertiary |  |  |
|  |  |  |  |
|  | Hib (1) |  |  |
|  | Hib (2) |  |  |
|  | Hib (3) |  |  |
|  | Hib (4) |  |  |
|  |  |  |  |
|  | Pneumococcal (1) |  |  |
|  | Pneumococcal (2) |  |  |
|  | Pneumococcal (3) |  |  |
|  | Pneumococcal (4) |  |  |
|  |  |  |  |
|  | MMR/MR | first |  |
|  |  | second |  |
|  |  | third |  |
|  |  | fourth |  |
|  |  |  |  |
|  | Mumps |  |  |
|  |  |  |  |
|  | Varicella |  |  |
|  |  |  |  |

Issued by:

Issued to: