CHOITHRAM COLLEGE OF NURSING Accredited by NAAC, Affiliated to INC, MPNRC Bhopal, MPMSU Jabalpur Choithram Hospital & Research Centre Manik Bagh Road, Indore 452014 (M.P.)

8.1.4: Average percentage of first year students, provided with prophylactic

# immunization against communicable diseases like Hepatitis-B during their clinical work in the last five years.

List of students, teachers and hospital staff, who received such immunization during the preceding academic year

S.No.	CONTENT	PAGE No.
1.	List of students received immunization	1-2
2.	List of Teachers received immunization	3-29

## INDEX



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Phone: 0731-2362491 to 99, Ext. No.: 407/578
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E-mail : cconursing@yahoo.co.in, choithramoffice@gmail.com Webiste : www.choithramnursing.com

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Novate

### LIST OF STUDENTS RECEIVED IMMUNIZATION

# CHOITHRAM COLLEGE OF NURSING

HEPATITIS-B VACCINATION RECORD

## BATCH 2022-2026

S. NO.	NAME	1 <sup>st</sup> DOSE	BATCH NO.	l and man			
1.	Aayushi Manshare	11/02/23	BAICH NO.	2 <sup>nd</sup> DOSE	BATCH NO.	3rd DOSE	BATCH NO
2.	Aksa Elizabeth Raju		220500122C	13/03/23	220500122C	02/12/23	2205001220
3.	Alenteena k Varkey	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
4.	Alpha Sagely Bihare	11/02/23	220500122C	13/03/23	220500122C	04/12/23	2205001220
5.	Anchal Kumari	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
6.	Antim Bala Carpenter	11/02/23	220500122C	13/03/23	220500122C	04/12/23	2205001220
7.	Aradhaya Bhawsar	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
8.	Arpita Milkyas	11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
9.	Arshi Khan	11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
10.	Arti Nagar	11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
11.	Ayushi Lakra	11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
12.	Babli Nishad	11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
13.	Bharti Nagar	11/02/23	220500122C	13/03/23	220500122C	04/12/23	220500122C
14.	Bhumika Mewada	11/02/23	220500122C	16/03/23	220500922B	02/12/23	220500122C
15.		11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
16.	Bushra Mansuri	11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
17.	Chandini Dhangar Chetna Birla	11/02/23	220500122C	13/03/23	220500922B	02/12/23	220500122C
17.		11/02/23	220500122C	13/03/23	220500922B	02/12/23	220500122C
18.	Chetna Chouhan	16/03/23	220500922B	15/04/23	220500922B	02/12/23	220500122C
20.	Chinal Mehta	11/02/23	220500122C	13/03/23	220500922B	LEFT	LEFT
	Christin Jiju	11/02/23	220500122C	13/03/23	220500922B	04/12/23	220500122C
21.	Debora Daniel	11/02/23	220500122C	13/03/23	220500922B	04/12/23	220500122C
22.	Gayatri Yadav	11/02/23	220500122C	13/03/23	220500922B	02/12/23	220500122C
23.	Girja Soliya	11/02/23	220500122C	16/03/23	220500922B	02/12/23	220500122C
24.	Graina Mary Devasia	11/02/23	220500122C	13/03/23	220500922B	02/12/23	220500122C 220500122C
25.	Isha Sharma	11/02/23	220500122C	13/03/23	220500922B	02/12/23	
26.	Jagrati Rathore	16/03/23	220500922B	15/04/23	220500922B	02/12/23	220500122C
	Kamini Chouhan	11/02/23	220500122C	13/03/23	220500922B		220500122C
	Karnika Patidar	11/02/23	220500122C	13/03/23	220500922B	02/12/23	220500122C
	Kashish Malviya	11/02/23	220500122C	13/03/23	220500922B	02/12/23	220500122C-
	Khyati Murumkar	11/02/23	220500122C	and the second se	220500922B	02/12/23	220500122C
31.	Kirti Birla	11/02/23	220500122C	13/03/23	220500922B 220500922B	02/12/23 02/12/23	220500122C 220500122C

1



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B++

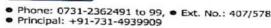
NAAC

2



32.	Kirti Patidar	11/02/23	22050092211	16/03/23	220500922B	020202	2205001220
33.	Kumkum Prnjapat	11/02/23	22050092213	13/03/23	2205009228	02/12/23	2205001220
34.	Manjusha Kujur	11/02/23	22050092218	13/03/23	22050092218	02/12/23	
35.	Merlin John	11/02/23	220500122C	13/03/23	220500922B	02/12/23	2205001220
36.	Muskan Katija	11/02/23	220500122C	13/03/23	2205009228	02/12/23	2205001220
37.	Naveen Pawar	11/02/23	220500122C	13/03/23	2205009228	02/12/23	2205001220
38.	Neha Patel	11/02/23	220500122C	13/03/23	2205009228	04/12/23	2205001220
39.	Neha Rathore	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
40.	Nikita Rathore	11/02/23	220500122C		220500122C	02/12/23	2205001220
41.	Nikita Sitole	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
42.	Pooja Dangi	11/02/23		16/03/23	220500922B	04/12/23	2205001220
43.	Priska M Samuel		220500122C	13/03/23	220500122C	02/12/23	2205001220
44.	Priya Barod	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
45.	Priya Rathore	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
46.	Priya Yadav	11/02/23	220500122C	13/03/23	220500922B	02/12/23	2205001220
47.	Priyanka Malviya	11/02/23	220500122C	13/03/23	220500922B	02/12/23	2205001220
48.	Priyanka Rani	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
49.	Purvi Rai	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
50.	Radhika Sahu	11/02/23	220500122C	13/03/23	220500122C	02/12/23	2205001220
51.		11/02/23	220500122C	13/03/23	220500122C	04/12/23	2205001220
52.	Rajan Varghese	11/02/23	220500122C	13/03/23	220500922B	04/12/23	2205001220
53.	Reetika Chowdhary	11/02/23	220500122C	13/03/23	220500922B	02/12/23	2205001220
	Richa Angel Joshy	11/02/23	220500922B	13/03/23	220500122C	02/12/23	2205001220
54.	Ritika Ninama						POSITIVE
55.	Saloni Dhakad	11/02/23	220500922B	13/03/23	220500122C	02/12/23	2205001220
56.	Shainy Saji	11/02/23	220500922B	13/03/23	220500122C	02/12/23	220500122C
57.	Shanu Solanki	11/02/23	220500922B	13/03/23	220500122C	02/12/23	220500122C
58.	Sheetal Rathore	11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
59.	Sheetal Verma	11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
60.	Shivani Rai	11/02/23	220500122C	13/03/23	220500122C	04/12/23	220500122C
61.	Shraddha Gour	11/02/23	220500122C	13/03/23	220500122C	02/12/23	220500122C
62.	Sinhasani Singh Chouhan	11/02/23	220500122C	16/03/23	220500922B	04/12/23	220500122C
63.	Siya Rajeesh	11/02/23	220500122C	13/03/23			
64.	Smita Dhangar	11/02/23	220500122C		220500922B	02/12/23	2205001220
65.	Sonam Pal	11/02/23	220500122C	13/03/23	220500922B	02/12/23	220500122C
66.	Soumya Kaushal	11/02/23	220500922B	13/03/23	220500922B	02/12/23	220500122C
67.	Sunila Buriya	11/02/23	220500922B	13/03/23	220500922B	04/12/23	220500122C
		11/02/23	220300922B	13/03/23	220500922B	02/12/23	220500122C

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### LIST OF TEACHERS RECEIVED IMMUNIZATION PRECEDING ACADEMIC YEAR



Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 15394549404

# **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उम्र Gender / लिंग

ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID)

Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

Mrs Shreeja Vijayan

40

Female

Passbook # 63047179235

20314854074001

Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

COVID-19 vaccine, non-replicating viral vector

Serum Institute of India Pvt. Ltd.

1/2	2/2	Precaution dose
12 Feb 2021	12 Mar 2021	15 Jan 2022
41202013	4120Z013	41212112
Abbiebek Mabie		

### Abhishek Malviya

Pradesh

+

CHOITHRAM HOSPITAL, Indore, Madhya LEGE



2

# "दवाई भी और कडाई भी।

Together, India will defeat COVID-19"

- प्रधानमंत्री नरेंद्र मोदी

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075 टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्वास्थ्य केंद्र/स्वास्थ्य कमीं/जिला टीकाकरण अधिकारी/राज्य हेल्प लाइन १०७५ पर सम्पर्क करें





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Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 48156250628

# **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम

Age / 3प्र

Gender / लिंग

ID Verified / पहचान पत्र सत्यापित

Unique Health ID (UHID)

Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

Dr Aradhana Michael

47

Female

Passbook # 53001565423

20314324224180

Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

Pradesh

+

-þ

COVID-19 vaccine, non-replicating viral vector

Serum Institute of India Pvt. Ltd.

1/2 2/2 13 Feb 2021 17 Mar 2021 4120Z013 4120Z013 Abhishek Malviya CHOITHRAM HOSPITAL, Indore, Madhya



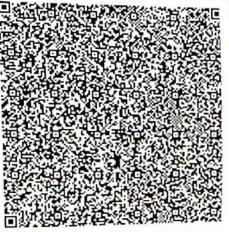
"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

4

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075

टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी/राज्य हेल्प लाइन १०७५ पर सम्पर्क करें





Precaution dose

17 Jan 2022

41212112

1212

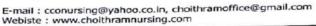
11111

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Ministry of Health & Family Welfare Government of India

### Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 56151405876

### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / 39 Gender / লিঁগ ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैवसीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

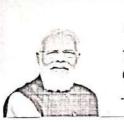
Mrs Shweta Pattnalk 38 Female Passbook # 63025243108

20314811080871

-

Fully Vaccinated (2 Doses) and a Precaution Dose

COVISHIELD COVID-19 vaccine, non-replicating viral vector Serum Institute of India Pvt. Ltd. Precaution dose 2/2 1/2 15 Jan 2022 12 Feb 2021 12 Mar 2021 4120Z013 4121Z112 4120Z013 Abhishek Malviya CHOITHRAM HOSPITAL, Indore, Madhya Pradesh



"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

nl-

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075

टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला दीकाकरण अधिकारी राज्य हेल्प लाइन 1075 पर सम्पर्क करें





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Ministry of Health & Family Welfare Government of India

### Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 77977788407

# **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम ARNOLD Age / 39 27 Gender / लिंग Male ID Verified / पहचान पत्र सत्यापित Aadhaar # XXXXXXXXCard Unique Health ID (UHID) 36-4327-6447-0830 **Beneficiary Reference ID** 20314206209144 Vaccination Status / टीकाकरण की स्थिति Fully Vaccinated (2 Doses) Vaccination Details Vaccine Name / वैक्सीन का नाम COVISHIELD Vaccine Type / टीका का प्रकार COVID-19 vaccine, non-replicating viral vector Manufacturer / उत्पादक Serum Institute of India Pvt. Ltd. Dose Number / खुराक की संख्या 1/2 2/2 Date of Dose / खुराक की तारीख 2021-03-06 2021-11-16 Batch Number / ब्रैच संख्या 4120Z013 4121MF013 Vaccinated By / टीका लगाने वाले का नाम Vaccinator Name Vaccination At / टीकाकरण का स्थान MOBILE ZONE 15, Indore, Madhya Pradesh Prevation dose :- 22 Jan 2022 - due to some nearon 2rd dose ecriptiate got late but and dose I goted on sontime "दवाई भी और Together, Ind COVID-19" - प्रधानमंत्री नरेंद्र मोदी In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075 टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी/राज्य हेल्प लाइन १०७५ पर सम्पर्क करें

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Winning Over COVID



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Ministry of Health & Family Welfare Government of India

## Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 18581352410

### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उम्र Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID)

Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान Mrs Nibha Soy

38 Female

Passbook # 53001578589

20314697279914 Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

COVID-19 vaccine, non-replicating viral vector

Serum Institute of India Pvt. Ltd.

1/2	2/2	Precaution dose
13 Feb 2021	17 Mar 2021	17 Jan 2022
41202013	4120Z013	41212112
Abhishek Malviva	3	

CHOITHRAM HOSPITAL, Indore, Madhya

Pradesh



9

"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19"

- प्रधानमंत्री नरेंद्र मोदी

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075

टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नजदीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी/राज्य हेल्प लाइन 1075 पर सम्पर्क करें





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Ministry of Health & Family Welfare Government of India

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Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 26099930254

#### **Beneficiary Details**

Beneficlary Name / लाभार्थी का नाम Age / उम्र Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Beneficlary Reference ID Vaccination Status / टीकाकरण की स्थिति <u>Vaccination Details</u>

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान **Rupal Ashish Martin** 

30

Female

Passport # V2670901

10-0778-2715-1362

20314126333562

Fully Vaccinated (2 Doses) and a Precaution Dose

### COVISHIELD

Abhishek Malviya

Pradesh

4

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COVID-19 vaccine, non-replicating viral vector

CHOITHRAM HOSPITAL, Indore, Madhya

 Serum Institute of India Pvt. Ltd.

 1/2
 2/2

 03 Feb 2021
 05 Mar 2021

 4120Z013
 4120Z013

Precaution dose 15 Jan 2022 41212112

HRAL

13



"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075

टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी/राज्य हेल्प लाइन 1075 पर सम्पर्क करें







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 Principal: +91-731-4939909





Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 83541399928

### **Beneficiary Details**

Beneficlary Name / लाभार्थी का नाम

Age / उम्र Gender / लिंग

ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID)

Beneficiary Reference ID Vaccination Status / रीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

# POOJA RATHORE

Female

Aadhaar # XXXXXX269N

27-5578-8065-3454

20314129695741 Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

COVID-19 vaccine, non-replicating viral vector

Serum Institute of India Pvt. Ltd.

1/2	2/2	Precaution dose
25 Jan 2021	22 Feb 2021	29 Jan 2022
41202013	4120Z013	41212112
Abblebalt Mathe	-	

### Abhishek Malviya

Pradesh

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CHOITHRAM HOSPITAL Jadore, Madhya

NOORF



"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075

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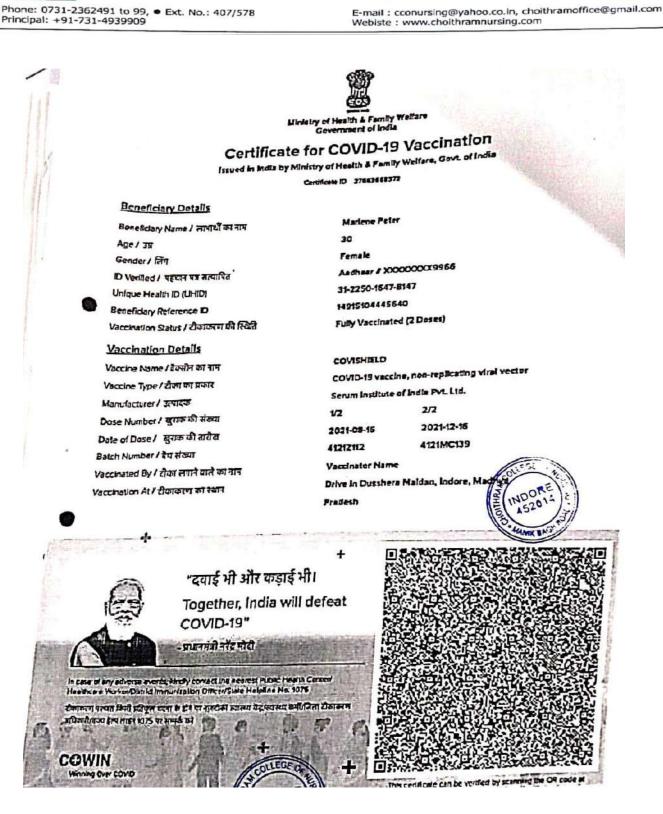


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Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 53550903580

#### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उग्र Gender / लिंग ID Verified / पहचान पत्र सत्यापित

🞧 Unique Health ID (UHID) Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैकसीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / वैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान Sanghamitra Paul

32 Female

Aadhaar # XXXXXXXX4873

20314637900330 Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

COVID-19 vaccine, non-replicating viral vector

 Serum Institute of India Pvt. Ltd.

 1/2
 2/2

 15 Mar 2021
 15 Apr 2021

 41202013
 4121Z046

Abhishek Malviya

Precaution dose 22 Jan 2022 41212112

CHOITHRAM HOSPITAL, Indore, Madhya

Pradesh

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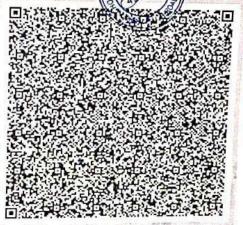
Winning Over COVID

"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

4

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रीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नजदीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी/राज्य हेन्य लाइन 1075 पर सामर्क करें



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E-mail : cconursing@yahoo.co.in, choithramoffice@gmail.com Webiste : www.choithramnursing.com



Ministry of Health & Family Welfare Government of India

## Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 39982358539

#### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उम्र Gender / लिंग ID Verified / पहचान पत्र सल्यापित Unique Health ID (UHID) Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने याले का नाम Vaccination At / टीकाकरण का स्थान

#### PRACHI AWASTHI

37

Female

Aadhaar # XXXXXXXX8752

40-6257-5428-8633

20314431610086

Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

COVID-19 vaccine, non-replicating viral vector

Serum Institute of India Pvt. Ltd.

1/2	2/2	
06 Mar 2021	05 Apr 2021	
41202013	41212034	

Abhishek Malviya

Precaution dose 15 Jan 2022 4121Z112

CHOITHRAM HOSPITAL, Indore, Madhya

Pradesh

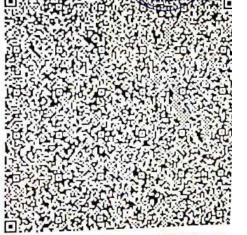


COWIN Winning Giver COVID "दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

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In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker District Immunication Officer/State Helpline No. 1075

रीजाकरण परवान विसी प्रतिकूल घटना के होने पर नजरीकी स्वास्थ्य केंद्रस्वास्थ्य कर्मों,जिला टीकाकरण अधिकडीजान्छ देन्य लाइन १०७५ पर समार्क कर्रे



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#### E-mail : cconursing@yahoo.co.in, choithramoffice@gmail.com Webiste : www.cholthramnursing.com

25



Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 21743426895

#### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उग्र Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID)

Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

Mrs Yasmin Sharma

35 Female Passbook # 63049576977

20314124222255 Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

41202013

Pradesh

+

COVID-19 vaccine, non-replicating viral vector Serum Institute of India Pvt. Ltd.

CHOITHRAM HOSPITAL, Indore, Madhya

2/2

12 Mar 2021

4120Z013

1/2 12 Feb 2021

Abhishek Malviya

Precaution dose 15 Jan 2022 4121Z112

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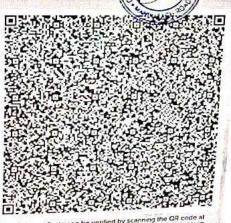
NDORE



"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075 टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्यास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी/राज्य हेल्प लाइन १०७५ पर सम्पर्क करें 👘

COWIN Winning Over COVID



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Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 73992926288

### Beneficiary Details

Beneficiary Name / साभावीं का नाम Age / उम्र Gender / जिम ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्शीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

Mrs Valshall	Tiwari
36	

Female

Passbook # 63000632883

#### 20314348348930

Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

+

COVID-19 vaccine, non-replicating viral vector

#### Serum Institute of India Pvt. Ltd.

1/2	2/2	Precaution dose
12 Feb 2021	12 Mar 2021	15 Jan 2022
41202013	41202013	41212112
Abhishek Malviya		LEGE OF A
CHOITHRAM HO	SPITAL, Indore, Madh	ya 3 RE
Pradesh		E (Perota );



# "दवाई भी और कड़ाई भी। Together, India will defeat COVID-19"

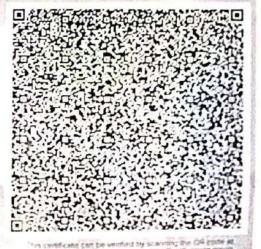
de

- प्रधानमंत्री नरेंद्र मोदी

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker District Immunization Officer/State Helpline No. 1075

ही काकरण परवार कि जी प्रतिकृत घटना के होने वन प्रतारित्री साम्प्रधा केंद्र प्रवास्था कमी जिला ही काकरण अधिकारी साम्य हेन्य रलहन १९७५ पर सम्पर्क कर्व





6



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Ministry of Health & Family Wolfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 20101821508

#### **Beneficiary Details**

Mrs Rakhl Chandel Beneficiary Name / लाभार्थी का नाम 39 Age / 39 Female Gender / लिंग Passbook # 63006158655 ID Verified / पहचान पत्र सत्यापित lique Health ID (UHID) 20314557676269 **Beneficiary Reference ID** Fully Vaccinated (2 Doses) and a Precaution Dose Vaccination Status / टीकाकरण की स्थिति Vaccination Details COVISHIELD Vaccine Name / वैक्सीन का नाम COVID-19 vaccine, non-replicating viral vector Vaccine Type / टीका का प्रकार Serum Institute of India Pvt. Ltd. Manufacturer / उत्पादक Precaution dose 2/2 1/2 Dose Number / खुराक की संख्या 15 Jan 2022 12 Mar 2021 12 Feb 2021 Date of Dose / खुराक की तारीख 4121Z112

Pradesh

4120Z013 4120Z013 Abhishek Malviya

CHOITHRAM HOSPITAL, Indore, Madhya



Batch Number / बैच संख्या

Vaccinated By / टीका लगाने वाले का नाम

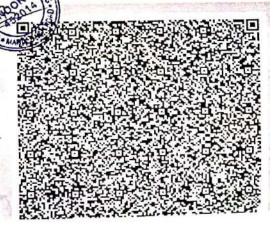
iccination At / टीकाकरण का स्थान

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- प्रधानमंत्री नरेंद्र मोदी

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टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी/राज्य हेल्प लाइन १०७५ पर सम्पर्क करें

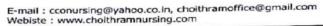






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Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 20982266538

### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उम्र

Gender / लिंग

ID Verified / पहचान पत्र सत्यापित

Unique Health ID (UHID)

3eneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

### Vaccination Details

Vaccine Name / देक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / देव संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान Mr. Abhilash Kolare 28 Male Voter ID # NIL

20314480800325

Fully Vaccinated (2 Doses)

COVISHIELD COVID-19 vaccine, non-replicating viral vector Serum Institute of India 1/2 2/2 2021-02-03 2021-09-22 4120Z013 4121Z209 pari

VW- COVISHIELD, Indore, Madhya Pradesi





"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

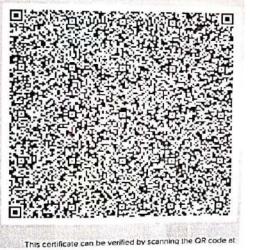
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In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075

दीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नजदीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला दीकाकरण अधिकारी/राज्य हेल्प लाइन 1075 पर सम्पर्क करें





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E-mail : cconursing@yahoo.co.ln, choithramoffice@gmail.com Webiste : www.choithramnursing.com



Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 10887294919

#### **Beneficiary** Details

Beneficiary Name / लाभार्थी का नाम Age / उम्र

Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID)

Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान MS. PRIYA PANDIT

29 Female Passbook # 20089931936

20314654988519 Fully Vaccinated (2 Doses) and a Precaution Dose

COVISHIELD

4120Z013

Pradesh

Abhishek Malviya

COVID-19 vaccine, non-replicating viral vector

4120Z013

Serum Institute of India Pvt. Ltd.

CHOITHRAM HOSPITAL, Indore, Madhya

1/2 2/2 03 Feb 2021 06 Mar 2021

15 Jan 2022

Precaution dose

4121Z112





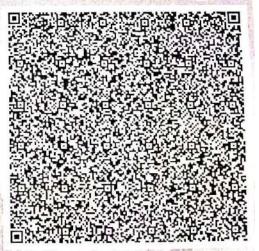
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- प्रधानमंत्री नरेंद्र मोदी

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टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नजदीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी/राज्य हेल्प लाइन 1075 पर सम्पर्क करें





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 Principal: +91-731-4939909

Age / 3N

E-mail : cconursing@yahoo.co.in, choithramoffice@gmail.com Webiste : www.cholthramnursing.com

- 2



Ministry of Health & Family Welfare Government of India

### Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 40231799096

#### **Beneficiary Details** Beneficiary Name / लाभार्थी का नाम Miss. Dally Sawner 29 Gender / लिंग Female ID Verified / पहचान पत्र सत्यापित Voter ID # NIL Unique Health ID (UHID) Beneficiary Reference ID 20314983087636 Vaccination Status / टीकाकरण की स्थिति Fully Vaccinated (2 Doses) and a Precaution Dose Vaccination Details Vaccine Name / वैक्सीन का नाम COVISHIELD Vaccine Type / टीका का प्रकार COVID-19 vaccine, non-replicating viral vector Manufacturer / उत्पादक Serum Institute of India Pvt. Ltd. Dose Number / खुराक की संख्या 1/2 2/2 Precaution dose 30 Jan 2021 Date of Dose / खुराक की तारीख 04 Mar 2021 15 Jan 2022 Batch Number / बैच संख्या 41202013 4120Z013 4121Z112 Vaccinated By / टीका लगाने वाले का नाम Abhlshek Malviya CHOITHRAM HOSPITAL, Indore, Madh Vaccination At / टीकाकरण का स्थान Pradesh

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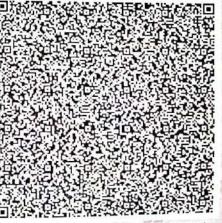


"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075

टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्वास्थ्य केंद्र/स्वास्थ्य कर्मी/जिला टीकाकरण अधिकारी राज्य हेल्प लाइन 1075 पर सम्पर्क करें

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Ministry of Health & Family Welfare Government of India

# Final Certificate for COVID-19 Vaccination

#### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उम्र Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Beneficiary Reference ID

### Vaccination Details

Vaccine Name / वैक्सीन का नाम Date of Dose / खुराक की तारीख Vaccinated by / टीका लगाने वाले का नाम Vaccination at / टीकाकरण का स्थान Christy K Ninan 33 Female Aadhaar # XXXXXXXX4722 53-2230-0666-6881

91694629376580

COVAXIN

14 Jul 2021 (Batch no. 37121014A)

JAYA

DRIVE IN BETMA 1, Indore, Madagese OF

Pradesh



"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19"

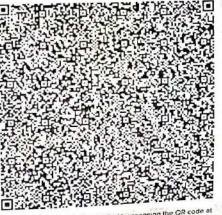
2.

- प्रधानमंत्री नरेंद्र मोदी

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अधिकारी/राज्य हेल्प लाइन 1075 पर सम्पर्क करे COWIN

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Ministry of Health & Family Welfare Government of India

### Certificate for COVID-19 Vaccination

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Certificate ID 75907053903

+

### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उम्र Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Beneficiary Reference ID

Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

Jyoti Chauhan
29
Female
Aadhaar # XXXXXXX9607
42-1238-2222-0042
20314226550369
Fully Vaccinated (2 Doses) and a Precaution Dose

COVISHIELD COVID-19 vaccine, non-replicating viral vector Serum Institute of India Pvt. Ltd. 1/2 2/2 Precaution dose 29 Jan 2021 26 Feb 2021 13 Jan 2022 4120Z013 4120Z013 4121Z112 Abhishek Malviya CHOITHRAM HOSPITAL, Indore, Madhya Pradesh

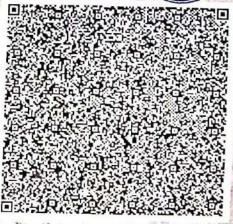


Winning Over COVID

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Ministry of Health & Family Welfare Government of India

## Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 87722084611

### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उन्न Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

### DIVYANI 24 Female Aadhaar # XXXXX5836 15-7662-1647-6035 20314510558781 Fully VaccInated (2 Doses) and a Precaution Dose

#### COVISHIELD

+

COVID-19 vaccine, non-replicating viral vector

Serum Institute of India Pvt. Ltd.

1/2	2/2	Precaution dose
29 Jan 2021	26 Feb 2021	13 Jan 2022
41202013	41202013	41212112
Abhishek Malviya		
CHOITHRAM HO	SPITAL, Indore, Madh	VA 3COLLE . E
Pradesh		EINDORE



"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

J.

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Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 52327567273

### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उन्न Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

#### MsSheetal Saxena

46 Female

Passbook # 63031361009

20314747796044 Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

COVID-19 vaccine, non-replicating viral vector

Serum Institute of India Pvt. Ltd.

1/2	2/2	Precaution dose
12 Feb 2021	12 Mar 2021	17 Jan 2022
41202013	41202013	41212112
Abhishek Malviya	6	
CHOITHRAM HO	SCOLLEGE .	

Pradesh





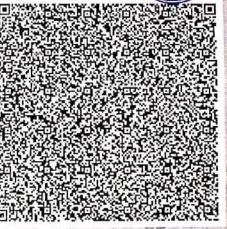
"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

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Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 59164842526

### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / 39 Gender / लिंग ID Verified / पहचान पत्र सत्यापित

Unique Health ID (UHID) **Beneficiary Reference ID** Vaccination Status / टीकाकरण की स्थिति

### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

#### Monika Chandore

29

Female

Aadhaar # XXXXXXXX2677

48-1408-2208-1566

63997464357470

Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

COVID-19 vaccine, non-replicating viral vector

4121Z112

Serum Institute of India Pvt. Ltd.

1/2 2/2 19 Jun 2021 14 Oct 2021 41212086

Precaution dose 27 May 2022 4121MC169

INDOR 1520

### Abhishek Malviya

Pradesh

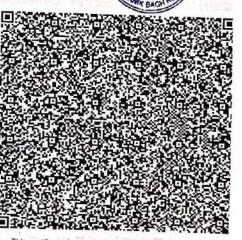
CHOITHRAM HOSPITAL, Indore, Madh



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Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 47611878627

### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / उम्र Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Hemlata Birla 31

20344366631980

Female

Aadhaar # XXXXXXXX7764

Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान Fully Vaccinated (2 Doses) and a Precaution Dose

Abhishek Malviya

CHOITHRAM HOSPITAL, Indore, Madhya Pradesh

Dose Number खुराक की संख्या	Date of Dose खुराक की तारीख	Vaccine Name वैक्सीन का नाम	Batch Number वैच संख्या	Vaccine Type टीका का प्रकार	Manufacturer उत्पादक
1/2	05 Jun 2021	COVISHIELD	41212089	COVID-19 vaccine, non-replicating viral vector	Serum institute of India Pvt. Ltd.
2/2	05 Sep 2021	COVISHIELD	4121MC069	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India Pvt. Ltd.
Precaution dose	03 Jun 2022	COVISHIELD	4121MC169	COVID-19 vaccine, non-replicating viral vector	Serum Institute of India Pvt. Ltd.

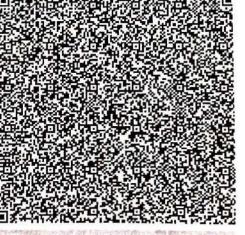
# "दवाई भी और कड़ाई भी। Together, India will defeat COVID-19"



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- प्रधानमंत्री



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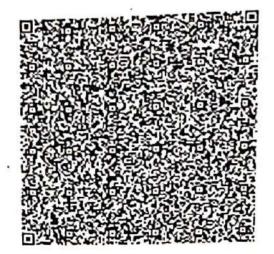
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Ministry of Health & Family Welfare Government of India

Final Certificate

for COVID-19 Vaccination



### Beneficiary Details

Beneficiary Name / माभावी का तर Ancy varkey

Age / JR 37

Gender / किंग Female

Beneficiary Reference ID 20314613295440

Residing at / पता Indore Madhya Pradesh Vaccination Details

Vaccine Name / वैक्सीन का नाम COVISHIELD

Date of Dose / जुलह की लगीव 12 Mar 2021 (Betch no 41202013)

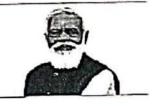
Vaccinated by / टीका लखने वाले का नाम Narmada Patel

Vaccination at / टेकाकाल का स्थान CHOITHRAM HOSPITAL 01, Indore Madhya Pradesh

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- Prime Minister Narendra Modi

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रीजन्द्रत्त प्रभाव क्रिकी इतिहुल परंश के होने सा पठटेंकी झाम्मय केंद्राय रूप करीं,जिना ।





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# Certificate for COVID-19 Vaccination

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Certificate ID 54929770205

### **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम

Age / 31

Gender / लिंग

ID Verified / पहचान पत्र सत्यापित

Unique Health ID (UHID)

Beneficiary Reference ID

Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

### MR. ANMOL JOSEPH

29

Male

Passbook # 20222109858

20314446980033

Fully Vaccinated (2 Doses) and a Precaution Dose

COVISHIELD COVID-19 vaccine, non-replicating viral vector Serum Institute of India Pvt. Ltd. Precaution dose 212 1/2 05 Feb 2022 04 Mar 2021 03 Feb 2021 4121AA040M 41207013 4120Z013

ANUSAIYA RATHORE MOG LINE UPHC, Indore, Madhya Pradesh





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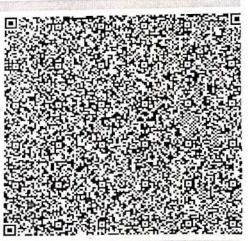
-la

- प्रधानमंत्री नरेंद्र मोदी

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### Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 15410322930

# **Beneficiary Details**

Beneficiary Name / लाभार्थी का नाम Age / 39 Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति Vaccination Details Vaccine Name / वैक्सीन का नाम Vaccine Type / टीका का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या

Vaccinated By / टीका लगाने वाले का नाम

Vaccination At / टीकाकरण का स्थान

#### MS.TWINKLE DANIEL

26 Female

Passbook # 38597797831

### 20314590535841

Fully Vaccinated (2 Doses) and a Precaution Dose

#### COVISHIELD

COVID-19 vaccine, non-replicating viral vector

2/2

CHOITHRAM HOSPITAL, Indore, Madhya

06 Mar 2021

4120Z013

Serum Institute of India Pvt. Ltd.

1/2

03 Feb 2021

Abhishek Malviya

41202013

Pradesh

Precaution dose 25 Feb 2022

4121Z112

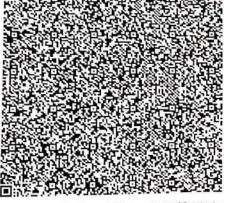
INDORE "दवाई भी और कड़ाई में 452014 Together, India will COVID-19"

- प्रधानमंत्री नरेंद्र मोदी

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker/District Immunization Officer/State Helpline No. 1075

टीकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नजदीकी स्वास्थ्य केंद्र स्वास्थ्य कर्मों,जिला टीकाकरण अधिकारी राज्य हेल्प लाइन 1075 पर सम्पर्क करें





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Phone: 0731-2362491 to 99, Ext. No.: 407/578
 Principal: +91-731-4939909

E-mail : cconursing@yahoo.co.in, choithramoffice@gmail.com Webiste : www.choithramnursing.com



Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 66451098292

### **Beneficiary Details**

Beneficiary Name / लाभार्यी का नाम Age / उम्र Gender / लिंग ID Verified / पहचान पत्र सत्यापित Unique Health ID (UHID) Beneficiary Reference ID Vaccination Status / टीकाकरण की स्थिति

#### Vaccination Details

Vaccine Name / वैक्सीन का नाम Vaccine Type / टीकों का प्रकार Manufacturer / उत्पादक Dose Number / खुराक की संख्या Date of Dose / खुराक की तारीख Batch Number / बैच संख्या Vaccinated By / टीका लगाने वाले का नाम Vaccination At / टीकाकरण का स्थान

### Ankit Jacob Isaac Nand 35 Male

Aadhaar # XXXXXXXX3799

20314145460476 Fully Vaccinated (2 Doses)

COVISHIELD COVID-19 vaccine, non-replicating viral vector Serum Institute of India Pvt. Ltd. 1/2 2/2 10 Feb 2021 13 Jan 2022 41212112 41212112 Abhishek Malviya CHOITHRAM HOSPITAL, Indore, Jack Value of Course of Course



5

"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19"

1

- प्रधानमंत्री नरेंद्र मौदी

In case of any adverse events, kindly contact the nearest Public Health Center/ Healthcare Worker, District Immunization Officer/State Helpline No. 1075

दोकाकरण पश्चात किसी प्रतिकूल घटना के होने पर नज़दीकी स्यास्थ्य केंद्रस्यास्थ्य कर्मी/जिला रौकाकरण अधिकारी राज्य हेल्य लाइन 1075 पर सम्पर्क करें





+

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Ministry of Health & Family Welfare Government of India

# Certificate for COVID-19 Vaccination

Issued in India by Ministry of Health & Family Welfare, Govt. of India

Certificate ID 37000446956

# Beneficiary Details

 Beneficiary Name / लाभार्थी का नाम

 Age / उम्र

 Gender / लिंग

 ID Verified / पहचान पत्र सत्यापित

 Unique Health ID (UHID)

 Peneficiary Reference ID

 Vaccination Status / टीकाकरण की स्थिति

 Vaccination Details

 Vaccine Name / वैक्सीन का नाम

 Vaccine Type / टीका का प्रकार

 Manufacturer / उत्पादक

 Dose Number / खुराक की संख्या

 Date of Dose / खुराक की तारीख

 Batch Number / बैच संख्या

 Vaccinated By / टीका लगाने वाले का नाम

Vaccination At / टीकाकरण का स्थान

MS.SUNIMOL AJITKUMAR

46

Female

Passbook # 53001589115

20314887810330

Fully Vaccinated (2 Doses) and a Precaution Dose

COVISHIELD

COVID-19 vaccine, non-replicating viral vector

Serum Institute o	of India Pvt. Ltd.
1/2	2/2
19 Feb 2021	19 Mar 2021
41202013	41217016

Precaution dose 01 Feb 2022 41212112

## Abhishek Malviya

CHOITHRAM HOSPITAL, Indore, Madhya



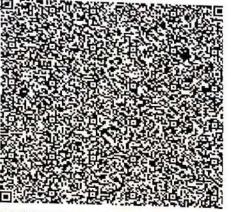


"दवाई भी और कड़ाई भी। Together, India will defeat COVID-19" - प्रधानमंत्री नरेंद्र मोदी

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COWIN Winning Over COVID



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