附表1

进贤县2023年免疫规划疫苗查漏补种摸底与接种登记表

**县（市、区） 乡（镇、街道） 村（居委会）　 摸底登记人员： 登记时间： 年 月 日**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **编号** | **儿童**  **姓名** | **性别** | **出生日期** | **现住址** | **联系**  **电话** | **户籍地** | | **乙肝疫苗** | **脊灰疫苗** | **百白破疫苗** | **白破疫苗** | **麻腮风疫苗** | **A群流脑** | **A+C群** | **乙脑疫苗** | **甲肝疫苗** | **是否补种** | **补证** | |
| **本地** | **流动** | **需补证** | **已补证** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

填表说明：在摸底儿童相对应的漏种疫苗下面打“√”，不需填各疫苗具体的接种时间；实际完成补种后，在“是否补种”打“√”。

附表2

进贤县2023年免疫规划疫苗查漏补种接种情况统计表（常住儿童）

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **儿童出生年份** | **摸底儿童数** | **应补证数** | **实补证数** | **乙肝疫苗** | | **脊灰疫苗** | | **百白破疫苗** | | **白破疫苗** | | **麻腮风疫苗** | | **A群流脑** | | **A+C群流脑** | | **乙脑疫苗** | | **甲肝疫苗** | |
| **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | |
| **2022年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2021年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2020年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2019年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2018年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2017年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2016年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2007-2015** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **合计** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |

**县（市、区） 乡（镇、街道） 制表人员： 制表时间： 年 月 日**

附表3

进贤县2023年免疫规划疫苗查漏补种接种情况统计表（流动儿童）

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **儿童出生年份** | **摸底儿童数** | **应补证数** | **实补证数** | **乙肝疫苗** | | **脊灰疫苗** | | **百白破疫苗** | | **白破疫苗** | | **麻腮风疫苗** | | **A群流脑** | | **A+C群** | | **乙脑疫苗** | | **甲肝疫苗** | |
| **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | **应补种剂次** | **补种剂次数** | |
| **2022年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2021年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2020年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2019年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2018年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2017年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2016年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **2007-2015年** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |
| **合计** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |

**县（市、区） 乡（镇、街道） 制表人员： 制表时间： 年 月 日**

附表4-1

进贤县2023年免疫规划疫苗查漏补种接种率快速评估调查表（满1岁儿童）

**县（市、区） 乡（街道） 村 调查时间：** 年 月 日　 **调查人员：**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **编号** | **姓名** | **出生日期** | **BCG** | **HepB** | | | | **PV** | | | **DaPT** | | | **MCV** | | **MenA** | **JE** | **接种信息是否完整** |
| **1** | **及时** | **2** | **3** | **1** | **2** | **3** | **1** | **2** | **3** | **1** | **及时** | **1** | **1** |
| **1** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **13** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **14** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

附表4-2

进贤县2023年免疫规划疫苗查漏补种接种率快速评估调查表（满3岁儿童）

**县（市、区） 乡（街道） 村 学校 调查时间：** 年 月 日　 **调查人员：**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **编号** | **姓名** | **出生日期** | **BCG** | **HepB** | | | **PV** | | | **DaPT** | | | | **MCV** | | **MenA** | | **JE** | | **HepA** |
| **1** | **2** | **3** | **1** | **2** | **3** | **1** | **2** | **3** | **4** | **1** | **2** | **1** | **2** | **1** | **2** |
| **1** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **13** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **14** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **15** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

附表4-3

进贤县2023年免疫规划疫苗查漏补种接种率快速评估调查表（满6岁儿童）

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **编号** | **姓名** | **出生日期** | **BCG** | **HepB** | | | **PV** | | | | **DaPT** | | | | **MCV** | | **MenA** | | **MenAC** | | **JE** | | **HepA** | **DT** |
| **1** | **2** | **3** | **1** | **2** | **3** | **4** | **1** | **2** | **3** | **4** | **1** | **2** | **1** | **2** | **1** | **2** | **1** | **2** |
| **1** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **13** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **14** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **15** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**县（市、区） 乡（街道） 村 学校 调查时间：** 年 月 日　 **调查人员：**

附表4-4

进贤县2023年免疫规划疫苗查漏补种接种率快速评估调查表（流动儿童）

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **编号** | **姓名** | **出生日期** | **BCG** | **HepB** | | | **PV** | | | | **DaPT** | | | | **MCV** | | **MenA** | | **MenAC** | | **JE** | | **HepA** | **DT** |
| **1** | **2** | **3** | **1** | **2** | **3** | **4** | **1** | **2** | **3** | **4** | **1** | **2** | **1** | **2** | **1** | **2** | **1** | **2** |
| **1** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **13** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **14** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **15** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**县（市、区） 乡（街道） 村 调查时间：** 年 月 日　 **调查人员：**