

Spikevax (previously COVID-19 Vaccine Moderna)

Vaccination Appointment Reminder

Vaccine name _____

Date of First Dose

Lot number _____

Enter the lot number shown on the vial label

Planned Date of Second Dose

Planned Date of Third Dose (if applicable)

Lot number _____

Enter the lot number shown on the vial label

Date of Second Dose

Date of Third Dose (if applicable)

Planned Date of Booster Dose

Lot number _____

Enter the lot number shown on the vial label

Date of Booster Dose

**Use this card as a reminder for future doses of the vaccine.
Retain this card for your records even after the second dose.**

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Scan the code with a mobile device to obtain the package leaflet in different languages.

Or visit the URL

<https://www.ModernaCovid19Global.com>

If you experience side effects, talk to your doctor, pharmacist or nurse. You can also call **1800 800 354 to speak with a Moderna representative.**

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