

You have received



During the initial pandemic stage,
Vaxzevria™ may also be distributed
with the packaging named
COVID-19 Vaccine AstraZeneca

Please bring this card to your
next appointment and keep it
safe for future reference.

For more information on
the AstraZeneca vaccine,
visit www.azcovid-19.com
or scan this code



AstraZeneca 

Please fill in the information below:

Vaccine recipient:

1st dose date: ___ / ___ / ___

Batch no:

Second appointment date: ___ / ___ / ___

2nd dose date: ___ / ___ / ___

Batch no:

If you have any concerns about side effects **talk to your doctor or healthcare professionals** or contact **AstraZeneca** on **+356 22778134**

Please report adverse events to www.medicinesauthority.gov.mt/adrportal