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Onset Date: 0000-00-00   Days since Vaccination: 

Symptoms: EDEMA INJECT SITE HYSN INJECT SITE VASODILAT

pt vax hepta B. arm became swollen, red and hot. md said allergic reaction to thimerosal in hepta B.

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Onset Date: 1991-05-21   Days since Vaccination: 0

Symptoms: HYSN INJECT SITE PRURITUS URTICARIA

Pt recvd 1s Engerix-B vax on 21MAY91 & 45 min post inject exp itching & hives from site of inject to upper middle back; treated in ER w/DPH; MD suggested allergic to Thimerosal;
### VAERS ID 39826

**Vaccination Date:** 1990-11-30  
**Age:** 31.9  
**Sex:** F  
**State:** OH  

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**Onset Date:** 1990-11-30  
**Days since Vaccination:** 0  
**Symptoms:** PRURITUS RASH RASH MAC PAP  
Pt recvd 2nd dose of vax & 1 hr later devel pruritic rash; On 5DEC90 pt exp itching of rt breast, abdomen & back; Seen by MD given meds; Dermatitis was resolving w/hyperpigmented macules; 17DEC90 pt tested pos on patch test for thimerosal;  
**Life Threatening Illness?** No  
**Died?** No  
**Disability?** No  
**Recovered?** Yes  
**ER or Doctor Visit?** Yes  
**Hospitalized?** No  
**Current Illness:**  
**Previous Vaccinations:** pt exp fever p/1st dose of vax;  
**Other Medications:**  
**Preexisting Conditions:** hx eczema, hay fever; allergy thimerosal

### VAERS ID 44977

**Vaccination Date:** 0000-00-00  
**Age:**  
**Sex:** F  
**State:** MN  

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**Onset Date:** 0000-00-00  
**Days since Vaccination:**  
**Symptoms:** ALLERG REACT RASH RASH MAC PAP  
Pt recvd 2 doses of Engerix-B & devel a rash; MD described as macropapular rash; pt was seen 1 mo p/rash de vel; MD thinks pt may be allergic to Thimerosal;  
**Life Threatening Illness?** No  
**Died?** No  
**Disability?** No  
**Recovered?** Yes  
**ER or Doctor Visit?** Yes  
**Hospitalized?** No  
**Current Illness:** UNK  
**Previous Vaccinations:**  
**Other Medications:** UNK  
**Preexisting Conditions:**
VAERS ID 50934  Vaccination Date: 1991-09-11
Age 41.4  Date filed: 1993-03-23
Sex F  Where Administered: PVT
State NJ  Purchased by: PVT

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Onset Date: 1991-12-13  Days since Vaccination: 93
Symptoms: HYSN INJECT SITE NO DRUG EFFECT PAIN INJECT SITE VASODILAT
Pt recvd 3 doses of Hep B vax on 11MAR91, 10JUL91, 11SEP91 & exp sensitivity to thimerosal manifested by a localized reaction of redness, heat & soreness @ the inject site; lab eval revealed a neg anti-HBs titer on 13DEC91;

VAERS ID 51195  Vaccination Date: 1992-05-28
Age 41.4  Date filed: 1993-03-31
Sex F  Where Administered: OTH
State NY  Purchased by: OTH

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Onset Date: 1992-05-29  Days since Vaccination: 1
Symptoms: ABSCESS INJECT SITE ALLERG REACT EDEMA INJECT SITE EDEMA PERIPH
Pt recvd 2 doses of Hep B vax on 30APR92 & 28MAY92 & on 29MAY92 pt devel lemon size swelling w/discharge @ the inject site; Tx w/meds; pt exp residual probs of swollen fingers & hands; pt may have an allergy to thimerosal;
VAERS ID 52195 Vaccination Date: 1992-08-14
Age 43.1 Date filed: 1993-04-30
Sex F Where Administered: PUB
State IL Purchased by: OTH

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Onset Date: 1992-08-28  Days since Vaccination: 14
Symptoms: ALLERG REACT PRURITUS URTICARIA
Pt recvd vax on 14AUG92 & approx 28AUG92 devel generalized hives & itching that would come & go; allergy testing revealed that was sensitive to thimerosal; approx 8SPE92 seen by MD;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness:
Diagnostic Lab Data: AUG92 Rast test pos, Thimerosal;
Previous Vaccinations:
Other Medications: NONE
Preexisting Conditions:
cancer; Hysterectomy;
allergy, THimerosal;
allergy, Medrol; Tubulin test pos;
Onset Date: 0000-00-00  Days since Vaccination:
Symptoms: ALLERG REACT ASTHMA URTICARIA
pt recvd vax & exp urticaria & wheezing; pt treated in ER: referred to allergist; skin tested pos to thimerosal ingredient of vax;
VAERS ID 60243 Vaccination Date: 1993-04-26
Age 33.0 Date filed: 1994-03-07
Sex F Where Administered: PUB
State AR Purchased by: PUB

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Onset Date: 1993-04-26 Days since Vaccination: 0
Symptoms: ALLERG REACT ECCHYMOSIS FLU SYND HEADACHE HERPES SIMPLEX
ecchymosis, flu synd, herpes simples, h/a; possibly due to the Thimerosal;
Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness: NONE
Diagnostic Lab Data: NA
Previous Vaccinations:
Other Medications: Corgard, Estrace, Klonopin
Preexisting Conditions: sulfur allergy

VAERS ID 61169 Vaccination Date: 1993-03-29
Age 21.0 Date filed: 1994-04-13
Sex F Where Administered: OTH
State VT Purchased by: OTH

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Onset Date: 1993-03-29 Days since Vaccination: 0
Symptoms: ALLERG REACT URTICARIA
Pt recvd vax & devel hives; pt was treated w/Antihistamines (DPH); reporting MD indicated pt devel hives on 2 separate occasions unrelated to vax; A thimerosal allergy may exist;
Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness: NONE
Diagnostic Lab Data: NA
Previous Vaccinations:
Other Medications: NONE
Preexisting Conditions: NONE
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**Onset Date:** 0000-00-00  
**Days since Vaccination:**  
**Symptoms:** REACT UNEVAL  
pt recvd vax & devel sensitivity to contact lens solutions containing thimerosal;

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**Onset Date:** 1994-11-14  
**Days since Vaccination:** 0  
**Symptoms:** AGITATION ALLERG REACT ASTHENIA CNS STIMULAT HYPOTHERMIA MALAISE REACT AGGRAV  
pt recvd vax in pm;noc,began feeling bad & by next am was sick,t 97.7;agitation & fatigue,called "erethism";inc in sinus/nasal allergy sxs;allergic rxn to thimerosal;pt allergic to mercury & flu vax contained mercury preservatives;
### VAERS ID 70893 Vaccination Date: 1993-09-20

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**Onset Date:** 1993-09-20  **Days since Vaccination:** 0  
**Symptoms:** ALLERG REACT EDEMA FACE  
pt recvd vax; exp swollen eyes; resolved; sent to allergist & was found to be allergic to thimerosal in the vax; 2nd & 3rd doses of engerix B given by allergist on 23nov93 & 27may94, respectively, w/out any adverse exp;

**Life Threatening Illness?** No  
**Died?** No  
**Disability?** No  
**Recovered?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** No  
**Current Illness:**  
**Diagnostic Lab Data:**  
**Previous Vaccinations:**  
**Other Medications:**  
**Preexisting Conditions:** none

### VAERS ID 74414 Vaccination Date: 0000-00-00

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**Onset Date:** 0000-00-00  **Days since Vaccination:**  
**Symptoms:** ALLERG REACT NODULE SKIN RASH  
pt recvd vax; exp an allergic-type rxn, including nodule formation & erythema; allergist believed rxn possibly an allergy to thimerosal or aluminum;

**Life Threatening Illness?** No  
**Died?** No  
**Disability?** No  
**Recovered?** No  
**ER or Doctor Visit?** No  
**Hospitalized?** No  
**Current Illness:**  
**Diagnostic Lab Data:**  
**Previous Vaccinations:**  
**Other Medications:**  
**Preexisting Conditions:** allergy, possible;
Onset Date: 0000-00-00  Days since Vaccination:  
Symptoms: ALLERG REACT POS RECHAL RASH
pt recv vax & broke out in rash;the patient's sensitivity was determined to be d/t thimerosal;

Onset Date: 1996-06-01  Days since Vaccination: 1
Symptoms: HYSN INJECT SITE POS RECHAL RASH
w/in a 24hr period pt broke out w/rash on lt alt where vax given;pt had no other rxn to vax but rash;lt took about 48hr for the rash to disappear;nurse stated poss thimerosal allergy;pt devel rash w/ACT HIB & HEP B @ 2mos
VAERS ID: 90605  Vaccination Date: 1996-09-29
Age: 48.7  Date filed: 1996-10-15
Sex: F  Where Administered: PUB
State: GA  Purchased by: OTH

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Onset Date: 1996-10-01  Days since Vaccination: 2
Symptoms: HYSN INJECT SITE VASODILAT
pt recv flu vax 29SEP96 & on 1OCT96 reported that this AM large red warm area noted @ inj site;states knew was allergic to Thimerosal in eye solution-made eye burn;no tx other than APAP given;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? No
Hospitalized? No
Current Illness: NONE
Diagnostic Lab Data: NONE
Previous Vaccinations: NA
Other Medications: Zinc, Pepaid, Calritan, Lescol ASCOL, Premarin
Preexisting Conditions: NONE

VAERS ID: 93072  Vaccination Date: 1995-11-01
Age: 30.0  Date filed: 1997-01-27
Sex: F  Where Administered: OTH
State: NE  Purchased by: OTH

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Onset Date: 1995-11-03  Days since Vaccination: 2
Symptoms: URTICARIA
pt recv vax & w/in 48hr pt devel outbreak of hives;the hives resolved w/o tx in several days;it was noted that the pt also had an outbreak of hives p/a tetanus shot & may be sensitive to thimerosal;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? No
Hospitalized? No
Current Illness: NONE
Diagnostic Lab Data: NONE
Previous Vaccinations: NA
Other Medications: Premarin
Preexisting Conditions: allergic rhinitis, allergy to PCN, allergy to sulfa;
VAERS ID 96185 Vaccination Date: 1996-09-09
Age 8.3  Date filed: 1997-05-02
Sex M  Where Administered: OTH
State TX  Purchased by: OTH

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Onset Date: 1996-09-12   Days since Vaccination: 3
Symptoms: ALLERG REACT URTICARIA
pt recv vax 9SEP96 & 12SEP96 pt devel gen urticaria; pt was taken to MD 25SEP96 & was referred to a dermatologist; the 24 antigen test was performed, which determined the pt had an allergy to thimerosal;

VAERS ID 98953 Vaccination Date: 0000-00-00
Age 53.0  Date filed: 1997-06-19
Sex F  Where Administered: OTH
State LA  Purchased by: OTH

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Onset Date: 0000-00-00   Days since Vaccination:
Symptoms: ALLERG REACT HYSN INJECT SITE PRURITUS
pt recv vax & exp an allergic rxn characterized by gen pruritus & erythema; rxn was attributed to thimerosal;
VAERS ID 100227 Vaccination Date: 1992-05-28
Age 41.4 Date filed: 1997-07-16
Sex F Where Administered: OTH
State NY Purchased by: OTH

Vaccinations | Manufacturer | Lot | Dose | Route | Site
---|---|---|---|---|---
1 | HEP | MSD | 0229V | 1 |

Onset Date: 1992-05-28 Days since Vaccination: 0
Symptoms: ALLERG REACT ASTHMA COORDINAT ABNORM EDEMA PERIPH HYPOKINESIA MYASTHENIA MYOPATHY PAIN
pt recv vax 28MAY92 & exp thimerosal sensitivity & serious, painful permanent personal injuries; no further details were provided;

VAERS ID 108242 Vaccination Date: 0000-00-00
Age 51.0 Date filed: 1998-03-31
Sex F Where Administered: OTH
State Purchased by: OTH

Vaccinations | Manufacturer | Lot | Dose | Route | Site
---|---|---|---|---|---
1 | FLU | WYETH | 0 | IM |

Onset Date: 0000-00-00 Days since Vaccination: 0
Symptoms: ALLERG REACT EUPHORIA RASH VASODILAT
w/in 24hr of vax pt devel a rash on shoulders & arms, flushing of the face & neck & a buzzing feeling in head; tx w/DPH & recovered 2-3 days; pt attributed this event to an allerg rxn to thimerosal;
Onset Date: 1996-10-01  Days since Vaccination: 0
Symptoms: ANGIOEDEMA ARTHRALLGIA EDEMA FACE EYE DIS PREV REACT RASH SERUM SICK SKIN DIS
pt recv vax & 5 days p/vax in OCT9996 pt to hosp w/a severely swollen face;pt was dx w/serum sickness & tx w/atarax;also devel joint pains & rash;MD felt sx were a rxn to thimerosal;

Onset Date: 1997-10-08  Days since Vaccination: 1
Symptoms: CONJUNCTIVITIS EDEMA FACE EYE DIS
Pt has history allergy to gentamicin & thimerosal, devel inject site rxn within 24 after vax. Redness, swelling resolved without tx after 1 day.
VAERS ID 113236 Vaccination Date: 1998-07-21
Age 9.0 Date filed: 1998-08-06
Sex F Where Administered: PVT
State CA Purchased by: PVT

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Onset Date: 1998-07-23 Days since Vaccination: 2
Symptoms: EDEMA PERIPH RASH
Pt. recv. vax. exp. arm Erythematos, swollen. Suspect thimerosal preservation.

VAERS ID 118955 Vaccination Date: 1998-10-27
Age 43.0 Date filed: 1999-02-26
Sex F Where Administered: OTH
State NY Purchased by: OTH

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Onset Date: 1998-10-27 Days since Vaccination: 0
Symptoms: ALLERG REACT PAIN PAIN INJECT SITE PARESTHESIA VASODILAT
Pt recv vax on 10/27/98; 10 min post vax pt exp rt arm sore, 30 min post vax pt exp numbness/tingling "down a line" of rt arm to hand/fingers, right neck, face & breast; tx=oral fluids, Claritin, ice; dx=allergic rx to thimerosal; pt imp 2
VAERS ID 119345 Vaccination Date: 0000-00-00
Age 44.0 Date filed: 1999-03-04
Sex U Where Administered: OTH
State CA Purchased by: OTH

Onset Date: 0000-00-00 Days since Vaccination: 
Symptoms: EDEMA INJECT SITE HYSN INJECT SITE PAIN CHEST
pt recv vax & exp chest tightness which resolved p/2min; pt also devel an inj site rxn characterized by swelling & redness; the vaccine provider said this event may represent an allerg rxn to thimerosal;

VAERS ID 121956 Vaccination Date: 1998-11-01
Age 54.7 Date filed: 1999-06-02
Sex F Where Administered: PUB
State IN Purchased by: OTH

Onset Date: 1998-11-01 Days since Vaccination: 0
Symptoms: ALLERG REACT PAIN PRURITUS RASH VASODILAT
pt recv vax & devel dermatitis characterized by burning, itching & transitory redness over both eyes; pt recently discovered allergic to thimerosal; pt attributed dermatitis to allergic rxn to thimerosal;
VAERS ID 124908 Vaccination Date: 1998-11-08
Age 50.7 Date filed: 1999-07-16
Sex M Where Administered: OTH
State NE Purchased by: OTH

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**Onset Date:** 1998-11-12  **Days since Vaccination:** 4
**Symptoms:** ALLERG REACT EDEMA FACE EYE DIS PAIN PRURITUS RASH MAC PAP RASH VESIC BULL

p/vax pt exp swelling eyes/fluid filled, welts on face & ears, bumps on neck, burning sensation & itching; tx w/corticosteroids w/o success; patch testing revealed a hypersensitivity to thimerosal;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? No
Hospitalized? No

Current Illness:
Diagnostic Lab Data: skin patch test hypersensitivity to thimersal, balsam of perm & neomycin;

Previous Vaccinations:
Other Medications:
Preexisting Conditions:

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VAERS ID 127527 Vaccination Date: 0000-00-00
Age 58.0 Date filed: 1999-09-17
Sex F Where Administered: PUB
State FL Purchased by: PUB

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**Onset Date:** 0000-00-00  **Days since Vaccination:**
**Symptoms:** ALLERG REACT INFECT PRURITUS RASH VESIC BULL

p/vax pt devel a migratory rash which was itchy & oozed when scratched; pt devel 2 infections as a result of scratching the rash; pt has been taking pred since 1996 for the rash; dx allergy to thimerosal;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? No
ER or Doctor Visit? Yes
Hospitalized? No

Current Illness: NONE
Diagnostic Lab Data: unk
Previous Vaccinations:
Other Medications: Premarin; Oscal;
Preexisting Conditions:
Onset Date: 0000-00-00  Days since Vaccination: 0
Symptoms: ALLERG REACT INJECT SITE REACT
Subsequent to receiving Tetanus and Diphtheria Toxoids Adsorbed Purogenated pt developed a severe injection site reaction which was diagnosed as possible a hypersensitivity to the preservative thimerosal contained in the vaccine.

Onset Date: 2001-01-22  Days since Vaccination: 0
Symptoms: RASH
The pt had a rash, was treated with Benadryl and Medrol dose pack. MD thinks the reaction was due to preservative thimerosal.
A pharmacist reported that a male received an injection of Flu Shield '00-'01 in 11/00 and subsequently, has experienced irritation of his eyes when using contact lens solution containing thimerosal. The reporter indicated that the pt had no previous history of sensitivity to thimerosal. No further information was available at the date of this report.

It was reported that a 37 year old male pt received a TD Adult vaccination on 09/15/2000. Reportedly, several hours later, the pt developed a fever of 102F, a sore throat and an asthma attack. He was put on oral prednisone. The pt is allergic to peas and tuna. Since tuna has mercury possible conclusion pt may be allergic to the Thimerosal in TD.
VAERS ID 181336  
**Vaccination Date:** 2001-11-16  
**Age:** Date filed: 2002-02-12  
**Sex:** F  
**State:** MN  
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<tr>
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<td>4018028</td>
<td>IM LA</td>
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**Onset Date:** 2001-11-16  
**Days since Vaccination:** 0  
**Symptoms:** INJECT SITE REACT PAIN INJECT SITE  
A nurse reported that a female employee of a clinic received flu shield vaccine on 11/16/2001. On 11/16/2001, she developed an injection site reaction characterized by pain. The reporter noted that the employee may be allergic to thimerosal. No additional info was available as of the date of this report.

VAERS ID 182473  
**Vaccination Date:** 1994-10-17  
**Age:** 0.1  
**Sex:** F  
**State:**  
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**Onset Date:** 1994-10-17  
**Days since Vaccination:** 0  
**Symptoms:** EDEMA INJECT SITE URTICARIA  
Information has been received from a registered nurse concerning an 18 day old female who on 10/17/1994 was vaccinated with the first dose of hep b vaccine recombinant. Post vaccination, on 10/17/1994, the pt developed a large swollen area at injection site and had hives. The RN stated that the child's reaction was from thimerosal and the child will be revaccinated with thimerosal free vaccine. The pt sought unspecified medical attention. No further info is available.
VAERS ID 233500 Vaccination Date: 2004-11-12
Age 59.0 Date filed: 2005-02-08
Sex F Where Administered: OTH
State ID Purchased by: OTH

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Onset Date: 0000-00-00  Days since Vaccination:
Symptoms: ALLERG REACT CONJUNCTIVITIS LAB TEST ABNORM PHARYNGITIS RASH STOMATITIS
Approx 1 wk following injection developed rash on chest progressing up neck to face, eyes, forehead. Intense burning in throat, nose, eyes. Pt did not seek help until around Christmas. Saw eye doctor rx for betamethasone. Which worsened reaction. Referred to dermatologist. Patch test shows allergy to thimerosal. Treatment with steroids, pt reported allergy to pharmacist on 02/03/2005.

Life Threatening Illness? No
Died? No
Disability? No
Recovered? No
ER or Doctor Visit? No
Hospitalized? No
Current Illness: NONE
Diagnostic Lab Data: Patch test positive for thimerisol
Previous Vaccinations: UNK
Other Medications: UNK
Preexisting Conditions: Allergies: Poss Aspirin, Penicillin

VAERS ID 234099 Vaccination Date: 2002-10-31
Age 67.0 Date filed: 2005-02-22
Sex F Where Administered: UNK
State Purchased by: UNK

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Onset Date: 0000-00-00  Days since Vaccination:
Symptoms: PETECHIA PHOTOSENSITIVITY PRURITUS RASH VESIC BULL
A report was received from a consumer on 27Nov02, concerning a 67 year old female vaccinee who experienced blisters on her body within one week of receiving 0.5ml Fluvirin vaccine 0.5ml IM on 31Oct02. Within one week the vaccinee developed a severe outbreak of blisters on the body including the face, arms, legs and trunk. On 06 or 07Nov02 the vaccinee was seen by a physician who prescribed an unk antibiotic. On 14Nov02 the vaccinee was referred to a dermatologist who suggested that thimerosal in Fluvirin va

Life Threatening Illness? No
Died? No
Disability? No
Recovered? No
ER or Doctor Visit? No
Hospitalized? No
Current Illness: NONE
Diagnostic Lab Data: UNK
Previous Vaccinations: UNK
Other Medications: Synthroid, Nexium, multivitamin, unspecified cataract medicine
Preexisting Conditions: NONE
Onset Date: 0000-00-00   Days since Vaccination:  
Symptoms: ALLERG REACT PRURITUS  
This case was reported by a nurse and described the occurrence of allergy to thimerosal in a patient who received hepatitis B vaccine recombinant (Engerix-B). On an unspecified date, the patient received the third dose of Engerix-B. At an unspecified time following the third administration of Engerix-B, on an unspecified date, the patient experienced itching. The patient was seen at a physician's office for "allergy testing." The results of the allergy testing indicated that the patient had an allergy to th...
33 year old female nurse with hypothalamic hypothyroidism who in approximately 1990 in the AM was vaccinated in the deltoid with a first dose of Hepatitis B virus vaccine. There was no illness at the time of vaccination. In approximately 1990, within 30 minutes of receiving the vaccine, the patient broke out in hives. At the time, she was told that it was probably a reaction to the preservative used in the vaccine which she thought was thimerosal. Medical attention was sought and she was treated with an
VAERS ID 228828 Vaccination Date: 2004-11-02
Age 40.0 Date filed: 2004-11-05
Sex F Where Administered: UNK
State UT Purchased by: PVT

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Onset Date: 2004-11-02 Days since Vaccination: 0
Symptoms: ALLERG REACT PRURITUS RASH VASODILAT

Flu shot given approximately 11:00am. Client had indicated she had no allergies. 11:45 client returned complained of itching and red rash on neck. No wheezing or SOB. Denies dizziness, lightheadedness. Given Chlorpheniramine 90 mg tab PO. Observed x 30 min symptoms resolving by 12:20. After reaction client remembered previous allergic reaction to thimerosal in contact solution. Client counseled to only vaccine thimerosal free vaccine in future.

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? No
Hospitalized? No
Current Illness: Recovering from bronchitis
Diagnostic Lab Data:
Previous Vaccinations:
Other Medications: NONE
Preexisting Conditions:
Onset Date: 2005-11-03   Days since Vaccination: 0
Symptoms: CONJUNCTIVITIS DYSPNEA EDEMA GENERAL EDEMA PERIPH LARYNGISMUS PAIN EYE PHARYNGITIS PNEUMONIA THIRST
Within half an hour of receiving the flu shot, I experienced pneumonia like symptoms with restricted breathing, my throat swelled and ached, my eyes turned bloodshot, my mouth began to burn, and my tissues began to swell. I suspect I was allergic to the shot, perhaps there was thimerosal in it. 12 hours later, the pneumonia and restricted breathing were gone, but I experienced painful bloodshot eyes, swelling of hands and feet, gastric distress, and mouth burn and intense thirst.
VAERS ID 215154 Vaccination Date: 0000-00-00
Age 52.0 Date filed: 2004-01-16
Sex F Where Administered: PVT
State Purchased by: OTH

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Onset Date: 0000-00-00 Days since Vaccination: 0000-00-00

Symptoms: ALLERG REACT HERPES SIMPLEX PHARYNGITIS
This case described the occurrence of an allergic reaction in a 52 year old female pt who received hep B vaccine for prophylaxis. This report was received from the pt, who is an emergency medical technician. The pt's past medical history included allergy to thimerosal. The pt stated that she had unspecified adverse experiences following receipt of previous, unspecified immunizations. On an unspecified date in 2002 the pt received the 1st dose of hep B vaccine. At an unknown time post-immunization, the pt ex

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness: UNK
Diagnostic Lab Data: UNK
Previous Vaccinations: 
Other Medications: 
Preexisting Conditions: Allergy to thimerosal
VAERS ID: 211956  
**Vaccination Date:** 2003-08-04

Age: 12.0  
Sex: M  
State:  
Where Administered: OTH  
Purchased by: OTH

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**Onset Date:** 2003-08-06  
**Days since Vaccination:** 2

**Symptoms:** ALLERG REACT AMBLYOPIA PAIN EYE RASH RASH VESIC BULL

Information has been received from a consumer concerning her 12 year old son with a skin allergy to thimerosal who on 8/4/03, also reported as 4/5/03, was vaccinated IM with a first dose of hepatitis B virus vaccine (lot # 643247/0316M). There was no concomitant medication. On 8/6/03, the next day, the patient began to have skin reactions. The skin reactions included sunburn-like condition all over and eye pain and blistering and diminished vision during the flare up. The patient has been treated with predn

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VAERS ID: 199522  
**Vaccination Date:** 2002-05-13

Age: 27.0  
Sex: F  
State:  
Where Administered: OTH  
Purchased by: OTH

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**Onset Date:** 2002-05-13  
**Days since Vaccination:** 0

**Symptoms:** HYSN INJECT SITE

Info has been received from a 27 y.o. female pharmacist who on 5/13/02 was vax'd w/a first 10 mcg dose of Hep B vax recombinant. On 5/13/02 the PT developed a rash around the inject site. On 5/15/02, it was reported that the PT still had the local inject site rash. PT stated she "thinks that she may have allergy to thimerosal, but not sure". Unspecified medical attention was sought. Add'l info has been requested.
Onset Date: 1999-11-17   Days since Vaccination:

Symptoms: URTICARIA

In 1999 (specific date not provided), the vaccinee received her 2nd injection of Engerix-B (lot ENG3090A6). On 11/17/99, post vax, she experienced generalized hives. She was seen by a physician and the event resolved with unspecified sequelae on approx. 11/23/99. The Engerix-B immunization series was discontinued. The reporter indicated the event was probably related to the thimerosal in vaccine.
Onset Date: 2002-06-13    Days since Vaccination: 0
Symptoms: HYSN INJECT SITE INJECT SITE REACT RASH URTICARIA

This report describes the occurrence of an inject site reaction in a 27 y.o. female who received Hep B vaccine recombinant (Engerix-B). This report was received from the subject who is a pharmacist and has been medically confirmed. The subject's medical history included environmental allergies and allergy to thimerosal (1999). She denied any tobacco use and indicated that she is a social drinker (approximately one drink/month). The subject experienced a "similar type of reaction" (red, pimply rash with some
VAERS ID 196439  Vaccination Date:  1991-04-23

Age   46.0  Date filed:  2003-01-17
Sex  F  Where Administered:  OTH
State  PA  Purchased by:  OTH

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Onset Date: 1991-04-23  Days since Vaccination: 0

Symptoms: ALLERG REACT MYALGIA PAIN BACK PARESTHESIA SKIN DIS

A physician via Merck Pharmaceuticals reported the occurrence of an allergic reaction in a 46 y.o. female who was vaccinated with Hep B recombinant (Engerix-B) for prophylaxis. The subject had previously experienced an allergic reaction manifested by persistent eye redness to a contact lens solution containing thimerosal. She subsequently had to use a thimerosal-free solution. Concurrent medications were not specified. On 4/23/91 at 9:00, the vaccinee received her first injection of Engerix-B (lot ENG630A4;
VAERS ID 36515 Vaccination Date: 1991-10-28
Age 38.5 Date filed: 1991-11-25
Sex F Where Administered: PUB
State WA Purchased by: PUB

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Onset Date: 1991-10-28  Days since Vaccination: 0
Symptoms: DIZZINESS DYSPNEA PHARYNGITIS
Pt c/o SOB, dizziness, inability to breathe & throat swelling w/in 10 min p/shot, VS stable; pt given DPH; cont to c/o throat swelling; pt given epi;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness: NONE
Diagnostic Lab Data: Possible thimerosal rxn in past;
Previous Vaccinations: Other Medications: recvd wkly allergy shots
Preexisting Conditions: possible allergy to "contacts" serious problems from lens;

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VAERS ID 84200 Vaccination Date: 1995-11-01
Age 81.1 Date filed: 1996-04-03
Sex M Where Administered: OTH
State OH Purchased by: PVT

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Onset Date: 1995-11-05  Days since Vaccination: 4
Symptoms: PRURITUS RASH
pt recv vax 1NOV95 & devel a fine,pink rash on face,back & arms;also c/o itchiness;pt was treated w/DPh & is recovered;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? No
Hospitalized? No
Current Illness: CHF, muscle disuse atrophy, UTI
Diagnostic Lab Data: MD thought maybe allergic to thimerosal or gentamicin
Previous Vaccinations: Other Medications: unk
Preexisting Conditions:
**VAERS ID 84526**  
**Vaccination Date:** 1993-09-23  
**Age** 49.8 **Date filed:** 1996-04-19  
**Sex** M **Where Administered:** OTH  
**State** AL **Purchased by:** OTH

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**Onset Date:** 1994-03-01  
**Days since Vaccination:** 159

**Symptoms:** PRURITUS RASH RASH PUST  
pt recv vax 23SEP93 & pt reported started seeing MD for rash MAR94 on neck, scalp, arms, legs, shoulders & back; dx contact dermatitis & tx for itching w/zonolien, folonocide, povidone-iodine, xanax; pt devel open sores on arms & trunk

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**VAERS ID 104681**  
**Vaccination Date:** 0000-00-00  
**Age** 72.0 **Date filed:** 1997-11-24  
**Sex** M **Where Administered:** PVT  
**State** CT **Purchased by:** UNK

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**Onset Date:** 0000-00-00  
**Days since Vaccination:**

**Symptoms:** PRURITUS RASH MAC PAP REACT AGGRAV  
rash, red patches, sl elevated on belly part of abd, legs, rt & lt near thighs, behind knees, spotty on one leg to ankles; chronic dermatitis around neck & shoulders exacerbated; rash itch; rash still running its course;

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**Life Threatening Illness?** No  
**Died?** No  
**Disability?** No  
**Recovered?** No  
**ER or Doctor Visit?** Yes  
**Hospitalized?** No  
**Current Illness:** NONE  
**Diagnostic Lab Data:** egg sensitivity ruled out; sensitivity to thimerosal suspected  
**Previous Vaccinations:** pt exp major eruption skin in face, neck, scalp area cracked skin @ 68yr old w/t  
**Other Medications:** serevent; flovent  
**Preexisting Conditions:** atopic neurodermatitis (mild) scalp, facial area;
VAERS ID 116011 Vaccination Date: 1997-12-11
Age 32.0 Date filed: 1998-12-01
Sex M Where Administered: OTH
State MI Purchased by: OTH

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Onset Date: 1997-12-11  Days since Vaccination: 0
Symptoms: ALLERG REACT EDEMA PERIPH PRURITUS RASH MAC PAP RASH VESIC BULL VASODILAT
pt recv vax 11DEC97 & same day exp redness, swelling, itching which spread down lt arm to lt hand;26DEC97 was seen by MD;had maculopapular eruptions w/blisters in lt axilla, lt hand, lt upper extremity from deltoid to hand;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? No
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness:
Diagnostic Lab Data: thimerosal patch test positive;neomycin patch test positive
Previous Vaccinations:
Other Medications: Zantac;Deconamine;
Preexisting Conditions: allergic to neomycin sulfate, allergic to thimerosal
VAERS ID: 116654 Vaccination Date: 1998-10-21

Age: 37.9  Date filed: 1998-12-02
Sex: F  Where Administered: PVT
State: NM  Purchased by: PVT

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Onset Date: 1998-10-21  Days since Vaccination: 0

Symptoms: ALLERG REACT ANAPHYL ASTHMA HYPOTENS PRURITUS VOICE ALTERAT
anaphylaxis w/gen pruritus, hoarseness, wheezing & possible hypotension 20-30min p/vax;tx w/inhaled racemic epi & DPH & kept on oral allegra bid for 3 days;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness: NONE
Diagnostic Lab Data: skin testing done 12NOV98 induced a rxn to thimerosal as the suspected reagent as pt showed an adverse response to thimerosal preserved tetanus toxoid fluid (could not find any other thimerosal for skin testing)
Previous Vaccinations:
Other Medications: Ibuprofen
Preexisting Conditions: NONE
VAERS ID 244505  
**Vaccination Date:** 2004-10-02  
**Age:** 50.0  
**Sex:** F  
**State:** IL  
**Where Administered:** UNK  
**Date filed:** 2005-09-23  
**Purchased by:** UNK  
**Manufacturer:** FLU UNKNOWN  
**Lot:** 4  
**Dose:** 1  
**Route:** IM  
**Site:**  

**Onset Date:** 2004-10-23  
**Days since Vaccination:** 21  
**Symptoms:** ALLERG REACT COUGH INC EDEMA FACE HYSN INJECT SITE LAB TEST ABNORM PHARYNGITIS PRURITUS  
Client reports that she has received the flu vaccine for the past 5 years. Other than the flu vaccine the only other vaccine that she has received was a Td booster given by our Health Dept on 7/31/03. 3 weeks after she received the flu vaccine last year she developed redness, itching, puffiness of her eyelids. She also complained of a irritated throat and a dry cough. She sought medical attention as these symptoms persisted. She finally saw a dermatologist on 9/20/05 for a patch test and received the res

Life Threatening Illness? No  
Died? No  
Disability? No  
Recovered? No  
ER or Doctor Visit? Yes  
Hospitalized? No  
Current Illness: none  
Diagnostic Lab Data: Positive patch test for thimerosal.  
Previous Vaccinations:  
Other Medications: none  
Preexisting Conditions: allery to thimerosal

VAERS ID 29722  
**Vaccination Date:** 1990-03-16  
**Age:** 37.0  
**Sex:** F  
**State:** OH  
**Where Administered:** UNK  
**Date filed:** 1991-05-02  
**Purchased by:** UNK  
**Manufacturer:** HEP MSD  
**Lot:** 1380R  
**Dose:** 1  
**Route:** IM  
**Site:**  

**Onset Date:** 1990-03-16  
**Days since Vaccination:** 0  
**Symptoms:** HYSN INJECT SITE PAIN INJECT SITE  
16mar90 pt vax hepta B. pt devel induration and erythema at inject site. 04apr90 pt complained of soreness at inject site. pt remained under treatment

Life Threatening Illness? No  
Died? No  
Disability? No  
Recovered? No  
ER or Doctor Visit? No  
Hospitalized? No  
Current Illness:  
Diagnostic Lab Data: NA  
Previous Vaccinations:  
Other Medications:  
Preexisting Conditions: allergy to thimerosal
VAERS ID 30661  Vaccination Date: 1990-06-26  
Age 36.0  Date filed: 1991-05-22  
Sex F  Where Administered: UNK  
State PA  Purchased by: UNK  

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Onset Date: 1990-06-26  Days since Vaccination: 0  
Symptoms: RASH  
26jun90 pt vax hepta B. same day pt devel rash on front of chest and inner aspect of wrists. rash not itchy and gradually faded over next 2 week. pt elected not to continue series.

VAERS ID 35603  Vaccination Date: 1991-07-17  
Age 39.0  Date filed: 1991-10-22  
Sex F  Where Administered: OTH  
State PA  Purchased by: PUB  

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Onset Date: 1991-07-20  Days since Vaccination: 3  
Symptoms: FEVER HEADACHE  
17JUL91 pt recvd Engerix-B; 3rd day p/vax pt exp h/a & fever; tx Advil; events abated approx 4 days p/inject;
VAERS ID 39810  Vaccination Date:  1990-12-14
Age        37.0  Date filed:  1992-03-06
Sex        F  Where Administered:  UNK
State       MI  Purchased by:  UNK

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Onset Date: 1990-12-16  Days since Vaccination:  2
Symptoms:  ARTHRALTIA  EDEMA  PERIPH  HEPATITIS  HBSAG  PAIN
Pt recvd 2nd dose of Hep b vax on 16DEC90 & devel generalized arthralgia including swelling of the ankles; pt seen by MD 24JAN92; PE revealed tenderness of the hands, wrists, mid-feet, metatarsophalangeal;

VAERS ID 40375  Vaccination Date:  1990-12-14
Age        23.9  Date filed:  1992-04-17
Sex        F  Where Administered:  OTH
State       MI  Purchased by:  PVT

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Onset Date: 0000-00-00  Days since Vaccination:  2
Symptoms:  TWITCH
Pt recvd 2 doses of Hep B vax on 13NOV90 & 14DEC90 & following the 2nd dose pt exp intermittent twitching in lt eyelid; pt reported that the eye twitching gradually subsided & pt had no further problems; Pt recvd 3rd dose w/no problems;
Onset Date: 1992-10-08  Days since Vaccination: 0
Symptoms: DIZZINESS EAR DIS VERTIGO
Pt recvd vax 20OCT92 & w/in 30 minutes of receiving vax pt felt that ears plugged up; also exp dizziness & mild vertigo;

Onset Date: 1992-10-13  Days since Vaccination: 5
Symptoms: ASTHENIA HEADACHE HYPERTONIA NEUROPATHY PARESTHESIA THINKING ABNORM TWITCH
pt recvd vax 8OCT93 & 1 wk later devel a polyneuropathy characterized by vague progressive numbness on the Lt side more than on the rt side, tingling electrical dysesthenia in all 4 extremities, h/a, fatigue, difficulty thinking/concentrat
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Onset Date: 1993-10-28   Days since Vaccination: 0
Symptoms: PARESTH CIRCUMORAL TASTE PERVERS
pt recvd vax & exp metallic taste in mouth & numbness of lips & tongue; numbness dec p/waking the following morning 29OCT93

VAERS ID 64029 Vaccination Date: 0000-00-00
Age 33.0   Date filed: 1994-07-12
Sex F   Where Administered: OTH
State MD   Purchased by: OTH

Onset Date: 0000-00-00   Days since Vaccination: 0
Symptoms: PRURITUS
pt recvd vax; pt devel itching on entire body; tx w/ aveeno bath; symptoms recurred w/ 2nd & 3rd dose of vax;
VAERS ID 64044 Vaccination Date: 1993-06-30
Age 31.8  Date filed: 1994-07-13
Sex F  Where Administered: PVT
State WV  Purchased by: OTH

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Onset Date: 1993-06-30  Days since Vaccination: 0
Symptoms: ASTHENIA DEPERSONAL DIZZINESS ERUCTAT MYALGIA PAIN ABDO URTICARIA VASODILAT
pt recvd vax; approx 2 hrs after vax pt devel red, sore & "welty" arm, stomach pains w/ belching, dizziness, lightheadness, a "stupid feeling"; pt was hot & felt like passing out & was very tired;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? No
Hospitalized? No
Current Illness:
Diagnostic Lab Data: no relevant data;
Previous Vaccinations: pt had reaction w/ other vax;
Other Medications: zovirax;
Preexisting Conditions: allergy, inhalant; allergy, candida; allergy, chemicals; allergy, thimerosal;

VAERS ID 64066 Vaccination Date: 1990-03-27
Age 34.6  Date filed: 1994-07-14
Sex F  Where Administered: PUB
State MD  Purchased by: PVT

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Onset Date: 0000-00-00  Days since Vaccination: 0
Symptoms: ARTHRALGIA FEVER
pt recvd vax; pt devel joint pain & fever;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? No
Hospitalized? No
Current Illness:
Diagnostic Lab Data: no relevant data;
Previous Vaccinations:
Other Medications:
Preexisting Conditions: allergy, thimerosal;
VAERS ID 64251  Vaccination Date: 1993-09-27
Age  44.4  Date filed: 1994-07-22
Sex  F  Where Administered: PUB
State  MD  Purchased by: PUB

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Onset Date: 1993-10-04  Days since Vaccination: 7
Symptoms: ARTHRALGIA ASTHENIA FEVER HEADACHE PETECHIA PRURITUS RASH VESIC BULL
pt recvd vax & devel arthralgia, generalized petechiae, pruritis, vesicular eruption, fever, headache & fatigue;

Life Threatening Illness?  No
Died?  No
Disability?  No
Recovered?  Yes
ER or Doctor Visit?  No
Hospitalized?  No
Current Illness:  
Diagnostic Lab Data: no relevant data;
Previous Vaccinations:  
Other Medications: none;
Preexisting Conditions: allergy, thimerosal; allergy, dilantin;

VAERS ID 65249  Vaccination Date: 1993-10-26
Age  48.0  Date filed: 1994-08-25
Sex  F  Where Administered: UNK
State  MD  Purchased by: UNK

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Onset Date: 1993-10-27  Days since Vaccination: 1
Symptoms: HYPERGLYCEM INFECT LUNG DIS PAIN PAIN ABDO PAIN CHEST PHARYNGITIS SINUSITIS
pt recvd flu vax 26OCT93 & 27OCT93 c/o throat felt scratchy; pt devel a sinus infection, a burning feeling in lungs & throbbing pain in the arm that inject was given; arm throbbed 4 days p/vax; pt took advil but discont when stomach pain

Life Threatening Illness?  No
Died?  No
Disability?  No
Recovered?  No
ER or Doctor Visit?  No
Hospitalized?  No
Current Illness:  
Diagnostic Lab Data: blood sugars elevated at 211 to 296
Previous Vaccinations:  
Other Medications: Premarin
Preexisting Conditions: allergy to Thimerosal; diabetes controlled by diet & exercise
VAERS ID 68567  Vaccination Date: 1994-10-28
Age  44.9  Date filed: 1994-11-28
Sex  F  Where Administered: PUB
State  TN  Purchased by: PUB

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Onset Date: 1994-10-28  Days since Vaccination: 0
Symptoms: EDEMA FACE EDEMA PERIPH EDEMA TONGUE PHARYNGITIS SPEECH DIS VOICE ALTERAT
pt recvd vax; noticed mouth burning & sore throat; approx 4pm, lips & tongue swollen; co-workers noticed voice change & slurred speech; advised to take DPH; saw PMD approx 4:30, given meds; p/ 4hrs pt states swelling cont & moved to hands; now nl;

VAERS ID 72197  Vaccination Date: 0000-00-00
Age  38.0  Date filed: 1995-03-28
Sex  F  Where Administered: PUB
State  IN  Purchased by: OTH

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Onset Date: 0000-00-00  Days since Vaccination: NONE
Symptoms: DYSPEPSIA EDEMA INJECT SITE HEADACHE HYPOKINESIA HYSN INJECT SITE PAIN INJECT SITE PHARYNGITIS RHINITIS
pt recvd vax & devel burning, redness, & swelling @ inj site which lasted for a couple of days & required ice; also devel h/a, nausea, upset stomach, & cold; had to stay in bed 3-4 days due to symptoms & couldn't use arm;
VAERS ID 72201  Vaccination Date:  1994-10-31
Age  38.3  Date filed:  1995-03-28
Sex  M  Where Administered:  PVT
State  VA  Purchased by:  PVT

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Onset Date: 1994-10-31  Days since Vaccination: 0

Symptoms: ANAPHYL ANGIOEDEMA ANXIETY ASTHMA HYPERTENS PRURITUS TACHYCARDIA URTICARIA
pt recvd vax & 20 to 30 mins later devel angioedema & anaphylaxis characterized by tachycardia, urticaria of the neck & face, an elevated BP, swelling & redness of the buccal mucosa, pruritus, bilateral wheezing & apprehension; tx DPH & Epi

Life Threatening Illness?  Yes
Died?  No
Disability?  No
Recovered?  Yes
ER or Doctor Visit?  No
Hospitalized?  No
Current Illness:  NONE
Diagnostic Lab Data:
Previous Vaccinations:
Other Medications:  unk
Preexisting Conditions:
pt may have a hx of an allergic rxn to thimerosal in contact lens solution
Onset Date: 1994-07-25   Days since Vaccination: 0
Symptoms: EDEMA LARYNX MYALGIA PARESTHESIA VOICE ALTERAT

pt recvd vax & devel myalgias, tingling all over & body laryngeal edema; tx'd w/Adrenalin (1/4 ml SQ) & DPH; pt improved significantly w/in 30 mins; next day pt reported to MD was still a little hoarse
VAERS ID  81557  Vaccination Date:  1994-09-01
Age   38.0  Date filed:  1996-02-26
Sex   F  Where Administered:  OTH
State  NC  Purchased by:  OTH

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Onset Date:  1994-09-01  Days since Vaccination:  0
Symptoms:  BRADYCARDIA  DIZZINESS  FLU  SYND
NAUSEA  SYNCPE
pt recvd vax; w/in 5 min, passed out & had slow heart rate; w/in 1 hr p/ vax she exp n, lightheadedness & flu like sx; observed for 2 hrs in the er; no tx necessary; sx lasted approx 3 days;

Life Threatening Illness?  No
Died?  No
Disability?  No
Recovered?  Yes
ER or Doctor Visit?  Yes
Hospitalized?  No
Current Illness:
Diagnostic Lab Data:
Previous Vaccinations:
Other Medications:
demulen
Preexisting Conditions:
allergic to bee venom & others, ocular allergy to thimerosal;

VAERS ID  82252  Vaccination Date:  1995-02-08
Age   42.0  Date filed:  1996-02-27
Sex   M  Where Administered:  OTH
State  WA  Purchased by:  OTH

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Onset Date:  1995-02-08  Days since Vaccination:  0
Symptoms:  CONJUNCTIVITIS
pt recvd vax & w/in 4-5hrs p/vax exp irritated & reddened eyes; these adverse events lasted a few hrs, & was recovered by next day;

Life Threatening Illness?  No
Died?  No
Disability?  No
Recovered?  Yes
ER or Doctor Visit?  No
Hospitalized?  No
Current Illness:
Diagnostic Lab Data:
Previous Vaccinations:
Other Medications:  NONE
Preexisting Conditions:
allergic to thimerosal-in contact lens solution; had similar rxn;
VAERS ID 84456  Vaccination Date:  1995-03-01
Age 38.2  Date filed:  1996-04-16
Sex F  Where Administered:  PUB
State PA  Purchased by:  PVT

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Onset Date: 1995-03-01  Days since Vaccination:  0
Symptoms:  ANGIOEDEMA EDEMA PERIPH POS RECHAL URTICARIA
pt recv vax 1MAR95 & devel hives;pt awoke 3AM & hands & forearms were swollen like sausages;tx DPH & then Pred;pt exp urticaria & angioedema;required ER/MD visit;

VAERS ID 84772  Vaccination Date:  0000-00-00
Age 36.0  Date filed:  1996-04-24
Sex F  Where Administered:  OTH
State IL  Purchased by:  OTH

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Onset Date: 0000-00-00  Days since Vaccination:  0
Symptoms:  ASTHMA PAIN CHEST
pt recv vax;exp tightness in chest & wheezing 24 hrs p/inject;tx w/ pred & albuterol;
VAERS ID 88872 Vaccination Date: 1995-06-30
Age 34.0 Date filed: 1996-08-14
Sex F Where Administered: PVT
State MA Purchased by: PVT

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Onset Date: 1995-06-30 Days since Vaccination: 0
Symptoms: ALLERG REACT GAIT ABNORM LAB TEST ABNORM LIVER FUNC ABNORM NAUSEA PARESTHESIA POS RECHAL SERUM SICK VASODILAT
pt recv vax 30JUN96 & exp numbness, tingling of tongue, n,faintness, diaphoresis,diff walking;to ER having serum sickness rxn to vax;hives, MD feels acute allerg rxn to vax, liver test showed abn in 3 phases of detoxification;

Life Threatening Illness? No
Died? No
Disability? Yes
Recovered? No
ER or Doctor Visit? Yes
Hospitalized? No

Current Illness:
Diagnostic Lab Data:
functional liver detoxification profile was performed which showed abn in 3 phases of detoxification; elevation in the catacal (catechol?)
Previous Vaccinations: red, puffy, swollen eyelids, contact dermatitis w/dose 1 HEP;h/a w/dose 2 in pt;
Other Medications:
Preexisting Conditions:
allergic to dust, cats, mold, thimerosal; hayfever, hives, tachycardia (1990), tonsillectomy (1981);1990 episode of tachycardia was holter & echo negative;
**VAERS ID 95713  Vaccination Date:** 0000-00-00

**Age**  Date filed: 1997-03-26  **Sex** F  **State** WI  **Where Administered:** PVT  **Purchased by:** PVT

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**Onset Date:** 0000-00-00  **Days since Vaccination:**

**Symptoms:** BLEED TIME INC ECCHYMOSIS HEM GI LAB TEST ABNORM PALLOR PARESTHESIA VASC DIS PERIPH VASODILAT

pt recv vax & tip of 1 finger of the rt hand became white & cold & hyperperfused; also had one episode of rectal bleeding; @ that time, bleeding time was 13 min; all other hematologic & blood chem nl; devel small bruise, hemmorhage rt eye; numb

**Life Threatening Illness?** No  **Died?** No  **Disability?** No  **Recovered?** Yes  **ER or Doctor Visit?** No  **Hospitalized?** No  **Current Illness:** none  **Diagnostic Lab Data:** bleeding time was 13 minutes  **Previous Vaccinations:** pt recv flu vax approx 8 yr ago w/o adverse exp  **Other Medications:** NONE  **Preexisting Conditions:** thimerosal allergy

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**VAERS ID 105509  Vaccination Date:** 1996-11-22

**Age** 25.0  **Date filed:** 1998-01-06  **Sex** F  **State** AZ  **Where Administered:** PVT  **Purchased by:** PVT

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<th>Manufacturer</th>
<th>Lot</th>
<th>Dose</th>
<th>Route</th>
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**Onset Date:** 1996-11-23  **Days since Vaccination:** 1

**Symptoms:** ASTHMA URTICARIA

pt recv vax & 12 hr post vax pt exp hives on face & on back; 24 hr post vax pt exp hives & wheezing; ER or MD visit was required; tx DPH; sx resolved over 2 days;

**Life Threatening Illness?** No  **Died?** No  **Disability?** No  **Recovered?** Yes  **ER or Doctor Visit?** Yes  **Hospitalized?** No  **Current Illness:** none  **Diagnostic Lab Data:**  **Previous Vaccinations:**  **Other Medications:** NONE  **Preexisting Conditions:** hypersensitive to thimerosal, hypersensitive to yeast, skin allergies to ATB;
VAERS ID 112092  Vaccination Date: 0000-00-00
Age  Date filed: 1998-06-25
Sex  Where Administered: OTH
State IL Purchased by: OTH

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Onset Date: 0000-00-00  Days since Vaccination: 
Symptoms: HYSN INJECT SITE INFLAM INJECT SITE
pt recv vax & devel redness & inflammation @ the site of vax;pt recovered;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? No
Hospitalized? No
Current Illness: unk
Diagnostic Lab Data:
Previous Vaccinations:
Other Medications: unk
Preexisting Conditions: poss sensitivity to thimerosal

VAERS ID 115995  Vaccination Date: 1998-06-26
Age 30.0  Date filed: 1998-12-01
Sex F  Where Administered: OTH
State MN Purchased by: PVT

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Onset Date: 1998-06-27  Days since Vaccination: 1
Symptoms: NEURALGIA PAIN PAIN NECK
pt recv vax 26JUN98 & 27JUN98 pt devel neuralgia, neck pain & arm pain;MD visit was required;pt was not treated for the event;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? No
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness: 
Diagnostic Lab Data:
Previous Vaccinations:
Other Medications: 
Preexisting Conditions: allergic to thimerosal
VAERS ID 118322  Vaccination Date:  1999-01-14
Age  32.5  Date filed:  1999-01-27
Sex  F  Where Administered:  OTH
State  VA  Purchased by:  PUB

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</table>

Onset Date:  1999-01-14  Days since Vaccination:  0
Symptoms:  EDEMA PAIN URTICARIA
approx 2hr p/vax lt arm swelling, tenderness, hives on upper body, neck, face, DPH given 11AM w/relief of sx;
Life Threatening Illness?  No
Died?  No
Disability?  No
Recovered?  Yes
ER or Doctor Visit?  No
Hospitalized?  No
Current Illness:  NONE
Diagnostic Lab Data:  NA
Previous Vaccinations:  
Other Medications:  
Preexisting Conditions:
allergies to erythromycin, peach, fuzz, ?thimerosal

VAERS ID 119993  Vaccination Date:  1998-08-07
Age  40.7  Date filed:  1999-03-29
Sex  F  Where Administered:  PUB
State  IL  Purchased by:  PVT

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Onset Date:  1998-08-14  Days since Vaccination:  7
Symptoms:  DIARRHEA
pt recv vax 7AUG98 & approx 1wk p/vax pt exp diarrhea which lasted 203wk; 21AUG98 pt recovered from exp;
Life Threatening Illness?  No
Died?  No
Disability?  No
Recovered?  Yes
ER or Doctor Visit?  No
Hospitalized?  No
Current Illness:  
Diagnostic Lab Data:  
Previous Vaccinations:  No relevant data;
Other Medications:  unk
Preexisting Conditions:  thimerosal allergy
VAERS ID 126729 Vaccination Date: 1999-06-03
Age 44.0 Date filed: 1999-09-15
Sex F Where Administered: PVT
State MD Purchased by: PVT

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Onset Date: 1999-06-05  Days since Vaccination: 2
Symptoms: RASH MAC PAP
p/vax pt devel a systemic hypersensitivity rxn of macular annular dermatitis & was dx w/Gianotti-Crosti synd; seen by dermatologist; tx w/pred; MD felt rxn r/t vax;

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness:
Diagnostic Lab Data:
Previous Vaccinations:
Other Medications:
Preexisting Conditions:
 Possibly allergic to Bee Stings; allergic to Thimerosal, Poison Ivy Exposure, Thyroid cancer;

VAERS ID 126958 Vaccination Date: 1999-07-12
Age 25.8 Date filed: 1999-08-10
Sex F Where Administered: PVT
State OH Purchased by: OTH

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Onset Date: 1999-07-14  Days since Vaccination: 2
Symptoms: DIZZINESS FEVER HYPOCALCEM HYPOPOTRINEM LDH INC NAUSEA PAIN BACK PALPITAT PETECHIA VASCULITIS
2 days p/recv vax pt exp nausea, fever (100-102f), palpitations, back pain, lightheadedness, and petechiae from her ankles to 2" above knees; p/tests pt dx w/vasculitis

Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? Yes
Hospitalized? No
Current Illness:
Diagnostic Lab Data: 7/21/99- ALB 3.4; LDH 361; low calcium; 7/14/99- urine culture neg
Previous Vaccinations:
Other Medications:
Preexisting Conditions: Possibly allergic to thimerosal, sulfa allergy
**VAERS ID** 164782  **Vaccination Date:** 2000-12-06  
**Age** 38.0  **Date filed:** 2001-01-25  
**Sex** F  **Where Administered:** PUB  
**State** MI  **Purchased by:** PVT  

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**Onset Date:** 2000-12-07  **Days since Vaccination:** 1  
**Symptoms:** RASH  
One day post vax, the pt developed a rash on upper anterior and posterior chest. Treated with over the counter medications and then resolved.

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**VAERS ID** 193466  **Vaccination Date:** 2002-11-15  
**Age** 27.0  **Date filed:** 2002-11-17  
**Sex** F  **Where Administered:** PVT  
**State** NC  **Purchased by:** UNK  

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**Onset Date:** 2002-11-16  **Days since Vaccination:** 1  
**Symptoms:** CELLULITIS MASS INJECT SITE RASH  
Symptoms: local erythema, induration at the injection site within 24 hours; followed by the progression of the erythema to include the entire dorsal surface the the left arm; PT was diagnosed with cellulitis and begun on keflex 500 mg po QID this evening by a local emergency room  

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**Life Threatening Illness?** No  
**Died?** No  
**Disability?** No  
**Recovered?** Yes  
**ER or Doctor Visit?** Yes  
**Hospitalized?** No  
**Current Illness:** none  
**Diagnostic Lab Data:**  
**Previous Vaccinations:**  
**Other Medications:**  
**Preexisting Conditions:** Asthma, allergy to thimerosal (not anaphylaxis)
Onset Date: 2002-06-13   Days since Vaccination: 0
Symptoms: HYSN INJECT SITE INJECT SITE REACT RASH URTICARIA

This report describes the occurrence of an inject site reaction in a 27 y.o. female who received Hep B vaccine recombinant (Engerix-B). This report was received from the subject who is a pharmacist and has been medically confirmed. The subject's medical history included environmental allergies and allergy to thimerosal (1999). She denied any tobacco use and indicated that she is a social drinker (approximately one drink/month). The subject experienced a "similar type of reaction" (red, pimply rash with some hives) following the receipt of a tuberculin (TB) skin test. The subject denied any tobacco use and

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Life Threatening Illness? No
Died? No
Disability? No
Recovered? Yes
ER or Doctor Visit? No
Hospitalized? No

Current Illness: 

Diagnostic Lab Data:

Previous Vaccinations:
Inject site reaction; Hep B (unknown mfr); 0; In Patient

Other Medications:
Ethinyloestrad + norgestrel (Ethinyloestradiol + Norgestrel)
Paracetamol

Preexisting Conditions:
Allergy to thimerosal, environmental allergy. A few yrs ago, the subject experienced the "same type of reaction" (red, pimply rash with some hives)
A physician via Merck Pharmaceuticals reported the occurrence of an allergic reaction in a 46 y.o. female who was vaccinated with Hep B recombinant (Engerix-B) for prophylaxis. The subject had previously experienced an allergic reaction manifested by persistent eye redness to a contact lens solution containing thimerosal. She subsequently had to use a thimerosal-free solution. Concurrent medications were not specified. On 4/23/91 at 9:00, the vaccinee received her first injection of Engerix-B (lot ENG630A4;
**VAERS ID 213783**  
**Vaccination Date:** 0000-00-00  
Age 40.0  
Sex F  
State VT  
*Where Administered:* PVT  
*Purchased by:* PVT  

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**Onset Date:** 0000-00-00  
**Days since Vaccination:**  
**Symptoms:** FEVER PAIN INJECT SITE  
After injection about 8-12 hours, noted increased injection site soreness and fever.

**VAERS ID 215719**  
**Vaccination Date:** 0000-00-00  
Age 45.0  
Sex F  
State MI  
*Where Administered:* PVT  
*Purchased by:* OTH  

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**Onset Date:** 0000-00-00  
**Days since Vaccination:**  
**Symptoms:** HYSN INJECT SITE INJECT SITE REACT  
On a 45 year old female pt received a dose Flu Shield on an unspecified date in November 2002. On an unspecified date in November, one day post-immunization, the pt developed an injection site reaction characterized by a "welt that lasted a few days." No additional info was available at the time of this report.
VAERS ID: 250888  Vaccination Date: 2005-10-19

Age: 55.0  Date filed: 2006-01-26
Sex: M  Where Administered: PVT
State: NC  Purchased by: OTH

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Onset Date: 2005-10-21  Days since Vaccination: 2
Symptoms: ASTHENIA FEVER HYPERTONIA NAUSEA SYNCOPE THYR DIS

Patient reported that 2 days after receiving Td injection he lost consciousness in the doctor's office while getting his blood drawn for the glucose test. Muscle stiffness next day, slight fever, continued weakness and nausea. Patient and begun a fast the night of the immunization for a glucose test being administered days 2 and 3 post immunization. Follow up received on 11/15/05: Patient (who is also the reporter of the adverse event) was contacted for additional information. Patient said that thyroid abno

Life Threatening Illness? No  Died? No
Disability? No  Recovered? Yes
ER or Doctor Visit? Yes  Hospitalized? No

Current Illness: Recovering from GBS
Diagnostic Lab Data: Results of Labs from Oct 21, 2005: Thyroid Peroxidase TPO (Ab) = 1048; Glucose 2hr Postprandial = 237mg/dl; AIC Hemoglobin = 6.5; TSH = 4.091; T4 = 7.2; T3 uptake = 31%; Free Thyroxine Index = 2.2

Previous Vaccinations:
Other Medications: Altace; Hydrochlorothiazide; Protonix
Preexisting Conditions: NSAID; Aspirin and thimerosal sensitivity