VAERS Line List Report

Report run on: 30 MAR 2010 09:46

Vax Type: HPV4 Reported Date: 16-MAY-09 - 30-MAR-10 All comb. w/AND

Vaers Id: 356938-1 (D)

<u>Age</u>	<u>Gender</u>	Vaccine Date	Onset Date 12-Sep-2008	<u>Days</u> 53	Received Date 10-Sep-2009		Status Date 11-Sep-2009		<u>State</u> OK	Mfr Report Id	Last Edit Date 29-Sep-2009
19.0	F	21-Jul-2008									
VAX Det	ail: Type	<u>Manu</u>	<u>facturer</u>	<u>Lot</u>		Prev Doses		<u>Site</u>		Route	Other Vaccine
	HPV4	. MERC	CK & CO. INC.		17400		2	Left arm)	Intramuscular	HPV4

Seriousness: DIED, SERIOUS

Arrhythmia, Biopsy heart abnormal, Bronchitis, Chest pain, Chills, Death, Dizziness, Dyspnoea, Fatigue, Feeling cold, Headache, Muscle spasms, Nausea, MedDRA PT Oropharyngeal pain, Pain, Petechiae, Productive cough, Pulmonary congestion, Pulmonary oedema, Pyrexia, Sputum discoloured, Sternal fracture

Symptom Text: Headache, Nausea, dizziness, chilling, tiredness, shortness of breath, complained of chest plain, severe cramps. 9/14/09 Received vaccine & PCP medical

records which reveal patient seen 12/5/07 & 2/27/08 with sore throat, fever, chills, fatigue, body aches, productive cough w/yellow sputum & HA. Dx both times w/acute bronchitis & tx w/antibiotics & cough syrup. 9/25/09 Autopsy report received DOD 09/12/2008. Acute Cardiac Arrhythmia of Unknown Etiology. Additional information abstracted: Heart with focal microscopic ischemic changes, pulmonary congestion and edema. Rare petechiae: conjunctival, periorbital

and laryngeal. Resuscitation related sternal fracture.

Other Meds: Yaz until 3/17/08. Femcon beginning 3/17/08. Anaprox as needed.

Lab Data: None. I do have copies of all medical history from 01/08/2004 to the time of her death that I can provide if needed. The Medical Examiners office will have

tissue samples until 4/2010.

None History: **Prex Illness:** None

Prex Vax IIIns: None~ ()~~0~Patient

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