LAFAYETTE COLLEGE BAILEY HEALTH CENTER

INFLUENZA VACCINE CONSENT FORM

Name:	Date of Birth:
Address:	

Please complete the following screening questions:

YES NO

1. Are you 18 years of age or older? _____ 2. Have you ever had a severe reaction to a flu shot? _____ 3. Are you allergic to eggs? _____ 4. Are you allergic to Formaldehyde? _____ 5. Are you experiencing acute illness symptoms or have a fever? ____ 6. Do you have a medical condition or are you taking medications that suppress your ____ immune system? 7. Have you ever had Guillain-Barre syndrome or other neurologic disorder? ____ 8. Are you pregnant or breastfeeding?

I have been offered the Inactivated Influenza Vaccine WHAT YOU NEED TO KNOW 2019-2020 Vaccine Information Statement sheet. I have had the chance to ask questions and they were answered to my satisfaction. I believe I understand the benefits and risks of the influenza vaccine and ask that it be given to me or the person named below for who I am authorized to make this request.

Signature	Date	

CLINIC USE ONLY

Date Administered:	Injection Site: R or L deltoid			
Vaccine Manufacturer:				
LOT#: NDC#:	_ Exp Date:			
Signature of Vaccine Administrator				

Understanding the Screening Questionnaire and Additional Information about Influenza vaccine

About flu vaccines: There are two types of vaccines that protect against the flu. The "flu shot" is an Inactivated vaccine (containing killed virus) that is given with a needle in the arm. Because the virus is killed, it is NOT possible to get the flu from the vaccine.

Have you ever had a severe reaction to a flu shot? The vaccine should not be given with a severe allergic or anaphylactic response to a previous influenza vaccine. Severe reactions occur within minutes to hours following the vaccination. Localized soreness, redness, swelling, pain, fever and aches are considered mild problems and are not contraindication for receiving the vaccine.

Are you allergic to eggs? Allergy to eggs is a contraindication. Persons with egg allergies should NOT receive vaccine.

Are you experiencing acute Illness symptoms or have a fever? There is no evidence that acute illness reduces vaccine efficacy or increases vaccine adverse events. However, with moderate or severe acute Illness, ail vaccines should be delayed until the illness has improved. Mild illnesses (such as upper respiratory infections or diarrhea) are NOT contraindications to vaccinations. Do not withhold vaccination if a person is taking antibiotics.

Do you have a medical condition or are you taking medications that suppress your Immune system? Medical conditions that suppress the immune system include; acquired or congenital immunodeficiency, chronic metabolic diseases, renal dysfunction and hemoglobinopathies. These conditions may decrease the effectiveness of the influenza vaccine. But they also increase the risk of complications due to Influenza. Immunosuppressive medications may compromise the body's response to the influenza vaccination. Please consult with a health care provider to see if flu vaccination is recommended for you.

Have you ever had Guillain-Barre` syndrome or other neurologic disorder? Guillain-Barre` Syndrome (GBS) is a disorder in which the body's immune system attacks part of the peripheral nervous system. Incidence of GBS among the general population is low, but persons with a history of GBS have a substantially greater likelihood of subsequently experiencing GBS than persons without such a history.

Reasons to defer Influenza vaccine and consult with health care provider include: Guillain-Barre syndrome within 6 weeks after a previous vaccination, or progressive neurological disorder, including encephalopathy or uncontrolled seizure not attributable to an identified cause. Influenza vaccine administered in the 1970s may have increased the risk of GBS. This association has not been shown since then. The low estimated risk of GBS is much less than that of severe influenza that could be prevented by immunization.

For women: Are you pregnant or breastfeeding? Pregnant women should receive only inactivated Influenza vaccine.

References:

1. Prevention and Control of Influenza. Recommendations of the Advisory Council on Immunization Practices (ACIP) MMWR June 28, 2006/55 (Early Release): 1-41

2. Influenza Vaccination of Health-Care Personnel. Recommendations of the Healthcare Infection Control Practices Advisory Committee (HICPAC) and the Advisory Committee on Immunization Practices (ACIP). MMWR February 9, 2006/55

3. Inactivated Influenza Vaccine: What you need to know. 2006-07.

4. http://www.fda.gov/CBER/vaccine/thimerosal.htm