



Influenza Vaccine Consent Form

Patient Name: _____ **DOB:** _____ **F** **M**

Child's Name : _____ **DOB:** _____ **F** **M**

Phone Number: _____

You should not receive the Influenza vaccine if any of the following apply:

- You have ever had a serious allergic reaction to eggs, formaldehyde, gelatin, or to a previous dose of influenza vaccine.
- You have a history of Guillain-Barre Syndrome (GBS).
- You are ill.
- **Possible reaction:**
- Mild: Soreness or redness at the site of the shot, fever, body aches
- Severe: Acute allergic reaction – high fever, confusion, difficulty breathing, hives, and rapid heartbeat would occur within a few minutes of the shot
- Guillain-Barre Syndrome – progressive muscle weakness and paralysis may occur a week after the vaccine. This occurs in 1-2 cases per million persons vaccinated.

SCREENING QUESTIONNAIRE

Are you ill today?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you allergic to eggs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had a severe reaction to a flu vaccine?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you had Guillain-Barre Syndrome?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you allergic to latex?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had a severe reaction to formaldehyde?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had a severe reaction to gelatin?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Billing:

Flu Shots for our pediatric patients are submitted to your insurance. As a courtesy, we offer immunizations to members of the patient's household as an out of network service. The cost of the flu vaccine is \$70.00 and must be paid at time of service. It will not be submitted to your insurance.

Consent:

I, the undersigned, have read or had explained to me the vaccine information sheet. I understand the risks and benefits associated with the influenza vaccine and have had any questions satisfactorily answered. I understand the vaccination I am to receive is a single shot for adults and I voluntarily request the vaccine be given to me. I understand I will be pay in full at time of service.

Patient Signature: _____ **Date:** _____

Product: .5mL Fluzone QIV **Manufacturer:** Sanofi Pasteur **Exp:** _____ **Lot#:** _____

Administered by: _____ **Date:** _____



Influenza Vaccine Information Sheet

What is influenza? Influenza is a serious respiratory disease caused by a virus. It is not the same as the common cold or an intestinal illness.

Influenza may be contagious for 24 hours before any symptoms develop. It is transmitted through coughing, sneezing, or nasal secretions. Though everyday preventive actions (e.g., handwashing) can help prevent transmission of many types of germs, the best way to avoid influenza infection is to get vaccinated.

Who should get vaccinated? Annual vaccination against influenza is recommended for all people age 6 months or older who do not have a contraindication to the vaccine.

It is important that everyone age 6 months and older be vaccinated for their own protection, as well as the protection of those they love and those who are especially vulnerable to the complications of influenza (pregnant women, infants under 6 months of age, those 65 years of age and older, and those with chronic underlying health conditions or a weakened immune system).

Influenza viruses are always changing, so annual vaccination is recommended. Each year scientists try to match the viruses in the vaccine to those most likely to cause flu that year.

Some inactivated influenza vaccine contains a preservative called thimerosal. The vaccine we carry in our office and are providing for our MPS families is completely thimerosal-free.

It takes up to 2 weeks for protection to develop after the shot. Protection lasts about a year.

A vaccine, like any medicine, could possibly cause serious problems, such as severe allergic reactions.

Serious problems from inactivated influenza vaccine are very rare. The viruses in inactivated influenza vaccine have been killed, so you cannot get influenza from the vaccine.

For more information, please refer to the Vaccine Information Statement provided by the Centers for Disease Control (CDC) at <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/flu.pdf>