

# Union Street Family Medical Practice Seasonal Influenza Vaccination Program 2024

## Seasonal Influenza Vaccine Consent Form 2024

**Staff member details** (Please use black or blue ink to complete the following details)

Surname		First Name	
Date of Birth		Gender	
		Contact Number	
Medicare Number	_____		
- Position on card	_____		
- Expiry date	___/___/___		

### Vaccination Checklist

Please answer the following questions – if you have any concerns please discuss these with your vaccination provider

	Yes	No
1. Have you received a seasonal influenza vaccine in the past?		
2. Have you received a seasonal influenza vaccine since 1 March this year?		
3. Have you had anaphylaxis following any vaccination in the past?		
4. Have you had a severe reaction following any vaccination in the past?		
5. Do you feel unwell today?		
6. Do you currently have a fever $\geq 38.5C$ ?		
7. Do you have an allergy to eggs?		
8. Are you currently immune-compromised?		
9. Do you have a bleeding disorder?		
10. Do you have a severe allergy to anything?		
11. Do you have a past history of Guillain-Barré syndrome?		
12. Are you aged 65 years and over? (You should receive the Flud Quad vaccine for people aged 65+)		

I, ..... (Print name) **consent** to have the influenza vaccination and declare that I have:

- Read and understood the influenza vaccine fact sheet provided to me (including possible side effects of the vaccination)
- Had the opportunity to discuss medical concerns with my vaccination provider
- Responded to the questions above to the best of my ability and the answers to them are true and accurate

I consent to be vaccinated with the influenza vaccine.

Signed ..... Date .....

I, ..... (Print name) **decline** to be vaccinated with the influenza vaccine.

Under PD2020\_017 Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases workers in category A High Risk positions are required to receive the influenza vaccine by 1 June each year.

I understand that if this requirement applies to my position I may be:

- Required to wear a surgical mask during the influenza season while providing patient care; or
- Be deployed to a non – high risk clinical area for the duration of the influenza season.

Signed ..... Date .....

Vaccination details (Staff Health use only)	
Date of vaccination.....	Time of vaccination..... Site L / R Deltoid (please circle)
Batch Number (place sticker or write batch number here) .....	Expiry Date.....
Name of vaccinator.....	Signature of vaccinator.....

# Union Street Family Medical Practice Seasonal Influenza Vaccination Program 2024

## INFORMATION SHEET - INFLUENZA VACCINATION 2024

### Background

Annual influenza vaccination is highly recommended for all healthcare workers and is mandatory for NSW staff who work in Category A – High Risk positions. These include:

1. Antenatal, perinatal and post-natal areas including labour wards, recovery rooms and antenatal outreach programs
2. Neonatal intensive care units; special care units; any home visiting health service provided to neonates
3. Paediatric intensive care units
4. Transplant and oncology wards
5. Intensive care units
6. Multipurpose Services
7. NSW Health Residential aged care facilities (except where there is a public health order in place)

Workers in these positions are required to receive the influenza vaccine by 1 June each year. Workers in these positions that are unable to be vaccinated or decline the vaccine must be managed in one of the following ways (refer to section 4.1 for exception) for the duration of the influenza season (1 June – 30 September):

- Re-deployment to a non-category A High Risk position; OR
- Wear a surgical mask while providing patient care.

Additional information is available from the [NSW Health webpage](#).

If you receive the influenza vaccine outside of your NSW Health workplace please provide a copy of your evidence to the staff health unit so that it can be added to your staff health record.

### Influenza vaccine for people aged 65 years and over

Under the National Immunisation Program all people aged 65 years and over are recommended to receive an enhanced influenza vaccine. In 2023 Fludax<sup>®</sup> Quad is the enhanced vaccine offered. Fludax<sup>®</sup> Quad has been specifically designed to produce a higher immune response in people 65 years and over and is not licensed for use in younger individuals.

### Side effects of influenza vaccine

***The flu vaccine does not contain any live virus therefore you cannot get the flu from receiving the vaccine.***

Like all medications, influenza vaccination can cause side effects. Local side effects may include pain, tenderness, redness, swelling, bruising and hardness at the injection site. Other symptoms may include feeling unwell, muscle aches, headache, chills or fever. These usually indicate that your immune system is responding to the vaccine. Side effects usually resolve in a day or two, if they continue or you are concerned seek medical care.

### Contraindications

The only absolute contraindications to influenza vaccine are anaphylaxis to a previous dose of influenza vaccine or anaphylaxis to any component of the influenza vaccine.

### Egg allergy

People with a history of egg allergy (non-anaphylaxis) can receive an age-appropriate full dose of vaccine in any immunisation setting. People with a history of anaphylaxis to egg should receive the influenza vaccination in a medical facility with staff experienced in recognising and treating anaphylaxis. Advice in the digital edition of the Australian Immunisation Handbook should be followed.

### Previous reaction to any vaccine

If you have previously had a severe reaction following an influenza vaccination you should discuss this with your immunisation provider before receiving the vaccine. You may still be able to be vaccinated however your individual circumstances need to be considered.

### Immunocompromised

People aged ≥6 months who are immunocompromised are strongly recommended to receive annual influenza vaccine. Those who have had a haematopoietic stem cell transplant or solid organ transplant require 2 doses in their first year of vaccination. Refer to the [Immunisation Handbook](#), seek advice from the patient's specialist or NSWISS 1800 679 477.

### Bleeding disorder

Workers with bleeding disorders can usually still receive the influenza vaccination however individual circumstances need to be considered and discussed prior to receiving the vaccine. It may need to be administered in another setting or at another time. Ensure you advise your immunisation provider if you have a bleeding disorder before receiving the vaccine.