



FREE FLU SHOTS AT SCHOOL

Turn Over To Sign Consent Form



In Partnership with:
Alameda County Public Health Department | California Department of Public Health | Oakland Unified School District

HOW TO GET A FREE FLU SHOT FOR YOUR STUDENT

- ① Read all of the information on this page.
- ② Answer **all** of the questions **on the back** of this consent form. **Please fill out one form per student.**
- ③ **Sign** your name at the end of the consent form.
- ④ Give this form to your student's school right away.

SPREAD FUN! NOT FLU.

- Flu is a serious illness. Pediatricians recommend flu vaccines for all kids every year.
- Research shows that when kids get vaccinated, they miss fewer school days. Parents/guardians may miss fewer work days too.
- When kids are vaccinated for the flu it also protects the people around them, including babies and the elderly.

IT'S SAFE, EASY, AND CONVENIENT.

- The flu vaccine will be given at school, during school hours, by trained nurses and supervised nursing students.
- The vaccine is provided by the health department. It's the same vaccine your student would get from your usual doctor or clinic.
- This service is **FREE** to participants.

PARTICIPATION IS OPTIONAL. Only students with a completed consent form will get a vaccine. Only fill out a form if you want your student to be vaccinated.

BENEFITS AND RISKS. There are benefits and risks to getting a flu vaccine.

- Benefits include: It can keep your student from getting the flu and makes flu illness milder if they do get sick.
- Risks include: mild to severe reaction and side effects like pain at the injection site, fever, and aches.

Your student should not get a flu vaccine if they have had a severe/life-threatening reaction after any vaccination or have ever had Guillain-Barre Syndrome (GBS).

Review the Influenza Vaccine Information Statement (VIS) for more information - available at your student's school, the health department, and at shootheflu.org/consent.

Alameda County Public Health Department (ACPHD) Privacy Practices: Your health information is confidential and is protected by law. It is our responsibility to protect this information as required by law and to provide you with a Notice of Privacy Practices. You may find a complete copy at shootheflu.org/consent, ask for a copy from ACPHD, or see it at school on Vaccine Day.

The California Immunization Registry (CAIR) is a confidential and secure computer system run by the California Department of Public Health that makes vaccination information available to healthcare providers, including many local pediatricians. ACPHD will put information about your student's flu vaccination into CAIR as authorized by California State law. To learn more about CAIR, go to cairweb.org. Check this box if you DO NOT want your student's flu vaccination to be shared with healthcare providers who use CAIR.

If you have any questions, need copies of the VIS or Notice of Privacy Practices, or need help completing this form, please contact the Alameda County Public Health Department Immunization Program at 510-267-3230 or visit ShootheFlu.org





FLU SHOT CONSENT FORM

**** ONE PER STUDENT ****

STUDENT'S INFORMATION

Student's First Name

Student's Last Name

Student Date of Birth

Month Day Year

Age

Student is: Male Female

Home Address

Zip

Name of School

Teacher/Room #

Grade

Parent/Guardian Email

Phone #

Mother's First Name

*Mother's first name is used to help identify students in CAIR.
For more information on CAIR, see the reverse side.*

May we contact you for feedback on how to improve this program?

Yes No

STUDENT'S HEALTH INSURANCE

This service is free. Your health insurance company may help pay the cost of your student's immunization but you will not be charged.

Insurance Number

Alameda Alliance—Medi-Cal

Blue Cross—Medi-Cal

Kaiser—Medi-Cal

No insurance

United Health Care

Blue Cross—Private

Kaiser—Private

Cigna

Blue Shield

Health Net

Aetna

Other: _____

STUDENT'S RACE OR ETHNICITY (Choose all that apply)

We ask this question to help us ensure equitable access to the program.

Asian

American Indian or Alaskan Native

Black or African American

White

Native Hawaiian or Other Pacific Islander

Hispanic or Latino

MEDICAL QUESTIONS – YOU MUST ANSWER EVERY QUESTION

① Is your student allergic to latex?

Yes No

② Is your student allergic to eggs?

Yes No

③ Has your student ever had a serious reaction to any vaccine?

Yes No

④ Has your student ever had a severe muscle weakness called Guillain-Barré Syndrome?

Yes No

SIGNATURE AND CONSENT

When I (parent/guardian) sign my name, it means these things:

- I give permission for the student whose name is listed on this form to receive a flu shot at school.
- I have read or had explained to me the current Influenza Vaccine Information Statement (VIS) and understand the benefits and risks of the flu vaccine.
- I have read or received a copy of the Alameda County Public Health Department Notice of Privacy Practices.

Parent/Guardian sign here **(REQUIRED)**

Date

Printed Name

Your relationship to student:

Mother Father Legal guardian

Other: _____

Turn Over for Instructions

Influenza (Flu) Vaccine (Inactivated or Recombinant): *What you need to know*

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Influenza (“flu”) is a contagious disease that spreads around the United States every year, usually between October and May.

Flu is caused by influenza viruses, and is spread mainly by coughing, sneezing, and close contact.

Anyone can get flu. Flu strikes suddenly and can last several days. Symptoms vary by age, but can include:

- fever/chills
- sore throat
- muscle aches
- fatigue
- cough
- headache
- runny or stuffy nose

Flu can also lead to pneumonia and blood infections, and cause diarrhea and seizures in children. If you have a medical condition, such as heart or lung disease, flu can make it worse.

Flu is more dangerous for some people. Infants and young children, people 65 years of age and older, pregnant women, and people with certain health conditions or a weakened immune system are at greatest risk.

Each year **thousands of people in the United States die from flu**, and many more are hospitalized.

Flu vaccine can:

- keep you from getting flu,
- make flu less severe if you do get it, and
- keep you from spreading flu to your family and other people.

2 Inactivated and recombinant flu vaccines

A dose of flu vaccine is recommended every flu season. Children 6 months through 8 years of age may need two doses during the same flu season. Everyone else needs only one dose each flu season.

Some inactivated flu vaccines contain a very small amount of a mercury-based preservative called thimerosal. Studies have not shown thimerosal in vaccines to be harmful, but flu vaccines that do not contain thimerosal are available.

There is no live flu virus in flu shots. **They cannot cause the flu.**

There are many flu viruses, and they are always changing. Each year a new flu vaccine is made to protect against three or four viruses that are likely to cause disease in the upcoming flu season. But even when the vaccine doesn’t exactly match these viruses, it may still provide some protection.

Flu vaccine cannot prevent:

- flu that is caused by a virus not covered by the vaccine, or
- illnesses that look like flu but are not.

It takes about 2 weeks for protection to develop after vaccination, and protection lasts through the flu season.

3 Some people should not get this vaccine

Tell the person who is giving you the vaccine:

- **If you have any severe, life-threatening allergies.**

If you ever had a life-threatening allergic reaction after a dose of flu vaccine, or have a severe allergy to any part of this vaccine, you may be advised not to get vaccinated. Most, but not all, types of flu vaccine contain a small amount of egg protein.

- **If you ever had Guillain-Barré Syndrome (also called GBS).**

Some people with a history of GBS should not get this vaccine. This should be discussed with your doctor.

- **If you are not feeling well.**

It is usually okay to get flu vaccine when you have a mild illness, but you might be asked to come back when you feel better.



4 Risks of a vaccine reaction

With any medicine, including vaccines, there is a chance of reactions. These are usually mild and go away on their own, but serious reactions are also possible.

Most people who get a flu shot do not have any problems with it.

Minor problems following a flu shot include:

- soreness, redness, or swelling where the shot was given
- hoarseness
- sore, red or itchy eyes
- cough
- fever
- aches
- headache
- itching
- fatigue

If these problems occur, they usually begin soon after the shot and last 1 or 2 days.

More serious problems following a flu shot can include the following:

- There may be a small increased risk of Guillain-Barré Syndrome (GBS) after inactivated flu vaccine. This risk has been estimated at 1 or 2 additional cases per million people vaccinated. This is much lower than the risk of severe complications from flu, which can be prevented by flu vaccine.
- Young children who get the flu shot along with pneumococcal vaccine (PCV13) and/or DTaP vaccine at the same time might be slightly more likely to have a seizure caused by fever. Ask your doctor for more information. Tell your doctor if a child who is getting flu vaccine has ever had a seizure.

Problems that could happen after any injected vaccine:

- People sometimes faint after a medical procedure, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting, and injuries caused by a fall. Tell your doctor if you feel dizzy, or have vision changes or ringing in the ears.
- Some people get severe pain in the shoulder and have difficulty moving the arm where a shot was given. This happens very rarely.
- Any medication can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

5 What if there is a serious reaction?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would start a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 and get the person to the nearest hospital. Otherwise, call your doctor.
- Reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS does not give medical advice.

6 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling **1-800-338-2382** or visiting the VICP website at www.hrsa.gov/vaccinecompensation. There is a time limit to file a claim for compensation.

7 How can I learn more?

- Ask your healthcare provider. He or she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/flu

Vaccine Information Statement
Inactivated Influenza Vaccine

08/07/2015

42 U.S.C. § 300aa-26

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