



1275 S. State Street, Dover, DE 19901
phone (302) 678-1303 fax 1(844) 874-2722

301 Jefferson Avenue, Milford, DE 19963
phone (302) 430-5705 fax 1(844) 874-2722

632 Mulberry St, Milton, DE 19968
phone (302) 684-3812 fax 1(844) 874-2722

Patient Label

FLU VACCINATION CONSENT FOR 2019-2020 SEASON

Bayhealth is offering flu vaccinations this fall. The vaccination has been standardized to the United States Public Health Service requirements for the 2019-2020 influenza season. This year, the flu vaccine is representative of the following strains of influenza: Two Strains of Influenza A (A/Brisbane/02/2018 (H1N1)pdm09-like virus and A/Kansas/14/2017 (H3N2)-like virus) and two strains of Influenza B (B/Colorado/06/2017-like (Victoria lineage) virus and B/Phuket/3073/2013-like (Yamagata lineage) virus). Center for Disease Control and Prevention (CDC) recommends flu vaccinations for all persons age 6 months and older. It is even considered more important for certain individuals (e.g. healthcare workers, persons with morbidities, pregnant individuals, others) to be immunized against influenza each year.

WARNING: This vaccine should not be given to:

- ★ Anyone with a serious hypersensitivity (*allergy*) to eggs or egg products (**egg-free vaccine is available**)
- ★ Anyone with a history of serious hypersensitivity (*allergy*) to latex (**latex-free vaccine is available**)
- ★ Anyone with a severe illness
- ★ Anyone with a history of severe reaction to the flu shot or any other injectable medication in the past
- ★ Anyone with a prior history of Guillain-Barre Syndrome (*a severe paralytic illness*)
- ★ Anyone with a fever of 100.4° or greater should wait to be vaccinated until the fever subsides

Printed name: _____ Date of birth: _____

Please indicate: Employee #: _____ Contractor Volunteer Non Employed Medical Staff

Please indicate which campus you work /volunteer at: Kent General Milford Memorial Both campuses

Do you anticipate working/entering Milford Campus Rehab Care from Oct-March this season? No Yes

Do you anticipate working/entering the Kent Campus Dialysis unit from Oct-March this season? No Yes

I acknowledge that I have received information about influenza and the risks and benefits of the vaccination. I have read all the warnings above; have received a copy of the CDC's Vaccination Information Statement (VIS). I have had the opportunity to ask questions and if asked, my questions have been answered to my satisfaction. I have been advised that if I have any question at all about this vaccination or my ability to receive it, I should not receive the vaccination today, but should first consult with my physician.

ACCEPT - I understand that my signature below indicates that I accept the recommended influenza vaccination.

ALREADY RECEIVED VACCINATION FOR 2019-2020 INFLUENZA SEASON - fax proof and form to 1(844) 874-2722

DECLINE - I understand that my signature below indicates that I decline the recommended influenza vaccination.

DECLINING FOR MEDICAL REASONS **DECLINING FOR RELIGIOUS REASONS**

I understand that without receiving the influenza vaccine, I may be at risk of acquiring influenza. I have been given the opportunity to be vaccinated with the indicated vaccine, however, I **decline the vaccination at this time**. I understand that by declining this vaccination, I continue to be at risk of acquiring influenza and transmitting it to others. My signature below serves as a declination to receiving the recommended influenza vaccination. I accept to follow Bayhealth's policy and procedure (#B9806-9807.16) for not having received the vaccination.

Patient's signature: _____ Date: ____/____/____

Manufacturer: GSK Sanofi Pasteur bioCSL Protein Sciences Seqirus CSL Behring

Expiration date: ____/____/____ Lot number: _____

Brand: _____ Flucelvax (egg/latex free) Afluria (latex free) Flublok (egg free)

Injection site: Right deltoid Left deltoid Administered 2019-2020 sticker on badge: Yes No

Administered by: _____ Date: ____/____/____ Time: _____

Occupational Health mail code: #3050

Bayhealth Influenza Clinic 2019-2020

Response is required by November 1st, 2019

I want to be vaccinated for the 2019-2020 season– what do I do?

Flu shots are offered free of charge to all employees, volunteers, contractors, and medical staff in the Occupational Health offices and also in posted Bayhealth Influenza Clinics. You must have your Bayhealth badge with you in the offices or clinics in order to be vaccinated. **All flu shots at Bayhealth Influenza Clinics and in all Occupational Health offices are latex free, egg free, preservative free, and four strain this year.** Please call or e-mail Kristen Weeks at (302) 678-1303 option #3 with questions.

I'm already vaccinated for 2019-2020 – what do I do?

If you have already been vaccinated for the 2019-2020 season, your documentation must be turned into along with this attached form. Documentation should be taken to Bayhealth Influenza Clinics listed on BayNet or to either Occupational Health office. Please bring your Bayhealth badge with your documentation in order for the flu sticker to be administered. *We will not interoffice flu stickers.*

I want to decline the flu shot – what do I do?

If you wish to decline the flu shot for the 2019-2020 Influenza season, please complete this form and return it to Dover Occupational Health to update your employee file. If you are declining for medical or religious reasons, please indicate this on the form. *Medical and religious exemption forms are not required this year. Individuals who decline the flu shot will be required to wear a mask during flu season as per policy B9806-9807.16.*

Declination forms and documentation can be:

- Scanned and e-mailed to Kristen.Weeks@bayhealth.org
- Faxed to (*dial "9" first on hospital fax machines*) to fax number 1(844) 874-2722
- Bayhealth inter-office mail to Dover Occupational Health #3050– attention Kristen
- Mailed to: Dover Occupational Health – attention Kristen
1275 S. State Street
Dover, DE 19901

Please contact Dover or Milford Occupational Health with any questions

- Dover Occupational Health: (302) 678-1303
- Milford Occupational Health: (302) 430-5705

Updated 8/2019 KNW