

**IMMUNIZATION CONSENT FORM**  
**Influenza Virus Vaccine 2011-2012 Formula**

<b><u>Precautions and Contraindications:</u> Please check YES or NO for each questions.</b>	<b>YES</b>	<b>NO</b>
1. Do you have any known sensitivity to any components of the influenza virus vaccine?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you allergic to chicken eggs, egg products, neomycin or polymyxin?	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you allergic to Thimerosal (cleaning products or contact lens solution)?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you have a cold, fever, or acute illness?	<input type="checkbox"/>	<input type="checkbox"/>
5. Has a physician instructed you not to have a flu shot?	<input type="checkbox"/>	<input type="checkbox"/>
6. Do you have a history of Guillain-Barré Syndrome or active neurological disorder?	<input type="checkbox"/>	<input type="checkbox"/>
7. Have you had an adverse reaction to another vaccine?	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you pregnant or do you suspect you are pregnant? (if "YES," please talk to the nurse before receiving this vaccine.)	<input type="checkbox"/>	<input type="checkbox"/>

**CONTACT YOUR PHYSICIAN AND/OR HEALTHCARE PROVIDER BEFORE RECEIVING THIS VACCINE IF YOU CHECKED "YES" ON ANY OF THE ABOVE QUESTIONS.**

**INFLUENZA VACCINE ADVERSE REACTIONS**

Because influenza vaccine contains only non-infectious purified viral proteins, it cannot cause influenza. An occasional case of respiratory disease following immunization represents coincidental illnesses unrelated to influenza immunization.

**LOCAL SYMPTOMS:** slight tenderness, redness or hardening at the site of injection lasting for 1 to 2 days may occur in less than one third of recipients.

**SYSTEMIC SYMPTOMS:** Fever, malaise, myalgia, and other systemic symptoms occur infrequently and most often affect persons who have had no exposure to the influenza virus antigens in the vaccine (e.g., young children). These reactions generally begin 6 to 12 hours after immunization and can persist for 1 to 2 days.

Immediate, presumable allergic reactions such as hives, angioedema, allergic asthma, or systemic anaphylaxis occur rarely after influenza immunization. These reactions probably result from hypersensitivity reactions in people with severe egg allergy and such people should not be given influenza vaccine. This includes people who develop hives, have swelling of the lips or tongue, or experience acute respiratory distress or collapse after eating eggs. People with documented immunoglobulin E (IgE) – mediated hypersensitivity to eggs, including those who have experienced occupational asthma or other allergic responses from occupational exposure to egg protein, may also be at increased risk of reactions from influenza vaccine.

**CONTRAINDICATIONS: INFLUENZA VIRUS IS PROPAGATED IN EGGS FOR THE PREPARATION OF INFLUENZA VIRUS VACCINE; THUS, THIS VACCINE SHOULD NOT BE ADMINISTERED TO ANY ONE WITH A HISTORY OF HYPERSENSITIVITY TO ANY COMPONENT OF THE VACCINE INCLUDING THIMEROSAL.**

**CONSENT FOR SERVICES**

I have read the adverse reactions associated with the influenza vaccine. A copy of the vaccine manufacturer's drug information sheet is available on request. Furthermore, I have also had an opportunity to ask questions about this immunization. I believe the benefits outweigh the risks and I voluntarily assume full responsibility for any reactions that may result.

PRINT NAME: \_\_\_\_\_

LOYOLA ID #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**INFLUENZA VACCINE**

Right Deltoid \_\_\_\_\_ (Nurse Initials)

Left Deltoid \_\_\_\_\_ (Nurse Initials)

**Lab Use**

DATE: \_\_\_\_\_

Manufacturer: Novartis

LOT NO.: 11073P

EXP. DATE: 5/2012

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