

VACCINATING HEALTH WORKER - STAGE 2

Vaccination prompt card

DETAILS

Please tell me your/child's:

- Full name
- Date of birth
- Address

How old are you? (For children and adolescents)

Check details match consent form/AIR

Confirm they have seen registered healthcare professional for full screening and informed consent.

If not, call supervisor before continuing with questions.

SPACING

Refer to VHW stage 1 prompt card for HPV/Tdap information

Are you/your child well today?
Which vaccine have you come for today?
Have you had this vaccine before?
How did you feel after your last vaccination? Consider lying down if history of fainting
Have you had any other vaccines in past month? If yes, check spacing. MMR: Min 4-week gap between live vaccines.

Flu: 1 dose per flu season

MMR

Did the RHP* ask you about diseases or medications that could affect your immune system, and check re pregnancy?

INFLUENZA

Ensure your RHP has told you which brand of flu vaccine to use. Check funded or unfunded.

COVID-19

Comirnaty 30mcg (12+ years): Used for single primary dose and additional doses (when indicated) 6 months apart).
Comirnaty 10mcg (5-11 years): Used for single primary dose.

COVID-19

Have you had a COVID-19 infection or COVID-19 vaccination in the past 6 months?
 Recommended to wait 6 months post-vaccination and consider delaying 6 months post-infection.

WAIT TIME

Have you had a severe allergic reaction to a medication or vaccine before?
If yes, check with supervisor. Those with history of reactions wait 30 minutes. Supervisor to identify this.

Check with your supervisor for reduced wait times. 5-minute wait time criteria:

- No history of severe allergic reactions
- Assessed at 5 minutes for post-vaccination reactions
- Know when and how to seek post-vaccination advice
- Accompanied by an adolescent or adult for first 15 minutes post-vaccination
- No driving, riding or operating machinery for 15 minutes
- Able to contact emergency services if required.

MMR

15-minute wait

Can be reduced to 5 minutes if meets specific criteria (see left)

INFLUENZA

15-minute wait

Can be reduced to 5 minutes if meets specific criteria (see left)

COVID-19

15-minute wait

Can be reduced to 5 minutes if meets specific criteria (see left)

DETAILS

Have you had a chance to ask any questions?
Do you have any further questions?

CONSENT

Did you tell the RHP you consent to having the vaccine? Do you still consent to having the vaccine?
Which arm do you prefer to have the vaccine in?
Are you ready to proceed?

*RHP=registered health professional