2023 Great River Health Influenza Vaccination Declination Statement

If declining flu shot, please complete entire lower portion.

Seasonal influenza vaccinations are currently offered to all Southeast Iowa Regional Medical staff at no cost. Seasonal influenza can be spread to others up to 24 hours <u>prior</u> to the onset of symptoms. Seasonal influenza may result in hospitalization and even death.

I understand the **purpose** of obtaining a seasonal influenza vaccine is to decrease the risk of:

- Spreading influenza to patients, co-workers, family members and others who could become ill, hospitalized, or die as a result of influenza
- Getting influenza, myself, which may lead to hospitalization, or even death

I understand:

- Influenza vaccine does not cause the flu.
- Pregnancy, breastfeeding and/or being immunocompromised are **not** contraindications to receiving the influenza vaccine. The influenza vaccine is specifically recommended for these high-risk people.
- A yearly influenza vaccination is strongly recommended by The Centers for Disease Control and Prevention (CDC).

I am declining the offer of the influenza vaccine for the following reasons: (Please circle appropriate response below.)

- A. I received the influenza vaccine through another source. (Must provide documentation to Employee Health.)
- B. I have a severe allergy to eggs or a vaccine component, or have a history of being diagnosed with Guillain-Barre Syndrome.
- C. I am concerned about potential side effects and/or the safety of the vaccine.
- D. I do not believe in vaccines.
- E. I never get the flu.
- F. I dislike needles and/or shots.
- G. I believe the influenza vaccine can give me the flu.

H. Other		
I know if I change my mind ab me.	out not receiving the influenza vaccine, I can obtain	in the vaccine in Employee Health at no cost to
Print Name	Signature of person declining flu shot/relation	nship to employee Date Signed
Employee ID Number	Campus/Department	Birth date