

Henderson County Department of Public Health Flu Vaccine Consent Form

Questions? 828-694-6006
www.HendersonCountync.gov/health/page/flu-influenza

1. Name of Patient Receiving Vaccine: Last Name _____ First Name _____
 Age: _____ Date of Birth: _____ Gender: Male Female Ethnicity: Hispanic Non-Hispanic
 Race: African Am Am Indian/Alaskan Native Asian Native Hawaiian/Pacific Islander White Other

2. Name of Parent/Guardian (If patient <18yo):
 Last Name _____ First Name _____
Mailing Address:
 Street/ PO Box _____ City _____ State _____ Zip Code _____
 Daytime Phone Number: _____

3. A. Have you or your child ever had a serious reaction to any vaccine? Yes No
 B. Do you or your child have any chronic medical conditions? If yes, explain: Yes No
 C. Have you or your child received any vaccines in the past 4 weeks? Which vaccines: Yes No

4. **Consent for Use of Protected Health Information:** I have access to the Notice of Privacy and agree to the use and disclosure of my child's personal health information for health care operations, along with the assignment of payment from the insurer listed above to Henderson County Department of Public Health.
Vaccine Authorization: I have received/viewed the Vaccine Information Statement (VIS) for the flu vaccine and had the opportunity to review and ask questions that were answered to my satisfaction. I understand the risks and benefits of this vaccine and request that flu vaccine be given to my child for whom I am authorized to make this request.

➡ Signature: _____ Date: _____

For Office Use Only

Office Use Only:	Kayla Peninger _____	Heather Masington _____	Paige Prichard _____
Is child sick today? <input type="checkbox"/> Yes <input type="checkbox"/> No	Tara Millington _____	Kayla McGuinn _____	Crystal O'Dell _____
<input type="checkbox"/> STATE Eligible	Alice Elio _____	Keri Stepp _____	
<input type="checkbox"/> PRIVATE Eligible	Amber Reece-Young _____	Kim Berry _____	
DATE of Flu VIS: <u>8/7/2015</u>	Amy Chandler _____	Julia Mae Hope _____	
<input type="checkbox"/> NCIR Entered	Bethany Markey _____	Vicki Power _____	
Vaccine: _____	Susan Stansberry _____	Jeanna Johnston _____	
Lot Number: _____	Melanie McMurray _____	Megan Sales _____	
Route/Site: _____	Meredith Harding _____	Susie Lewis _____	
Date: _____	Bremner _____	Kristina Henderson _____	

09/2020