TO RECEIVE VACCINATIONS THE CLIENT MUST MEET THE FOLLOWING REQUIREMENTS:

E TETANUS AND DIPHTHERIA VACCINE (Td)  E TETANUS, DIPHTHERIA, PERTUSSIS (TdaP) (sub for 1 Td)

The client:
Has NEVER had a serious allergic reaction or other problems with Td, or any other Tetanus/diphtheria vaccine (DTP, DTaP, TdaP, or DT). Is NOT moderately or severely ill. Has NEVER had a fever (104°F) within 48 hours after vaccination with a prior Td, TdaP, or DTaP dose. Has NEVER had a collapse or shock-like state within 48 hours of receiving a Td dose. Has NOT had a Td within the last 10 years. Caution in latex allergy. TDAP can be given during pregnancy though recommendations are after 20 weeks gestation and the optimal time is after 27 weeks gestation.

Mfr: Lot#: Dosage: Site:
1st Dose: RA LA 1.0 ml IM
2nd Dose > 1 mo RA LA 1.0 ml IM
3rd Dose > 5mo after 2nd RA LA 1.0 ml IM

Hepatitis B 0, 1-2, 4-6  Hepatitis A & B Combo 0, 1-2, 4-6 <OR> 0, 7 days, 21-30 days, 12 mo

The client:
Is NOT pregnant or breastfeeding, NOT allergic to yeast, not sensitive to Mercury (Thimerosal), NOT moderately or severely ill, NOT had an allergic reaction to a previous dose of Hepatitis B.

Mfr: Lot#: Dosage: Site:
1st Dose: RA LA 0.5ml SC
2nd Dose > 1 mo RA LA 0.5ml SC
2nd Dose > 5mo after 1st RA LA 0.5ml SC

Varicella (Chicken Pox)

The client:
Has NEVER had a severe allergic reaction to gelatin, the antibiotic neomycin, or previous Varicella vaccine. Is NOT moderately or severely ill. Is NOT pregnant. Plan on avoiding pregnancy for 1 month after vaccine. Does NOT have HIV/AIDS, a weakened immune system, cancer, not currently taking steroids, or receiving radiation therapy, no recent blood transfusion.

Mfr: Lot#: Dosage: Site:
1st Dose: RA LA 0.5ml SC
2nd Dose > 1 mo RA LA 0.5ml SC

Measles – Mumps – Rubella (MMR)

The client:
Has NEVER had a severe allergic reaction to gelatin, the antibiotic neomycin, or previous MMR vaccine. Is NOT moderately or severely ill. Is NOT pregnant. Plan on avoiding pregnancy for 4 wks after vaccine. Does NOT have HIV/AIDS, a weakened immune system, cancer, not currently taking steroids, or receiving radiation therapy, no recent blood transfusion. NEVER had a low platelet count.

Mfr: Lot #: Dosage: Site:
1st Booster: RA LA 0.5ml SC
2nd Booster:

TB SKIN TEST – MUST BE READ 48-72 HOURS AFTER ADMINISTRATION (PLEASE INITIAL ______________)

Yes No Unk

Unusual fatigue for more than 2 weeks?
Weight loss (unrelated to dieting)?
Loss of appetite for more than 2 weeks?
Persistent cough for longer than 2 weeks?
Blood streaked sputum?
Fever associated with cough for more than 1 week?
Night sweats?
Other unusual symptoms?

Interpretation of Results

Read only area of induration (raised area) not redness

mm induration Neg Pos

HIV/AIDS, a weakened immune system, cancer, not currently taking steroids, or receiving radiation therapy, no recent blood transfusion.