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## FluMIST® (NASAL SPRAY) CONSENT FORM

**Please answer the following questions to allow us to assess your suitability to receive the FluMIST® vaccine:**

- |   |     |                          |    |                          |
|---|-----|--------------------------|----|--------------------------|
| 1. Is this the first time you have received the the influenza vaccination?  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2. Are you well today?  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3. Have you ever experienced any significant problems after any vaccination?  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4. Are you allergic to any of the following: excipients (e.g. gelatin), gentamicin (a trace residue), eggs or egg proteins? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

**If yes, please specify** .....

- |  |     |                          |    |                          |
|--|-----|--------------------------|----|--------------------------|
| 5. Have you ever had Guillain Barre Syndrome?  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 6. Are you, or anyone that you live or work in close contact with, moderately or severely immunocompromised? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 7. Are you receiving oral salicylate therapy (e.g. Aspirin)?   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 8. Are you booked in for or have recently had a cochlear implant?  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

### POSSIBLE SIDE EFFECTS OF VACCINATION

Like all medicines, the FluMIST® vaccine can cause side effects, although not everybody gets them. The most common side effects of the FluMist® vaccine include:

- Upper respiratory and nasal symptoms: runny nose, nasal congestion or sore throat.
- Systemic symptoms: mild headache, tiredness or reduced appetite.

**These side effects usually resolve within a few days. If events continue or become severe, or if you notice something not listed in this leaflet, please tell your doctor.**

**There is no difference between Flumist®/LAIV and inactivated influenza vaccine in regards to serious adverse events.**

**It is recommended that all people who receive a Flumist® vaccine remain in the vicinity for 15 minutes in case of an allergic response.**

#### What to do to reduce side effects?

- Drink extra fluids
- Rest
- Do not overdress if hot
- Seek further advice from your doctor if concerned
- Paracetamol can be given as per the instructions on the bottle/pack

### I HAVE READ AND UNDERSTOOD THE ABOVE INFORMATION AND CONSENT TO RECEIVING THE FLUMIST® VACCINE

Full Name:  DOB:  /  /  Age:

Signature:  Date:  /  /

Doctors Name:

Doctor Signature:  Date:  /  /

Brand:	Site given:	Administered by:
LOT/ Exp:	Funded : YES / NO	Signature: