**TEMPLATE ONLY**

This template is not legal advice. Talk to your attorney for guidance.

# COVID-19疫苗筛选与协议

此表收集的信息将用于记录您已接种疫苗的情况。您的疫苗接种信息可能通过明尼苏达州免疫信息收集 (MIIC) 与其他医疗保健提供者、学校、卫生部门以及法律授权接收此信息的其他方共享。如有任何疑问，请咨询医生或其他医疗保健提供者。如有 MIIC 相关问题，请参见[MIIC 和 Public 页面 (www.health.state.mn.us/people/immunize/miic/public.html)](https://www.health.state.mn.us/people/immunize/miic/public.html)或致电 1-800-657-3970 了解。

**福利分配与支付责任**：这让我们可以向您的健康计划或公司开具账单并直接收到款项。

本人授权该医疗保健提供者代表本人向我的健康计划或其他付款方开具账单，并接收授权福利的款项。

## 疫苗接种者的联系信息

患者姓名（姓氏、名字、中间名）：

出生日期：

年龄：

主要电话号码：

地址（街道或邮政信箱）：

城市：

州：

邮政编码：

母亲姓名（姓氏、名字、中间名，适用于年龄不满 18 岁者）：

母亲的婚前姓氏（适用于年龄不满 18 岁者）：

## 支付信息

请携带保险卡！

**主要保险公司**：

保单/ID/会员编号：

团体编号：

**次要保险公司**：

保单/ID/会员编号：

团体编号：

**保单持有人（如果与疫苗接种者不同）：**

姓名：

出生日期：

公司付款：

公司名称：

☐如果疫苗接种者未投保，请勾选此框。

## 协议

在下方签署即表示本人理解、承认、批准并同意：

* 我已收到、阅读或者工作人员已向我解释下列COVID-19疫苗的紧急使用授权告知书：[插入疫苗产品名称]。
* 我有机会提问且问题答案令我满意。我了解所述COVID-19疫苗的优势与风险。
* 我同意为自己或上述人员接种COVID-19疫苗。

患者或父母/监护人签名：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_日期：\_\_\_\_\_\_/\_\_\_\_\_\_ /\_\_\_\_\_\_

## 健康史

如果上述任何问题的答案是“是”，那么在您接种疫苗前给您注射疫苗的人可能需要您提供更多信息：

| **是** | **否** | **不知道** | **问题** |
| --- | --- | --- | --- |
| 是 | 否 |  | 您的年龄适合接种COVID-19疫苗吗？* 辉瑞疫苗：必须年满6个月或以上。
* 莫德纳疫苗：必须年满6个月或以上。
* 诺瓦瓦克斯疫苗：必须年满12周岁。
 |
| 是 | 否 | 不知道 | 您是否感染了艾滋病毒，有其他的免疫功能受损症状或者正在服用免疫抑制药物/接受免疫抑制治疗？ |
| 是 | 否 | 不知道 | 接种第一剂后出现严重过敏反应（如过敏症）或对COVID-19疫苗的某成分严重过敏？ |
| 是 | 否 | 不知道 | 是否之前在接种COVID-19疫苗后有即刻的不严重过敏反应（发生于接种后4小时以内）或对COVID-19疫苗的任何一成分或原料有已知的（确诊的）过敏？ |
| 是 | 否 | 不知道 | 是否对于任何其他疫苗（非新冠疫苗）或者注射治疗（例如肌肉注射、静脉注射或皮下脂肪组织注射）有即刻的过敏反应？打脱敏针不包括在内。 |
| 是 | 否 | 不知道 | 今天是否感觉不适？ |
| 是 | 否 | 不知道 | 是否在感染COVID-19后有并发多系统炎性综合征的病史？ |
| 是 | 否 | 不知道 | 在之前接种过一剂莫德纳、辉瑞BNT或诺瓦瓦克斯COVID-19疫苗后是否并发心肌炎或心包炎的病史？ |
| 是 | 否 | 不知道 | 您在最近4周内是否接种过任何其他疫苗？ |
| 是 | 否 | 不适用 | 是否接种过一剂COVID-19疫苗？如果是，列出疫苗产品和接种日期： |

**请不要在此线以下书写。**

## Vaccine information

| **COVID-19 Vaccine Presentation1** | **EUA Fact Sheet Date** | **Route2** | **Manufacturer3** | **Lot Number** | **Admin Site4** | **Person Admin5** |
| --- | --- | --- | --- | --- | --- | --- |
| COVID-19 Comirnaty (Pfizer) 12 years and older (gray cap), 0.3 mL |  | IM | PFR |  |  |  |
| COVID-19 Pfizer 5-11 years (blue cap), 0.3 mL |  | IM | PFR |  |  |  |
| COVID-19 Pfizer 6 months – 4 years (yellow cap), 0.3 mL |  | IM | PFR |  |  |  |
| COVID-19 Spikevax (Moderna) 12 years and older (blue cap/blue label), 0.5 mL |  | IM | MOD |  |  |  |
| COVID-19 Moderna 6-11 years (blue cap/green label), 0.25 mL  |  | IM | MOD |  |  |  |
| COVID-19 (Novavax), 0.5 mL |  | IM  | NVX |  |  |  |

1. **COVID-19 Vaccine Presentation** = lists specific product name (e.g., Pfizer, Moderna, Novavax, etc.)
2. **Route:** IM = Intramuscular
3. **Manufacturer:** MOD = Moderna, PFR = Pfizer, NVX= Novavax
4. **Site Vaccine Given:** LD = Left Deltoid, RD = Right Deltoid, LT = Left Thigh, RT = Right Thigh
5. **Signature or initials of person administering vaccine:** Can be used if more than one person is administering vaccines.

Signature and title of person administering vaccine: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date administered: \_\_\_/\_\_\_/\_\_\_\_\_\_\_\_

## Information for health care professionals about the pre-vaccination form for COVID-19 vaccine

[For health care providers, not for the patient]

This information is derived from the [CDC: Use of COVID-19 Vaccines in the United States (www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html)](https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html). We will reference this document as CDC’s Interim Clinical Considerations below and note specific sections where information can be found.

### Age

Follow recommendations for vaccine administration to authorized age groups found under each vaccine product’s emergency use authorization (EUA) or package insert. For Moderna, Novavax and Pfizer-BioNTech COVID-19 vaccine primary series doses, an 8-week interval is suggested between dose one and two for immunocompetent people 6 months to 64 years of age, and especially males 12-39 years.

Immediate allergic reaction

An immediate allergic reaction to a vaccine or medication is defined as any hypersensitivity-related signs or symptoms such as urticaria (hives), angioedema (painless swelling under the skin, often happens with hives), respiratory distress (e.g., wheezing, stridor), or anaphylaxis that occur within four hours following administration.

### Have you had a severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine?

CDC considers this to be a contraindication to vaccination with COVID-19 vaccines. People with an allergy-related contraindication to one type of COVID-19 vaccine have a contraindication or precaution to the other types of COVID-19 vaccines. For additional details, refer to the following sections of CDC’s Interim Clinical Considerations: Contraindications and precautions and Appendix E: Triage of people with a history of allergies or allergic reactions. For a full list of ingredients included in COVID-19 vaccines, refer to [FDA: COVID-19 Vaccines (www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines)](https/www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines) and [CDC: U.S. COVID-19 Vaccine Product Information (www.cdc.gov/vaccines/covid-19/info-by-product/index.html)](https://www.cdc.gov/vaccines/covid-19/info-by-product/index.html).

### Have you had an immediate, non-severe allergic reaction to a previous dose or known (diagnosed) allergy to a component of the COVID-19 vaccine or any of its ingredients?

CDC considers this to be a precaution to vaccination with COVID-19 vaccines. Non-severe allergic reactions may include urticaria (hives) beyond the injection site and angioedema (visible swelling) involving lips, facial skin, or skin in other locations. Angioedema affecting the airway (e.g., tongue, uvula, or larynx) would be a **severe** allergic reaction. For additional details, refer to the following sections of CDC’s Interim Clinical Considerations: Contraindications and precautions and Appendix E: Triage of people with a history of allergies or allergic reactions. For a full list of ingredients included in COVID-19 vaccines, refer to COVID-19 vaccine-specific [FDA: COVID-19 Vaccines](https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines) and [U.S. COVID-19 Vaccine Product Information](https://www.cdc.gov/vaccines/covid-19/info-by-product/index.html).

### Immediate allergic reaction to any other vaccines (non-COVID-19) or injectable therapy (intramuscular, intravenous, or subcutaneous)? Does not include allergy shots.

People with a history of an immediate allergic reaction to a non-COVID-19 vaccine or injectable therapy that contains multiple components, one or more of which is a component of a COVID-19 vaccine, but it is unknown which component elicited the allergic reaction, have a precaution to vaccination with that COVID-19 vaccine. These people may benefit from consultation with an allergist-immunologist who can perform a more detailed risk assessment for COVID-19 vaccine receipt and possibly allergy testing. For additional details, refer to the following sections of CDC’s Interim Clinical Considerations: Contraindications and precautions and Appendix E: Triage of people with a history of allergies or allergic reactions.

### Are you feeling sick today?

There is no evidence that someone who is sick when vaccinated will decrease the vaccine’s effectiveness or increase vaccine adverse events. If a person has COVID-19 symptoms, they should isolate following current guidelines, get tested, and if necessary, seek medical care. As a precaution, when someone is moderately to severely ill, all vaccines should be delayed until the illness has improved. A person who is mildly ill (e.g., diarrhea, upper respiratory infection, etc.), can still receive a vaccine, including people who are taking an antibiotic.

People should be offered vaccination regardless of their history of symptomatic or asymptomatic COVID-19 infection, including people with prolonged post-COVID-19 symptoms. Vaccination of people with known current COVID-19 infection should be deferred until at least the person has recovered from the acute illness (if the person had symptoms) and they have met criteria to discontinue isolation. This recommendation applies to people who experience COVID-19 infection before receiving any COVID-19 vaccine dose. For details, including additional information on delaying vaccine doses, refer to the following section of CDC’s Interim Clinical Considerations: COVID-19 vaccination and SARS-CoV-2 infection.

### Have a history of Multisystem Inflammatory Syndrome after SARS-CoV-2 infection?

Given the lack of data on the safety of COVID-19 vaccines in people with a history of MIS-C and MIS-A, a conversation between the patient, their guardian(s), and their clinical team or a specialist (e.g., specialist in infectious diseases, rheumatology, or cardiology) is strongly encouraged to assist with decisions about the use of COVID-19 vaccines. Additional details can be found in the following section of CDC’s Interim Clinical Considerations: COVID-19 vaccination and MIS-C and MIS-A section.

### Have a history of myocarditis or pericarditis after a previous dose of Moderna, Pfizer-BioNTech, or Novavax COVID-19 vaccine?

CDC considers this to be a precaution to vaccination with mRNA COVID-19 vaccines (i.e., Moderna or Pfizer-BioNTech) or Novavax COVID-19 vaccine. Refer to their primary care provider to receive an assessment of their current health condition and assessment of individual benefits and risks. For more details, refer to the following section of CDC’s Interim Clinical Considerations: COVID-19 vaccination and myocarditis and pericarditis.

### Have you had any other vaccinations in the last 4 weeks?

Because of the observed risk for myocarditis after receipt of ACAM2000 orthopoxvirus vaccine and mRNA (i.e., Moderna and Pfizer-BioNTech) and Novavax COVID-19 vaccines and the unknown risk for myocarditis after JYNNEOS, people, particularly adolescent or young adult males, might consider waiting 4 weeks after orthopoxvirus vaccination (either JYNNEOS or ACAM2000) before receiving a Moderna, Novavax, or Pfizer-BioNTech COVID-19 vaccine. However, if an orthopoxvirus vaccine is recommended for prophylaxis in the setting of an outbreak, orthopoxvirus vaccination should not be delayed because of recent receipt of a Moderna, Novavax, or Pfizer-BioNTech COVID-19 vaccine; no minimum interval between COVID-19 vaccination with these vaccines and orthopoxvirus vaccination is necessary.

### Have you ever received a dose of COVID-19 vaccine?

Refer to the following sections of CDC’s Interim Clinical Considerations: COVID-19 vaccination overview and timing, spacing and interchangeability. Verify a person’s age, what vaccine they have received, and the date(s) of prior dose(s) to assure the correct vaccine product and dose interval is used.

### Other considerations

* **Chronic health condition** – is not a contraindication or precaution for vaccination.
* **Immunocompromised conditions** (e.g., HIV infection, immunosuppressive medications, or therapies, etc.) – immunocompromised people age 6 months and older should receive a COVID-19 vaccine series as soon as possible. They should be counseled regarding the potential for reduced immune responses and that the vaccine may not fully protect them. People need to continue to follow current guidance to protect themselves.
	+ **Moderately or severely immunocompromised** – Because the immune response following COVID-19 vaccination may differ in moderately or severely immunocompromised people, CDC has specific guidance for this population. For more details refer to the following sections of the CDC’s Interim Clinical Considerations for Use of COVID-19 Vaccines: COVID-19 Vaccines, Recommendations, and Schedule for People who are moderately or severely immunocompromised.
* **Bleeding disorder or are taking a blood thinner** – recommended to use a fine-gauge needle (23 gauge or smaller) for the vaccination, followed by firm pressure on the site, without rubbing, for at least 2 minutes.
* **Dermal filler(s)** – advise to contact their health care provider for evaluation if they develop swelling at or near the site of dermal filler following vaccination. For additional details, refer to the following section of CDC’s Interim Clinical Considerations: Special Populations.
* **Pregnant** – Both CDC and ACOG urge that pregnant people be vaccinated. Pregnant and recently pregnant people with COVID-19 are at increased risk for severe illness when compared with non-pregnant people. Early data supports that vaccination is well-tolerated and elicits a protective immune response. For details, refer to the following section of CDC’s Interim Clinical Considerations: Consideration involving pregnancy, lactation, and fertility.
* **Passive antibody therapy for prevention or treatment for COVID-19** – COVID-19 vaccination can be given at any time following receipt of antibody products as part of COVID-19 treatment, post-exposure prophylaxis, or pre-exposure prophylaxis once the isolation or quarantine period has been completed. For details, refer to the following section of CDC’s Interim Clinical Considerations: COVID-19 vaccination and SARS-CoV-2 infection.
* **COVID-19 vaccines and myocarditis and pericarditis** – Ongoing safety monitoring of the mRNA and Novavax COVID-19 vaccines has found increased risks of myocarditis and pericarditis, predominantly in males 12-39 years of age within the first week of receiving the second dose.

An 8-week interval between the first and second doses of an Moderna, Pfizer-BioNTech, and Novavax COVID-19 vaccine primary series may be optimal for some people ages 6 months–64 years, especially for males ages 12–39 years, as it may reduce the small risk of myocarditis/pericarditis associated with mRNA and Novavax COVID-19 vaccines.

Clinicians should consult the following section of CDC’s Interim Clinical Considerations for Use of COVID-19 Vaccines: Safety considerations for COVID-19 vaccines or the [CDC: Clinical Considersations: Myocarditis and Pericarditis after Receipt of mRNA COVID-19 Vaccines (www.cdc.gov/vaccines/covid-19/clinical-considerations/myocarditis.html)](https://www.cdc.gov/vaccines/covid-19/clinical-considerations/myocarditis.html) when deciding whether to administer aCOVID-19 vaccine to someone with a history of myocarditis or pericarditis or when a patient presents with symptoms of myocarditis or pericarditis.

Find EUA fact sheets for health care providers and recipients and caregivers at [FDA: COVID-19 Vaccines (www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines)](https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines).

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