

#### **Moderna COVID-19 Vaccine Consent and Screening**

Patient Name (print):						
Date of birth:		Age:	(must be 18	(must be 18 or older)		
The following questions will help us determine if there is any reason we should not be given the COVID vaccine and or if you will need extra time to be monitored afterward or if further counseling is necessary. If you answer "yes" to any question, it does not necessarily mean you should not be vaccinated.						
If yes to #1, observe patient f			YES	NO		
minutes.						
1. Have you ever had a serio	-	gic reaction, such as				
hives or difficulty breathir	ng, to any vaccine or shot?					
If yes to #2-#1:	1, do not vaccinate today	, and have patient c	onsult with a provid	er.		
2. Are you currently sick with						
3. In the last 10 days, have y	ou had a COVID-19 test or k	been told by a				
healthcare provider or he	alth department to isolate o	or quarantine at home				
due to COVID-19 infection	<del>-</del>					
	escent plasma or antibody t	treatment for Covid-19				
in the past 90 days?	1:6 .1					
-	us or life-threatening allerg ne or to a prior dose of Covi	· · · · · · · · · · · · · · · · · · ·	ie 🗆 🗆			
	any of the vaccine compone					
	; an allergy to polysorbate;	_		Ц		
	ious dose of COVID-19 vacci	•				
7. Are you pregnant or cons						
8. Are you breastfeeding?						
9. Have you been vaccinated						
or have you received 2 do	or have you received 2 doses of COVID-19 vaccine already?					
•	D. Do you have cancer, leukemia, HIV/AIDS, or any other immune system					
•	problem; or, in the past 3 months, have you taken medications that weaken					
the immune system, such as cortisone, prednisone, other steroids, or						
anticancer drugs?  11. Have you had any vaccine	s in the past 14 days /2 was	oks) including flu shot?				
I attest to having received inf				m full EDA		
approval. I consent to receiv		•				
, p		, , , , , , , , , , , , , , , , , , , ,				
Signature:		Today's Date:		_		
Ins Co:	Group #:	ID#·				
ms co	Group #	Ю #				
For office use only: Trade Name: Moderna COVID-19 vaccine Lot Number:						
Expired Date: Route: Intramuscular Site: R Deltoid or L Deltoid						
Administered by:						
Charlists D Varification of Phase /TimeConstituted to a set 10 / 10 of 1						
Checklist:   Verification of Phase/Tier Completed (e.g. work ID/ paystub)  Patient Packet Give						
☐ Covid-19 Vaccination Card given ☐ Date set for 2 <sup>nd</sup> vaccine, if this is the first ☐ Vaccine logged in Nextgen/ recorded in CAIRS ☐ If Omni staff, dose recorded in Smartsheet						
□ vaccine logged ili iv	CALBEIT TECUTIVE III CAINS	u ii Oiiiii staii, uu	se recorded in sindits	ncet .		

#### CONGRATULATIONS ON YOUR MODERNA COVID-19 VACCINE!



1 (800) 300-OMNI (6664) www.OmniFamilyHealth.org

This is your:					
□ 1 <sup>st</sup> of 2 vaccines; you will return on			in 4 week	s for your 2 <sup>nd</sup> vaccine	
□ 2 <sup>nd</sup> vaccine; the series is comple	te and you v	vill reac	h peak immunity	2 weeks from now	
The Moderna COVID-19 Vaccine is an una approved vaccine to prevent COVID-19. Vaccine to prevent COVID-19 in individua	The FDA has au	uthorized	the emergency use	of the Moderna COVID-19	
MODERNA COVID-19 VACCINE INFO	TELEPHONE NU	MBER	LATEST FAQ	V-SAFE	
www.modernatx.com/covid19vaccine- eua	1-866-MODERNA (1-866-663-3762)			Download the after vaccination health checker for check-ins and reminders!	
It is normal and good to have a strong imm	line recnance	It is NOT	normal for the vaccii	ne to cause these	
to the vaccine! A strong immune response may cause:  Pain/ Swelling at the site on the arm where you got the shot Fever & Chills and Tiredness/ Fatigue Headache Vomiting & Diarrhea			symptoms, and they may be signs of Covid-19 infection:  Runny/ stuffy nose Change in taste or smell Sore throat Cough or shortness of breath		
These symptoms will go away in a few days.			If you have these, STAY HOME and contact your medical provider.		

#### **REMINDERS:**

- You will need 2 shots in order for this vaccine to work. Get the second shot even if you have symptoms from an immune response after the first one, unless a vaccination provider or your doctor tells you not to get a second shot
- It takes time for your body to build protection after any vaccination. COVID-19 vaccines that require 2 shots may not protect you until a week or two after your second shot.
- It's important for everyone to continue using all the tools available to help stop this pandemic as we learn more about how COVID-19 vaccines work in real-world conditions. Cover your mouth and nose with a mask when around others, stay at least 6 feet away from others, avoid crowds, and wash your hands often.



### What is v-safe?

V-safe is a smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins after you receive a COVID-19 vaccination. Through v-safe, you can quickly tell CDC if you have any side effects after getting the COVID-19 vaccine. Depending on your answers, someone from CDC may call to check on you. And v-safe will remind you to get your second COVID-19 vaccine dose if you need one.

Your participation in CDC's *v-safe* makes a difference—it helps keep COVID-19 vaccines safe.

### How can I participate?

Once you get a COVID-19 vaccine, you can enroll in *v-safe* using your smartphone. Participation is voluntary and you can opt out at any time. You will receive text messages from *v-safe* around 2pm local time. To opt out, simply text "STOP" when *v-safe* sends you a text message. You can also start *v-safe* again by texting "START."

### How long do v-safe check-ins last?

During the first week after you get your vaccine, **v-safe** will send you a text message each day to ask how you are doing. Then you will get check-in messages once a week for up to 5 weeks. The questions **v-safe** asks should take less than 5 minutes to answer. If you need a second dose of vaccine, **v-safe** will provide a new 6-week check-in process so you can share your second-dose vaccine experience as well. You'll also receive check-ins 3, 6, and 12 months after your final dose of vaccine.

#### Is my health information safe?

Yes. Your personal information in **v-safe** is protected so that it stays confidential and private.\*

\*To the extent **v-safe** uses existing information systems managed by CDC, FDA, and other federal agencies, the systems employ strict security measures appropriate for the data's level of sensitivity. These measures comply, where applicable, with the following federal laws, including the Privacy Act of 1974; standards enacted that are consistent with the Health Insurance Portability and Accountability Act of 1996 (HIPAA); the Federal Information Security Management Act, and the Freedom of Information Act.



Use your smartphone
to tell CDC about
any side effects after
getting the COVID-19
vaccine. You'll also get
reminders if you need a
second vaccine dose.



Sign up with your smartphone's browser at

vsafe.cdc.gov

OR

Aim your smartphone's camera at this code

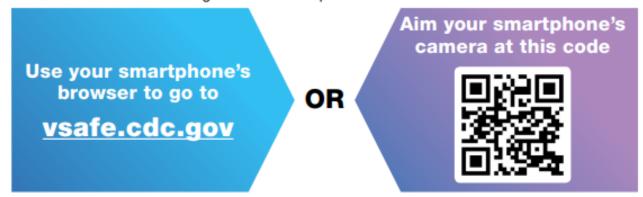


# How to register and use v-safe

You will need your smartphone and information about the COVID-19 vaccine you received. This information can be found on your vaccination record card; if you cannot find your card, please contact your healthcare provider.

# Register

1. Go to the *v-safe* website using one of the two options below:



- Read the instructions. Click Get Started.
- 3. Enter your name, mobile number, and other requested information. Click Register.
- You will receive a text message with a verification code on your smartphone. Enter the code in v-safe and click Verify.
- At the top of the screen, click Enter your COVID-19 vaccine information.
- Select which COVID-19 vaccine you received (found on your vaccination record card; if you cannot find your card, please contact your healthcare provider). Then enter the date you were vaccinated. Click Next.
- Review your vaccine information. If correct, click Submit. If not, click Go Back.
- 8. Congrats! You're all set! If you complete your registration before 2pm local time, v-safe will start your initial health check-in around 2pm that day. If you register after 2pm, v-safe will start your initial health check-in immediately after you register—just follow the instructions.

You will receive a reminder text message from **v-safe** when it's time for the next check-in—around 2pm local time. Just click the link in the text message to start the check-in.

## Complete a v-safe health check-in

- When you receive a v-safe check-in text message on your smartphone, click the link when ready.
- Follow the instructions to complete the check-in.

### Troubleshooting

How can I come back and finish a check-in later if I'm interrupted?

 Click the link in the text message reminder to restart and complete your check-in.

How do I update my vaccine information after my second COVID-19 vaccine dose?

 V-safe will automatically ask you to update your second dose information. Just follow the instructions.

#### Need help with v-safe?

Call 800-CDC-INFO (800-232-4636) TTY 888-232-6348 Open 24 hours, 7 days a week Visit <u>www.cdc.gov/vsafe</u>

