

School Vaccination Program Pneumococcal & Influenza (flu)

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Student Details					
Student First Name:	Student Last Name:				
Other Legal Names:	Date of Birth: / /				
Sex: Male Female					
Community:	and the Senaral Vacc				
Medicare No:					
	boriginal and Torres Strait Islander Torres Strait Islander				
School:	Class/Year:				
Any severe reactions to previous vaccines No Yes - list	The difference of section of the difference of section of the difference of the diff				
Pre-Vaccination Checklist					
Your consent is required before your child of the following apply:	d can be immunised at school. Your child should not be immunised if an				
They are known to have had a severe reaction to any vaccine or part of a vaccine					
• They have a fever of 38.5°C or above of					
They are pregnant or could be pregnant	t. ondere				
Consent for Vaccination - F	or Parent / Guardian to sign				
	as of Proumoscood (Proumovay®22) vaccing				

I consent for my child to receive: 1 dose of Pneumococcal (Pneumovax®23) vaccine 1 dose of Influenza (flu) vaccine					
and the information being recorded*. Tic	CHE SHE WILL				
	YES			NO	
Parent / Guardian Name:	ne: Daytime phone contact:				
Parent / Guardian Signature:	- Manualas I	Date:			
Privacy Information					
*The information on this form will be recorded on the NT Immunisation Register and later transferred to the Australian Immunisation Register (AIR). Inclusion on these registers is voluntary. All personal information collected by the NT Department of Health will be handled in accordance with the Information Act and the Department's Privacy Policy. Personal information disclosed to AIR is subject to the Privacy Act (Commonwealth).					
For further information on privacy laws, visit: https://infocomm.nt.gov.au/about-us/the-information-act					
Office use only					
Vaccine Dose Date Given	Batch Number	Site		Vaccinator Name	
Pneumococcal # 1	i skrates	Left	Right		
Influenza # 1	//g	Left	Right	operand about speaking remain 1.1.	

For further Information regarding the School Vaccination Program please contact: Darwin 8922 8044 or Regional Centres: Katherine 8973 9049; Alice Springs 8951 7549; Nhulunbuy 8987 0357; Tennant Creek 8962 4259.

Refused Unwell No consent Missed dose letter sent

Reason not vaccinated: Absent



Please complete and return this form to school. It is a legal requirement for a parent/guardian to sign this consent form for your child to receive vaccines at school.



School Vaccination Program

In the Northern Territory (NT), Aboriginal and Torres Strait Islander people aged 15 years (Year 10) and over are eligible to receive:

- · One dose of pneumococcal (Pneumovax®23) vaccine and
- · One dose of influenza (flu) vaccine.

If your child can't be vaccinated at school or misses out because of illness or absence, you can visit a health clinic for the missed vaccines.

Information and Consent for Vaccination

Pneumococcal disease and the vaccine

Pneumococcal disease is an acute bacterial infection which can cause a variety of severe illnesses including lung infection (pneumonia) infection around the brain (meningitis) and blood poisoning (septicaemia). Pneumonia is the most common complication of pneumococcal bacteria in the NT. The bacteria can also cause sinus and ear infections.

There are more than 90 different types of pneumococcal bacteria. The bacteria can spread to others by direct oral contact such as kissing or contact with articles soiled with infected mouth or nose secretions. It is uncommon to get infected from a person who is sick with pneumococcal disease. Anyone can get pneumococcal disease though it is more common in young children, the elderly, Aboriginal people, people who smoke, people with chronic illness and those with weakened immune systems.

All babies and older people are routinely vaccinated. Since 2001 NT Aboriginal children from age 15 years have been offered a vaccine which helps protect against 23 types of pneumococcal bacteria.

■ Influenza (flu) and the vaccine

Influenza or flu is a highly contagious respiratory infection which spreads from person to person through the air and on your hands. If you get the flu you may get a high fever, bad cough, joint pains, body aches, have difficulty breathing and feel really tired. Most people only get sick for a week but some people get sicker and need to go to hospital.

Complications of flu include pneumonia, bronchitis

and otitis media (ear infection). Flu can make some existing illnesses, such as asthma, worse. In some cases people can die from the flu.

A new flu vaccine is made each year to protect against the most common strains of flu virus that are most likely to cause illness. The flu virus changes constantly and protection from the vaccine only lasts 12 months so it is recommended to get a flu needle every year. The flu does not contain any live virus, so people can not catch the flu from having the vaccine.

■ What are the possible side effects of the vaccines?

Common side effects are discomfort, redness, pain and swelling at the injection site (arm) for 1-2 days. Other symptoms may include headache, fever and nausea. Putting a cool wet cloth on the injection site and giving paracetamol (Panadol®) helps to relieve symptoms. Fainting, the most common immediate reaction to any vaccine in older children and teenagers may occur 5-30 minutes following vaccination. Severe allergic reactions are rare.

It is safe to give more than 1 vaccine on the same day. If more than 1 vaccine is required they may be given in separate arms.