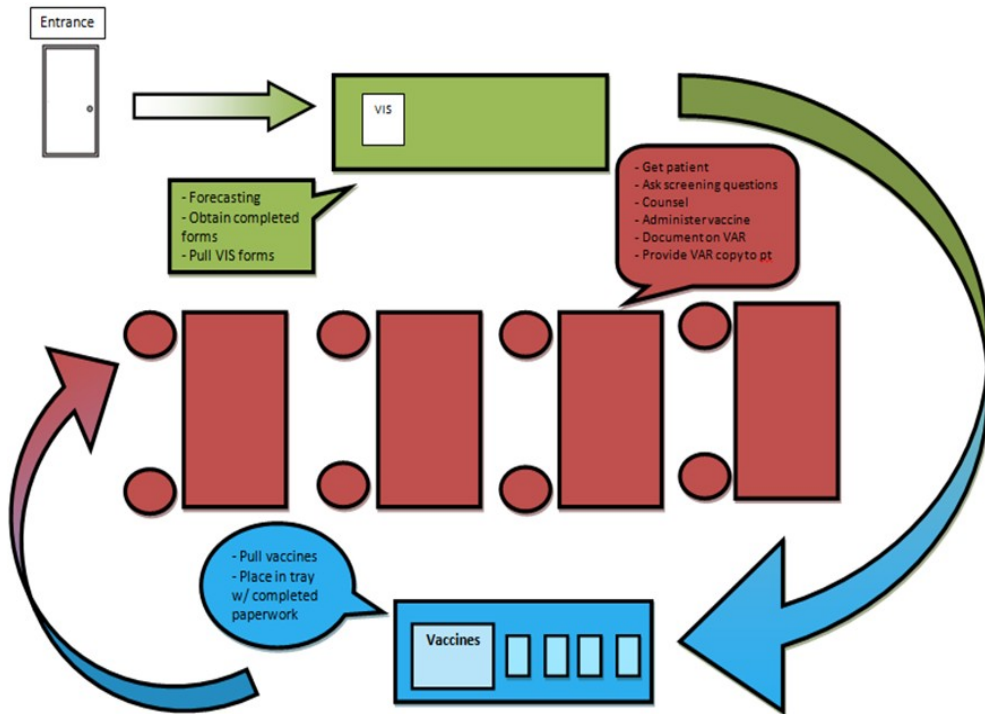


- COUNSELING:**
- ◆ Your arm may feel slightly sore for a day or two.
  - ◆ Make sure you do something active today and move your arm (s) around. There are no restriction on activity or food.
  - ◆ Drink plenty of fluids (water preferred).
  - ◆ Keep the bandaid(s) on for a couple of hours.
  - ◆ If you develop a fever, you can take over-the-counter ibuprofen (or Children's Motrin® for pediatric patients) or Tylenol®.

- IMMUNIZATION SCREENING QUESTIONS:**
1. Please verify your name and date of birth.
  2. Have you had any serious reactions to previous vaccinations?
  3. Do you have any allergies to food or medications?
  4. Do you have any chronic medical conditions?
  5. Do you take any medications on a regular basis?
  6. **FEMALES ONLY:**
    - ⇒ When was your last menstrual period?
    - ⇒ Are you pregnant or do you plan on becoming pregnant in the next 28 days?
  7. How are you feeling today?

**WORK-FLOW SCHEMATIC**



**IMMUNIZATION QUICK REFERENCE GUIDE**

		<p>Each immunization station should have:</p> <ul style="list-style-type: none"> <li>◆ Sharps container</li> <li>◆ Alcohol swabs</li> <li>◆ Bandages</li> <li>◆ IM syringes</li> <li>◆ SQ syringes</li> <li>◆ Cotton balls</li> <li>◆ Sterile diluent</li> <li>◆ Needles for prefilled syringes</li> </ul>
<b>IM:</b>	<b>SQ:</b>	
Td	MMR	
Tdap	Varicella	
DT	Zoster	
DTap	<b>IM* or SQ:</b>	
Hep A	MCV	
Hep B	PPSV	
HPV	IPV	
IIV	<i>*IM preferred</i>	
MCV	<b>Intranasal:</b>	
PCV	LAIV	
<b>Oral:</b>	<b>ID:</b>	
Rotavirus	Fluzone	
	Intradermal	

