



Part of Chattanooga Family Practice

Yellow Fever Vaccine Consent Form

- A safe and effective yellow fever vaccine has been available for more than 80 years. A single dose provides lifelong protection for most people. The vaccine is a live, weakened form of the virus given as a single shot. Vaccine is recommended for people aged 9 months or older and who are traveling to or living in areas at risk for yellow fever virus in Africa and South America. Yellow fever vaccine may be required for entry into certain countries.

Reactions to yellow fever vaccine are generally mild and include headaches, muscle aches, and low-grade fevers. Rarely, people develop severe, sometimes life-threatening reactions to the yellow fever vaccine, including:

- Allergic reaction, including difficulty breathing or swallowing (anaphylaxis)
- Swelling of the brain, spinal cord, or the surrounding tissues (encephalitis or meningitis)
- Guillain-Barré syndrome, an uncommon sickness of the nervous system in which a person's own immune system damages the nerve cells, causing muscle weakness, and sometimes, paralysis. This is called YEL-AND; the overall frequency is 0.8/100,000 shots but is 2.2/100,000 in ages over 60.
- Internal organ dysfunction or failure ("YEL-AVD"); the overall frequency is 0.3/100,000 shots but increases to 1.2/100,000 doses over 60 and 4/100,000 if over 70 years of age.

Yellow Fever Vaccine is *not* recommended for people who are:

- Allergic to a vaccine or something in the vaccine (like eggs)
- Aged 6 months or younger
- Organ transplant recipients
- Diagnosed with a malignant tumor
- Diagnosed with thymus disorder associated with abnormal immune function
- Diagnosed with a primary immunodeficiency
- Using immunosuppressive and immunomodulatory therapies
- Showing symptoms of HIV infection or CD4+ T-lymphocytes less than 200

If you recently received the yellow fever vaccination and develop fever, headache, tiredness, body aches, vomiting, or diarrhea, contact us.

People over 60 years of age or under 9 months may have an increased risk of developing a reaction to the vaccine but may still benefit from being vaccinated.

Pregnancy and breastfeeding: yellow fever vaccine has been given to many pregnant women without any apparent adverse effects on the fetus. However, since yellow fever vaccine is a live virus vaccine, it poses a theoretical risk. Pregnant women should avoid or postpone travel to an area where there is risk of yellow fever. If travel cannot be

avoided, discuss vaccination with your doctor. While a two week delay between yellow fever vaccination and conception is probably adequate, a one month delay has been advocated as a more conservative approach.

If, for some reason, a woman is vaccinated during pregnancy, she is unlikely to have any problems from the vaccine and her baby is very likely to be born healthy. It is important to review the risks of getting infected from Yellow Fever with vaccination risks.

Consent to vaccinate

I confirm that I do not have the following conditions preventing Yellow Fever Vaccine administration:

- ✓ Allergy to eggs
- ✓ Thymus disorder (myasthenia gravis, thymus removal, DiGeorge Syndrome)
- ✓ Active cancer requiring chemotherapy, radiation, bone marrow transplant within past 2 years
- ✓ Immune deficiency (such as AIDS)
- ✓ Therapies causing reduced immunity (such as high-dose prednisone for more than 2 weeks, methotrexate, or agents such as Remicade, Rituxan, etc.)
- ✓ Currently breastfeeding a child under 9 months old

I have received and reviewed the information on yellow fever vaccine. My questions have been answered to my satisfaction. I understand the risks and benefits of the vaccine and I agree to receive Yellow Fever Vaccine.

Date _____

Patient Signature _____

Patient Name _____

Vaccinator Signature _____

I have received and understand the above information on Yellow fever disease risks; as well as the vaccine risks and benefits and decline vaccination. I fully understand the risks of not being vaccinated and travelling to an area with risk of contracting yellow fever.

Patient Signature _____

Witness _____

Source: CDC (<https://www.cdc.gov/yellowfever/vaccine/vaccine-recommendations.html>)