



617 418 3675

YELLOW FEVER IMMUNIZATION/CONSENT

Yellow Fever

Yellow Fever is a viral illness transmitted by mosquitoes. The disease is so named because jaundice, the result of liver damage, is a common sign of this illness. Illness varies in severity from a flu-like syndrome to severe hepatitis and hemorrhagic fever. Yellow fever occurs in tropical areas of certain countries in Africa and South America. These countries comprise the yellow fever endemic zones. Although yellow fever has rarely occurred in travelers, fatal cases of yellow fever have occurred in some unvaccinated travelers visiting rural areas within the yellow fever endemic zone.

Vaccine

Yellow fever is preventable by a safe, effective vaccine. International regulations require proof of vaccination for travel to and from certain countries. A number of countries require a certificate from travelers arriving from infected areas or from countries with infected areas. Some countries in Africa require evidence of vaccination from all entering travelers; others may waive the requirements for travelers coming from non-infected areas and staying in the country less than 2 weeks. Vaccination is also recommended for travel outside the urban areas of countries that do not officially report the disease, but which lie in the endemic zone. Actual areas of yellow fever virus activity can extend beyond the officially reported infected zones. Some countries require a traveler, even if only in transit, to have a valid International Certificate of Vaccination (ICV) if they have been in any country either known or thought to harbor yellow fever. In addition to vaccination, which lasts 10 years, travelers should take precautions against exposure to mosquitoes.

Risks and Possible Side Effects

Reactions to yellow fever vaccine are generally mild. A very small percentage of vaccinees have mild headaches, myalgia, low-grade fevers, or other minor symptoms 5 to 10 days after vaccination.

Contraindication

Vaccination is generally not recommended for the following people:

1. Allergic reactions to egg or egg-related antigens
2. Mercury sensitivity.
3. Pregnancy.

If you have any of the above, please notify the staff. If you have any questions, please ask now or check with your physician before receiving the vaccine. If you experience any significant reactions, see your physician.

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For Clinic Use

Date of Vaccination: _____ Manufacturer & Lot #: _____ Site: SQ Right Left

Administered By: Julie M Barker, RN, at Passport Health of Eastern Massachusetts Payment: _____

I have read the above information about the Yellow Fever vaccine, and I have had a chance to ask questions. I understand the benefits and risks of the Yellow Fever vaccination and request that the vaccine is given to me.

Information-Person to Receive Vaccine

Name: _____ Date of Birth: _____ Age: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Signature: _____ Daytime Phone #: _____