Year 7 secondary school immunisation program consent form

Complete, sign and return the consent form to your school

How to complete the form

- · Read the information provided.
- Complete the consent section for each vaccine, and sign or type your name.
- Return the consent sections to the school even if you do not want your child to be vaccinated.

What is the National Immunisation Program?

Adolescents in Year 7 and Year 10 are offered free vaccines under the Secondary School Immunisation Program as part of the National Immunisation Program (NIP).

The NIP schedule https://www.health.gov.au/topics/immunisation/when-to-get-vaccinated/national-immunisation-program-schedule is a series of immunisations given at specific times throughout your life. The immunisations range from birth through to adulthood.

Further information about the vaccines provided in secondary school or the NIP, see <u>Immunisation in secondary schools</u> on the Better Health Channel website

https://www.betterhealth.vic.gov.au/health/healthyliving/immunisation-in-secondary-schools

Consent for immunisation

Adolescents in Year 7 of secondary school (or aged 12 to 13 years) are recommended the human papillomavirus (HPV) and diphtheria, tetanus, pertussis (whooping cough) vaccines.

Consent for each vaccine must be provided by parents, guardians or other medical treatment decision makers for adolescents to receive vaccinations at school.

Why should I have my child immunised?

- Immunisation is the safest and most effective way to stop the spread of many infectious diseases.
- The protection provided by some childhood vaccines fades and needs to be boosted in adolescence and for other vaccines, adolescence is the best time for the vaccine to be given.
- Vaccines not only protect your child from harmful diseases but offer important benefits for the long-term health of the community.
- If enough people in the community are immunised, the diseases can no longer be spread from person to person.

In Australia vaccines are registered for use by the Therapeutic Goods Administration (TGA). The TGA has a surveillance system which monitors and reports adverse events following immunisation.

Consent for vaccination can be withdrawn at any time prior to vaccination. Parents, guardians or other medical treatment decision makers should contact the local council immunisation service providing vaccination at your child's school.

Human papillomavirus (HPV) information

What is human papillomavirus?

Human papillomavirus (HPV) is the name given to a group of viruses that affect both females and males. It is very common to be infected with one or more types of HPV shortly after sexual activity starts. While the body usually clears HPV infection naturally and there are no symptoms, HPV can cause serious illness; including almost all cervical cancers, cancers of the genital area and 60% of cancers of the mouth and throat.

What are the benefits of receiving the HPV vaccine?

The HPV vaccine GARDASIL®9 protects against nine high risk HPV types that can cause cell abnormality and certain cancers. The benefits of HPV vaccines are greatest when given before exposure to the virus. If a vaccinated person comes into contact with these infections, their immune system is able to respond more effectively, preventing the disease developing or greatly reducing its severity. This is why we give the vaccine to young people in early high school before they become sexually active.

How is the vaccine given?

The HPV Gardasil®9 vaccine is given as a single injection into the upper arm for most people.

Some adolescents may need a three-dose course of Gardasil®9 vaccine. Three doses of Gardasil®9 vaccine is recommended for:

 a person who has a disease or is having treatment which causes low immunity (for example HIV/AIDS, rheumatoid arthritis, cancer, radiotherapy, chemotherapy or significant immunosuppressive treatment).

If a three dose course is required, it is recommended you speak to your GP, Aboriginal Health Service, community pharmacist or local council immunisation service.

How safe is the HPV vaccine?

The HPV Gardasil®9 vaccine is safe and well tolerated. Vaccines used in Australia are safe and must pass strict safety testing before being approved by the TGA. In addition, the TGA monitors the safety of vaccines once they are in use. Side effects after receiving the HPV vaccine are usually only very mild.

Will cervical screening tests be needed later in life?

Regular cervical screening (previously called a Pap smear) is still important for vaccinated women and people with a cervix, as the HPV vaccine does not protect against all types of HPV that can cause cervical cancer.

What are the possible side effects?

There are possible mild reactions that follow immunisation and a very small risk of a serious allergic reaction to any vaccine.

Common mild side effects

· Pain, redness and swelling at the injection site

- · A temporary small lump at the injection site
- Low grade fever
- · Feeling unwell
- Headache

If mild reactions do occur, the side effects can be reduced by:

- drinking extra fluids and not over-dressing if the person has a fever
- · taking paracetamol
- placing a cold, wet cloth on the sore injection site.

Uncommon mild side effects

· Rash or hives

Rare side effects

A severe allergic reaction, for example facial swelling, difficulty breathing.
 In the rare event of a severe allergic reaction, immediate medical attention will be provided.

Diphtheria, tetanus and pertussis (whooping cough) information

What is diphtheria?

Diphtheria is a serious bacterial disease that causes inflammation of the nose, throat and trachea (windpipe). The bacteria produce toxins that cause an abnormal membrane to grow in the throat, making it difficult to swallow, breathe and can even lead to suffocation.

The bacteria produce a poison which can spread around the body and cause serious complications such as paralysis and heart failure. Around 10 per cent of people who contract diphtheria die from it.

Diphtheria can be caught when you inhale the cough or sneeze droplets from an infected person.

What is tetanus?

Tetanus is caused by bacteria which live in soils, dust and manure. The bacteria can enter the body through a wound which may be as small as a pin prick. Tetanus cannot be passed from person to person.

Tetanus is a serious disease that causes muscle spasms and breathing problems. The bacteria produce toxins that affect the nervous system. It causes muscle spasms first felt in the neck and jaw muscles. Tetanus can lead to breathing difficulties, painful convulsions and abnormal heart rhythms. Around one in 10 people infected with the bacterium that causes tetanus will die.

Tetanus is uncommon in Australia because of the widespread use of the tetanus vaccine. Adolescents who have not been immunised against tetanus or who have not had a booster are at risk.

What is pertussis (whooping cough)?

Pertussis (commonly known as whooping cough) is a highly contagious disease which affects the air passages and breathing. The disease causes severe coughing spasms. Coughing spasms are often followed by vomiting and the cough can last for months.

Pertussis can be caught when you inhale the cough or sneeze droplets from an infected person.

Protection against pertussis both from the disease and the vaccine decreases over time. Therefore, a booster dose of a pertussis-containing vaccine is recommended for adolescents aged between 12 and 13 years to maintain immunity into adulthood.

How safe is the vaccine?

The diphtheria-tetanus-pertussis vaccine contains a small amount of diphtheria and tetanus toxins which are modified to make them harmless, small parts of purified components of whooping cough, a small amount of aluminium salt and preservative.

This booster vaccine has lower concentrations particularly of diphtheria and whooping cough components compared with the children's vaccine.

The vaccine is safe and well tolerated in adolescents. This combination vaccine can be given at least 4 weeks after a recent tetanus-containing vaccine is given.

Why does my child need a booster dose?

Adolescents are recommended to have a booster dose of diphtheria-tetanus-pertussis vaccine to extend the protective level of diphtheria, tetanus and pertussis immunity into early adulthood.

How is the vaccine given?

Diphtheria, tetanus, and pertussis are only available in Australia as a combination vaccine.

The diphtheria-tetanus-pertussis vaccine consists of a single injection given into the upper arm.

What are the possible side effects?

There are possible mild reactions that follow immunisation and a very small risk of a serious allergic reaction to any vaccine.

Common, mild side effects

- Pain, redness and swelling at the injection site
- · A temporary small lump at the injection site
- · Low grade fever
- Feeling unwell
- Headache

If mild reactions do occur, the side effects can be reduced by:

- drinking extra fluids and not over-dressing if the person has a fever
- taking paracetamol
- placing a cold, wet cloth on the sore injection site.

Uncommon mild side effects

Rash or hives

Rare side effects

• A severe allergic reaction, for example facial swelling, difficulty breathing.

In the rare event of a severe allergic reaction, immediate medical attention will be provided.

Preparing adolescents for school-based immunisation

Some useful tips for preparing adolescents for school-based immunisations include:

- · giving them a good breakfast
- · making sure they wear a loose shirt
- · ensure they are feeling well on the day
- making sure they let the teacher or immunisation staff know if they are feeling nervous or unwell.

If an adolescent is known to faint or be very anxious, it may be better for them to be vaccinated outside of school, speak to your immunisation provider to determine if this decision is right for your child.

Pre-immunisation checklist

It is important that adolescents tell their immunisation provider if any of the following apply.

- Are unwell on the day of immunisation (temperature over 38.5°C)
- Previously had a severe reaction to any vaccine
- · Have any severe allergies such as an anaphylactic reaction to yeast or latex
- · Have a disease or are having treatment which causes low immunity.
- · Have a known hypersensitivity to diphtheria toxoid
- · Are pregnant
- · History of hives after a vaccine

Find the full <u>pre-immunisation checklist</u> on the Department of Health website https://www.health.vic.gov.au/publications/pre-immunisation-checklist>.

After vaccination

Adolescents should remain under observation at the place of vaccination for a minimum of 15 minutes to ensure that they do not experience an immediate adverse event, and for immunisation staff to provide rapid medical care if needed.

In the rare event of a severe allergic reaction, immediate medical attention will be provided. Where reactions following vaccination are severe or persistent, or if you are worried, contact your doctor or hospital.

Immunisation side effects should be reported to the Victorian vaccine safety service (SAFEVIC), the central reporting service in Victoria, on Tel. 1300 882 924 (select option 1), email enquiries@saefvic.org.au.

Further information

Vaccine-related information

For detailed information regarding HPV or diphtheria, tetanus and pertussis vaccines provided, please refer to the <u>Better Health Channel</u> https://www.betterhealth.vic.gov.au/health/healthyliving/immunisation-in-secondary-schools.

Immunisation history statement

It is mandatory for immunisation providers to report NIP vaccines administered to the Australian Immunisation Register (AIR). A copy of your child's immunisation history statement is available from:

- Medicare online account through myGov <www.my.gov.au>
- Medicare mobile app https://www.servicesaustralia.gov.au/medicare
- Australian Immunisation Register, Tel. 1800 653 809

If you require assistance with translations please contact the National Translating and Interpreting Service, Tel. 131 450.

If you require further advice or information, please contact your immunisation provider, or visit the following websites:

Resources

- <u>Better Health Channel</u> https://www.betterhealth.vic.gov.au/health/healthyliving/immunisation-in-secondary-schools
- <u>Australian Government Department of Health</u> http://www.health.gov.au/health-topics/immunisation/when-to-get-vaccinated/immunisation-for-adolescents

Translated resources in community languages

For translated resources, please visit the Department of Health website

https://www.health.vic.gov.au/immunisation/secondary-school-immunisation-program

Consent form: Human papillomavirus (HPV) vaccine and Diphtheria-tetanus-pertussis (whooping cough) vaccine

Student details (as recorded on their Medicare card)

(,		
Medicare number (including reference number beside child's name)					
Surname					
First name					
Postal address					
Postcode					
Date of birth					
Gender					
School name					
Class					
Is this person of Aboriginal or Torre	s Strait Islande	er origin? N	lark chosen r	esponse with an '	
No					
Aboriginal					
Torres Strait Islander					
Aboriginal and Torres Strait Islando	er				
Parent or guardian contact	details				
Name of parent or guardian					
Daytime phone					
Mobile					
Email					

Vaccine consent

Declaration: I am authorised to give consent or non-consent for my child to be vaccinated and by giving consent, I understand my child will be given separate vaccines for diphtheria-tetanus-pertussis (whooping cough), and human papillomavirus. I have read and I understand the information given to me about vaccination, including the risks of not being vaccinated and the side effects of vaccines. I understand I can discuss the risks and benefits of vaccination with my immunisation provider. I understand that consent can be withdrawn at any time before vaccination takes place.

Human papillomavirus (HPV) vaccine

Please mark your chosen response, below, with an 'X'.

YES, I consent to my child receiving HPV vaccine.							
If you have selected 'Yes' above please sign or type your name.							
Date you signed this form.							
No, I do not consent to my child receiving the HPV vaccine.							
No, my child has had the HPV vaccine elsewhere.							
If your child has ha	If your child has had the HPV vaccine elsewhere, please provide the dates of each dose below.						
1st dose:		2nd dose: (if applicable)	3rd dose: (if applicable)				
Diphtheria-tetanus-pertussis (whooping cough) vaccine Please mark your chosen response, below, with an 'X'.							
YES, I consent to my child receiving the diphtheria-tetanus-pertussis booster vaccine.							
If you have selected 'Yes' above please sign or type your name.							
Date you signed this form.							
No, I do not consent to my child receiving the diphtheria-tetanus-pertussis vaccine.							
No, my child has had the diphtheria-tetanus-pertussis vaccine elsewhere.							
If your child has had the diphtheria-tetanus-pertussis vaccine elsewhere, please provide the date it was received.							
If your child is being vaccinated, please note any pre-existing medical condition, severe allergies or previous severe reaction to vaccination here:							

Privacy statement

The Year 7 Secondary School Immunisation Program is funded by the Australian and Victorian governments and delivered by local councils. Under the Public Health and Wellbeing Act 2008, local councils are responsible for coordinating and providing immunisation services to children being educated within the municipal district.

Local councils are committed to protecting the privacy, confidentiality and security of personal information, in accordance with the Privacy and Data Protection Act 2014 and the Health Records Act 2001.

Local councils report vaccines given through school programs to the Australian Immunisation Register (AIR). Personal identifying details will be kept confidential. These details are for the purpose of providing targeted improved health services for all Victorian children. In addition, the details enable tools such as recall and reminder systems to improve vaccination rates. This is important to improve immunisation rates overall. Individuals will have access to their record of all vaccines recorded in the AIR. Aggregate immunisation data may be disclosed to the Victorian government for the purpose of monitoring, funding and improving the Year 7 Secondary School Immunisation Program. This information does not identify any individual.

Information related to you or your child will be used or disclosed for purposes directly related to your child's immunisation, and in ways that you would reasonably expect. This may include the transfer or exchange of relevant information to your GP, to your child's GP, to another treating health service or hospital or another local council. The local council may provide you with information related to the secondary school immunisation program via SMS or email. You can access your child's immunisation information by contacting the local council where your child attends school.

The vast majority of people complete and return this form. Thank you for returning yours.

Office use only

Vaccine	Vaccination date	Nurse initials	Site: L/R arm
HPV			

Vaccine	Vaccination date	Nurse initials	Site: L/R arm
Diphtheria-tetanus- pertussis			

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Available at <u>Secondary school immunisation program - Resources for secondary schools and councils</u> https://www.health.vic.gov.au/immunisation/vaccination-for-adolescents/secondary-school-immunisation-program