

**Moderna/Biotech Spain COVID 19 Booster**  
**QUESTIONNAIRE AND CONSENT FORM**

Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: M F  
Last First

Residence Address (include district) \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Place of Vaccination: WB PHD BT EE NS FH LCC WHC UC Prison Clinic

Other: \_\_\_\_\_

**Tick (✓) the appropriate answer to questions below:**

1. Are you suffering from a fever today?  Yes  No
2. Do you have any of the following medical conditions?  
Impaired Immunity Diabetes Cancer Chronic Lung Disease Chronic Liver Disease  
Chronic Heart Disease Sickle Cell Disease Chronic Renal Disease Morbid Obesity  
Long term Aspirin Therapy Other \_\_\_\_\_ None of the above
3. Are you pregnant?  Yes  No  N/A
4. Are you a healthcare worker?  Yes  No
5. Have you ever had any serious allergic reaction to a previous vaccine?  Yes  No
6. Have you had the influenza vaccine within the last 14 days  Yes  No
6. Have you had the COVID 19 vaccine?  Yes  No How many doses? \_\_\_\_ Brand \_\_\_\_\_
7. What is the date of your last COVID 19 vaccine? \_\_\_\_\_
8. I have read or had read to me the COVID19 Vaccine information sheet on the reverse side of this questionnaire. I understand the risks and benefits of the COVID 19 vaccine and give consent to have the vaccine.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Official use ONLY**

Manufacturer	Vaccine	Lot # Exp date	Dose	Route	Site	Date given	Given by (Sign)
<b>Moderna Biotech Spain</b>	<b>Spikevax</b>	<b>000460A 27/4/23</b>	<b>0.5ml</b>	<b>IM</b>	<b>Rt. Delt. Lt. Delt.</b>		

**Cayman Islands Public Health Department**

**October 2022**

# Moderna/Biotech Spain COVID 19 Booster

## INFORMATION SHEET

### Description

The Moderna/Biotech Spain booster vaccine increases protection against COVID 19 in persons who have previously had the initial course of vaccine. It will not prevent illness caused by other viruses. Like all medicines, vaccines can cause side effects. Most of these are mild and short-term, and not everyone gets them.

### Who should get vaccinated?

- **All people eighteen years of age and older** who have previously taken a course of COVID 19 vaccine. This is especially important for people at higher risk for severe illness due to COVID 19 and their close contacts, including healthcare personnel and close contacts of children younger than sixteen years old.
- **Persons at higher risk of severe illness due to COVID 19 are:** people 60 years of age and older, and people with certain health conditions such as heart, lung or kidney disease or a weakened immune system as COVID 19 may worsen existing medical conditions.
- **Even if you have been sick with COVID 19 and have recovered, you are encouraged to accept the booster.** Due to the life-threatening complications associated with COVID-19 and known cases of re-infection, you are encouraged to get the booster at least four weeks from the time of infection.

### Who should not be vaccinated or who should wait:

Some persons should not be vaccinated without first consulting a physician. They include:

- Persons less than eighteen years of age;
- Any person with a history of immediate-onset anaphylaxis to a vaccine, medicine or food
- People who have a moderate or severe illness with a fever (more than 38°C) should wait to be vaccinated.

### Possible side effects

#### Common Problems:

- Pain, redness or swelling of the vaccine site
- Changes in heartbeat
- Shortness of breath
- Feeling faint or lightheaded
- Headache
- Wheezing
- Hives or rash
- Nausea/vomiting/stomach pains/diarrhoea
- Swelling of lips/tongue/throat

If these occur, they usually begin soon after the vaccine and last one to two days.

#### Uncommon or rare problems:

- Dizziness
- Stomach pain
- Rapid swelling of arms and legs
- Low blood pressure
- Rapid weight gain
- Lymphadenopathy (swollen or enlarged lymph nodes )
- Myocarditis (inflammation of heart muscles)
- Pericarditis (inflammation of heart lining)

**Life-threatening allergic reactions** from vaccines are very rare. When they do occur, it is usually within a few minutes to a few hours of receiving the vaccine.

### Treatment of side effects

If you experience any side effects, please refer to the card provided. If you have any difficulty breathing, call 911.

### For more information

Talk to your healthcare provider; call your district health centre or refer to the question and answer brochure. You may also go online to the PHE website <https://www.gov.uk>