

Diphtheria, tetanus and pertussis (dTpa) vaccine

Parent Information Sheet

NSW Health offers the vaccines recommended for adolescents by the National Health and Medical Research Council in a school vaccination program. Signed parental/guardian consent must be provided.

Your next steps

- Carefully read this information sheet.
- If you would like your child to be vaccinated against dTpa, please provide your consent online or request a paper based consent form from your school.
- If you do not wish your child to be vaccinated against diphtheria, tetanus and pertussis, do not provide consent.

Q. How do I provide consent for school vaccination?

To provide online consent you will need:

- your Service NSW log-in details and Medicare card details for you and your child.
- If you or your child do not have a Medicare card, consent can still be provided by requesting a paper-based consent form (available on request from schools).

Parents can withdraw consent at any time before vaccination takes place.

Where consent has been given online, please log-in to the secure NSW Health online consent portal and follow the prompts to withdraw consent.

Where consent has been given on the physical consent form, please write to or call the school to advise the student's name, school grade and those vaccines the withdrawn consent applies to.

Q. What are diphtheria, tetanus and pertussis?

Diphtheria is a contagious and potentially life-threatening bacterial infection that causes severe breathing difficulties, heart failure and nerve damage.

Tetanus is a severe, often fatal disease of the nervous system. The person suffers severe painful muscle spasms,

convulsions and lockjaw. Complications include pneumonia, broken bones (from the muscle spasms), respiratory failure and cardiac arrest.

Pertussis (Whooping Cough) is a highly infectious bacterial disease that can cause bouts of coughing. Adolescents and adults can have an annoying cough for up to 3 months. Severe bouts of coughing can cause vomiting, rib fractures, rupture of small blood vessels and hernias. Complications in infants include pneumonia, seizures and brain damage (hypoxic encephalopathy).

Q. How are diphtheria, tetanus and whooping cough spread?

Diphtheria bacteria can live in the mouth, nose, throat or skin on infected individuals. People can get diphtheria by breathing in the bacteria after an infected person has coughed or sneezed. People can also get diphtheria from close contact with discharges from an infected person's mouth, nose, throat or skin.

Tetanus is caused by bacteria found in soil and infection may occur after major injuries or minor injuries (sometimes unnoticed punctures to the skin that are contaminated with soil, dust or manure).

Whooping cough is spread to other people by droplets from coughing or sneezing. Untreated, a person with whooping cough can spread it to other people for up to 3 weeks after the onset of cough.

Q. How do vaccines work?

Vaccines work by triggering the immune system to fight certain infections. 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.

Q. How effective is the vaccine?

The vaccine is very effective in preventing diphtheria and tetanus and about 80% effective in preventing whooping cough.

Q. How many doses of vaccine does my child need to be protected?

One dose of dTpa vaccine is needed to provide protection against diphtheria, tetanus and whooping cough into early adulthood.

Q. Who should be vaccinated?

All adolescents should receive 1 dose of dTpa vaccine to provide protection against diphtheria, tetanus and whooping cough. This booster vaccine is essential for maintaining immunity into adulthood after the previous diphtheria-tetanus-whooping cough vaccines given in childhood. Students who have received a diphtheria-tetanus vaccine (ADT) in the past can receive the dTpa vaccine to also protect them against whooping cough.

Q. Who should not be vaccinated?

dTpa vaccine should not be given to people who:

- have had anaphylaxis following a previous dose of vaccine
- have had anaphylaxis following any of the vaccine additives (listed over the page)

Q. What if I prefer to wait until my child is older?

The dTpa vaccine can only be provided at school by you returning the signed consent form while your child is in an Intensive English Centre or in Year 7. If you choose to wait until your child is older you will need to make arrangements with your GP.

Q. How safe are vaccines?

Vaccines used in Australia are safe and must pass strict safety testing before being approved by the Therapeutic Goods Administration (TGA). In addition, the TGA monitors the safety of vaccines once they are in use.

Q. What additives does the vaccine contain?

The vaccine contains aluminium hydroxide and phosphate, traces of formaldehyde, polysorbate 80 and glycline and was exposed to bovine-derived materials during manufacture.

Q. What are the side effects of vaccination?

Side effects are commonly mild and usually involve redness, pain and swelling at the injection site or fever. Serious side effects are extremely rare. More information about side effects is available in the Consumer Medical Information (CMI) for the vaccine available from www.health.nsw.gov.au/schoolvaccination. Parents concerned about side effects after vaccination should contact their GP who should also make a report to the local public health unit.

Q. What is anaphylaxis?

Anaphylaxis is a severe allergic reaction that may result in unconsciousness and death if not treated quickly. It occurs very rarely after any vaccination. The school immunisation nurses are fully trained in the treatment of anaphylaxis.

Q. What if my child had a severe reaction to the old Triple Antigen or DTP vaccine as a baby?

Unless your child had an immediate severe allergic or anaphylactic reaction to the previous vaccine, it is safe for your child to receive the dTpa vaccine.

Q. What if my child has asthma and takes cortisone or prednisone by a “puffer”?

dTpa vaccine can be safely administered to someone who has asthma regardless of which medications they are taking.

Q. Who can consent to vaccination and can consent be withdrawn?

Only parents/guardians can consent to vaccination for students less than 18 years of age. Students aged 18 years and over may consent to their own vaccination and should complete and sign the Consent Form where ‘Parent/Guardian’ is indicated. Consent can be withdrawn at any time by providing the school with written notification of the withdrawal of consent or telephoning the school to withdraw consent.

Q. Should the vaccine be given to a female student who is or thinks she may be pregnant?

No. Any female student who is, or thinks she may be, pregnant should not be vaccinated. On the day of the clinic the vaccination nurse will ask female students if they are or could be pregnant. If a student answers yes to this question, she will not be vaccinated. The student will be urged to immediately discuss the issue with her parent/ guardian and to seek medical help. She will also be provided with contact details for a health referral service that will provide advice, support and guidance.

Q. What can I do if my child missed out on the vaccine because of illness or absence on the day of the nurses’ visit?

If HPV vaccination has been missed at school, catch-up should occur as soon as possible. Some schools will host catch-up clinics, otherwise parents should contact their local GP or pharmacist to arrange vaccination.

Q. How can I access a record of the vaccinations?

Information about your child’s vaccinations will be uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child’s existing immunisation history.

Parents can request a copy of their child's AIR Immunisation History Statement at any time up to their child being 14 years of age, and students aged 14 years and over can request their own immunisation history statement, as follows:

- using the Medicare online account through myGov my.gov.au/
- using the Medicare Express Plus App- www.humanservices.gov.au/individuals/subjects/express-plus-mobile-apps
- calling the AIR General Enquiries Line on **1800 653 809**

Q. What will happen to my child's information?

The information you provide on the Consent Form is subject to strict confidentiality and privacy protections contained in NSW and Commonwealth legislation (see the enclosed Privacy Statement). The information will be entered into a NSW Health immunisation register and then uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child's existing immunisation history and viewed on MyGov.

Q. Where can I find more information about school vaccination?

More information is available:

- by visiting the NSW Health website at www.health.nsw.gov.au/schoolvaccination
- by contacting your local public health unit on **1300 066 055**

Consent for Diphtheria, Tetanus and Pertussis (dTpa) Vaccination



Parent/Guardian to complete. Please print in **CAPITAL** letters using a **black** or **blue** pen.

1. Student's Details

Surname

Given Name/s

Date of Birth

 / /

Gender

 M F

Indeterminate/
Intersex/
Unspecified

Grade

Name of School

Medicare Number

Number beside your child's name on the Medicare card

2. Indigenous Status

No Yes, Aboriginal Yes, Torres Strait Islander Yes, both Aboriginal and Torres Strait Islander

3. Your Details - Parent or Legal Guardian

I have read and understood the information provided regarding the benefits and the possible side effects of the Diphtheria, Tetanus and Pertussis (dTpa) vaccine.

I hereby give consent for my child, named above, to receive a single dose of Diphtheria, Tetanus and Pertussis (dTpa) vaccine.

I declare, to the best of my knowledge, that my child:

1. Has not had an anaphylactic reaction following any vaccine.
2. Does not have an anaphylactic sensitivity to any of the vaccine components listed in the enclosed parent information sheet.
3. Is not pregnant.

Name of Parent/Guardian (e.g. JOHN SMITH)

Home Address (e.g. 5 SMITH LANE)

Suburb

Postcode

Mobile Number

Best Alternate Number (include area code e.g. 02)

Signature of Parent/Guardian

Date

 / /

Hepatitis B vaccine

Parent Information Sheet

NSW Health offers the vaccines recommended for adolescents by the National Health and Medical Research Council in a school vaccination program. Signed parental/guardian consent must be provided.

Your next steps

- Carefully read this information sheet.
- If you would like your child to be vaccinated against hepatitis B, complete the Consent Form and give the signed Consent Form to your child to return to school.
- If you do NOT wish your child to be vaccinated against hepatitis B, do NOT complete or return the Consent Form.

Q. What is hepatitis B disease?

Hepatitis B is a viral disease that causes symptoms such as fever, jaundice and feeling generally unwell and can lead to cirrhosis or cancer of the liver. Some people can develop hepatitis B disease and not be aware that they are infected. These people can pass on the disease without knowing it.

Q. How is hepatitis B spread?

- From infected mother to her baby at birth and through breastfeeding
- Child-to-child, usually through contact between open sores or wounds
- Unsafe sex
- Needle stick injury
- Tattooing or body piercing with unsterile equipment
- Sharing injecting equipment

Q. How do vaccines work?

Vaccines work by triggering the immune system to fight certain infections. 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.

Q. How effective is the vaccine?

Hepatitis B vaccine is very effective in providing protection against hepatitis B infection.

Q. How many doses are required for this course?

In Intensive English Centres, hepatitis B vaccine will be given in a 2-dose course with the second dose given 4-6 months after the first.

Q. Will my child be protected against hepatitis B if he/she only receives one dose of hepatitis B vaccine?

No. Adolescents (aged 11–15 years of age) require 2 adult doses of vaccine to be protected against hepatitis B disease.

Q. Who should be vaccinated?

All students aged 11-15 years of age should receive 2 adult doses of hepatitis B vaccine unless they have already received a course of the vaccine as a baby/child.

Students aged 16 years and over should receive 3 paediatric doses of vaccine. The first 2 doses may be given at the school and then a letter will be provided to take to their GP for completion of the course.

Q. Who should not be vaccinated?

Hepatitis B vaccine should not be given to people who:

- have had anaphylaxis following a previous dose of vaccine
- have had anaphylaxis following any vaccine component
- are pregnant

Q. How safe are vaccines?

Vaccines used in Australia are safe and must pass strict safety testing before being approved by the Therapeutic Goods Administration (TGA). In addition, the TGA monitors the safety of vaccines once they are in use.

Q. What additives does hepatitis B vaccine contain?

The vaccine contains aluminum hydroxide to assist the vaccine to work, may contain yeast proteins and was exposed to bovine-derived materials during manufacture.

Q. What are the side effects of hepatitis B vaccination?

Side effects are commonly mild and usually involve redness, pain and swelling at the injection site or fever. Serious side effects are extremely rare. More information about side effects is available in the Consumer Medical Information (CMI) for the vaccine available from www.health.nsw.gov.au/schoolvaccination. Parents concerned about side effects after vaccination should contact their GP who should also make a report to the local public health unit.

Q. What is anaphylaxis?

Anaphylaxis is a severe allergic reaction that may result in unconsciousness and death if not treated quickly. It occurs very rarely after any vaccination. The school immunisation nurses are fully trained in the treatment of anaphylaxis

Q. What should I do if I have no records or I cannot remember if my child has already received a course of hepatitis B vaccine?

It is safe for your child to receive another course of hepatitis B vaccine.

Q. My child has received a Hib vaccine. Will this protect my child against hepatitis B?

No. Hib vaccine protects against Haemophilus influenzae type b infection only and is given to babies at 6 weeks, 4 months, 6 months and 18 months of age. It will not protect your child against hepatitis B.

Q. Should the vaccine be given to a female student who is or thinks she may be pregnant?

No. Any female student who is or thinks she may be pregnant should not be vaccinated. On the day of the clinic the vaccination nurse will ask female students if they are or could be pregnant. If a student answers yes to this question, she will not be vaccinated. The student will be urged to immediately discuss the issue with her parent/guardian and to seek medical help. She will also be provided with contact details for a health referral service that will provide advice, support and guidance.

Q. What if my child has asthma and takes cortisone or prednisone by a “puffer”?

Hepatitis B vaccine can be safely administered to someone who has asthma regardless of which medications they are taking.

Q. Who can consent to vaccination and can consent be withdrawn?

Only parents/guardians can consent to vaccination for students less than 18 years of age. Students aged 18 years and over may consent to their own vaccination

and should complete and sign the Consent Form where ‘Parent/Guardian’ is indicated. Consent can be withdrawn at any time by providing the school with written notification of the withdrawal of consent or telephoning the school to withdraw consent.

Q. What can I do if my child missed out on the vaccine because of illness or absence on the day of the nurses’ visit?

If vaccination has been missed at school, catch-up should occur as soon as possible. Parents should contact their local GP or pharmacist to arrange vaccination.

Q. How can I access a record of the vaccinations?

Information about your child’s vaccinations will be uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child’s existing immunisation history.

Parents can request a copy of their child’s AIR Immunisation History Statement at any time up to their child being 14 years of age, and students aged 14 years and over can request their own immunisation history statement, as follows:

- using the Medicare online account through [myGov my.gov.au/](http://myGov.my.gov.au/)
- using the Medicare Express Plus App www.humanservices.gov.au/individuals/subjects/express-plus-mobile-apps
- calling the AIR General Enquiries Line on 1800 653 809.

Q. What will happen to my child’s information?

The information you provide on the Consent Form is subject to strict confidentiality and privacy protections contained in NSW and Commonwealth legislation (see the enclosed Privacy Statement). The information will be entered into a NSW Health immunisation register and then uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child’s existing immunisation history and viewed on MyGov.

Q. Where can I find more information about school vaccination?

More information is available:

- by visiting the NSW Health website at www.health.nsw.gov.au/schoolvaccination
- by contacting your local public health unit on 1300 066 055

Consent for Hepatitis B Vaccination

Parent/Guardian to complete. Please print in **CAPITAL** letters using a **black** or **blue** pen.

What to do after the vaccination

- Keep this record, as you may be required to provide this information later.
- Information about your child's vaccinations will automatically be uploaded to the Australian Immunisation Register (AIR). You may wish to update your GP regarding the vaccination date.

What to do if a local reaction occurs at the injection site

- Put a cold damp cloth on the injection site to relieve tenderness.
- Take paracetamol for pain.
- Drink extra fluids.

If your child suffers a reaction that you are concerned about please contact your local doctor.



What to do after the vaccination

- Keep this record, as you may be required to provide this information later.
- Information about your child's vaccinations will automatically be uploaded to the Australian Immunisation Register (AIR). You may wish to update your GP regarding the vaccination date.

What to do if a local reaction occurs at the injection site

- Put a cold damp cloth on the injection site to relieve tenderness.
- Take paracetamol for pain.
- Drink extra fluids.

If your child suffers a reaction that you are concerned about please contact your local doctor.



1. Student's Details

Surname

Given Name/s

Date of Birth

 / /

Gender

 M F

Indeterminate/
Intersex/
Unspecified

Grade

Name of School

Medicare Number

Number beside your child's name on the Medicare card

2. Indigenous Status

No Yes, Aboriginal Yes, Torres Strait Islander Yes, both Aboriginal and Torres Strait Islander

3. Your Details - Parent or Legal Guardian

I have read and understood the information provided regarding the benefits and the possible side effects of the hepatitis B vaccine.

I hereby give consent for my child, named above, to receive a 2 dose course of hepatitis B vaccine.

I declare, to the best of my knowledge, that my child:

1. Has not had an anaphylactic reaction following any vaccine.
2. Does not have an anaphylactic sensitivity to any of the vaccine components listed in the enclosed parent information sheet.
3. Is not pregnant.

Name of Parent/Guardian (e.g. JOHN SMITH)

Home Address (e.g. 5 SMITH LANE)

Suburb

Postcode

Mobile Number

Best Alternate Number (include area code e.g. 02)


Signature of Parent/Guardian

Date

 / /



Hepatitis B Record of Vaccination

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)

OFFICE USE ONLY

Arm Left Right Time of Vaccination (24hr) : Vaccine Batch Number DOSE 1

Nurse's Signature Date / **2 0**

Arm Left Right Time of Vaccination (24hr) : Vaccine Batch Number DOSE 2

Nurse's Signature Date / **2 0**

Nurse's notes


Reason not vaccinated

- Absent
- Refused
- Unwell
- No signature
- Consent withdrawn
- Other

Parent/Guardian Hepatitis B Record of Vaccination

Hepatitis B Record of Vaccination

DOSE 1

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)


OFFICE USE ONLY

Arm Left Right Time of Vaccination (24hr) : Vaccine Batch Number

Nurse's Signature Date /

Hepatitis B Record of Vaccination

DOSE 2

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)

OFFICE USE ONLY

Arm Left Right Time of Vaccination (24hr) : Vaccine Batch Number

Nurse's Signature Date /

Human papillomavirus (HPV) vaccine

Parent Information Sheet

NSW Health offers the vaccines recommended for adolescents by the National Health and Medical Research Council in a school vaccination program. Signed parental/guardian consent must be provided.

Your next steps:

- Carefully read this information sheet.
- If you would like your child to be vaccinated against human papillomavirus (HPV), complete the Consent Form and give the signed Consent Form to your child to return to school.
- If you do not wish your child to be vaccinated against HPV, do not provide consent.

Q. What is HPV and how is it spread?

Human papillomavirus (HPV) is a common virus affecting both men and women. HPV is spread through genital contact during sex with someone who has the virus. The virus passes through tiny breaks in the skin and is not spread through blood or other body fluids. Condoms offer limited protection, as they do not cover all of the genital skin.

Not all types of HPV will cause visible symptoms. Many people with HPV infection will not be aware of it.

Some HPV types can cause warts on any part of the body. This includes the genital area (vulva, vagina, cervix, penis, scrotum, anus, and perineum). Warts are usually painless, but sometimes cause itching or discomfort. The types of HPV that cause warts are called 'low-risk' because they are not linked to cancer.

Other HPV types are called 'high-risk' because they can cause pre-cancerous cells to grow. These cells may turn into cancer if left untreated.

High-risk HPV is responsible for 5% of all cancers worldwide, including:

- almost all cases of cervical cancer
- 90% of anal cancers
- 78% of vaginal cancers
- 60% of oropharyngeal cancers (cancers of the

back of the throat, tongue, and tonsils)

- 25% of vulva cancers
- 50% of penile cancers

Vaccinating males will prevent male cancers and genital warts and importantly, will also help to protect females from cervical cancer.

Q. How do vaccines work?

Vaccines work by triggering the immune system to fight certain infections. 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.

Q. Which vaccine will be used?

An HPV vaccine that protects against 9 types of HPV (6, 11, 16, 18, 31, 33, 45, 52 and 58).

Q. How many HPV doses does my child need?

International research shows that one dose of any HPV vaccine provides the same protection as a two-dose course. Based on this evidence, the Australian Technical Advisory Group on Immunisation (ATAGI) recommended that Australia transition to a one dose HPV vaccine schedule in 2023.

Some adolescents who are significantly immunocompromised are recommended to have three doses of HPV vaccine. A 3 dose schedule requires an interval of 2 months between dose 1 and dose 2, and 4 months between dose 2 and dose 3.

Significant immunocompromise is defined as those with:

- primary or secondary immune-deficiencies (B lymphocyte antibody and T lymphocyte complete or partial deficiencies)
- HIV infection
- people with cancer

- organ transplantation
- autoimmune disease
- significant immunosuppressive therapy (excluding asplenia or hyposplenia).

Q. What about adolescents who have already had one dose?

Students who have already received one dose of HPV vaccine no longer need a second dose. They are considered up to date and fully vaccinated.

Regular cervical screening (previously called Pap smears) is still important for vaccinated women, as the HPV vaccine does not protect against all types of HPV that can cause cervical cancer. All women from 25 years of age or those who have ever been sexually active should have a Cervical Screening Test every 5 years, regardless of their HPV vaccination status.

Q. Who should be vaccinated?

All students in Year 7 and Intensive English Centre students from 12 years of age should receive a single dose schedule of HPV vaccine. For more information, contact your local public health on 1300 066 055.

Q. Who should not be vaccinated?

HPV vaccine should not be given to people who:

- are or may be pregnant
- have had anaphylaxis following a previous vaccine
- have had anaphylaxis following any of the vaccine additives (listed over the page)
- have a history of anaphylaxis to yeast

Q. How effective is the vaccine?

The vaccine protects against high-risk HPV types that cause over 90% of cervical cancers in women and also protects against additional HPV types that cause cancers in men.

The latest research shows that the vaccine still offers close to 100% protection more than 10 years after it was given. Since the introduction of the National HPV vaccination program (in 2007 for females and 2013 for males) the incidence of:

- high-grade cervical abnormalities in vaccine eligible age groups decreased by nearly 50%
- genital warts in young people (under 21) reduced by 90%.

As cervical cancer usually develops over 10 or more years, the role of the vaccine in reducing cervical cancer will not be evident for some time.

The incidence of cervical cancer has significantly decreased since the National Cervical Screening Program began in 1991 and a national Human Papilloma Virus (HPV) vaccine program was introduced in 2007.

Q. What if I prefer to wait until my child is older?

HPV vaccination is most effective when it is given to adolescents before they become sexually active. These vaccines can only be provided at school by you returning the original consent form while your child is at school. If you choose to wait until your child is older you will need to make arrangements with your GP or pharmacist immuniser.

If vaccination is provided through a GP or pharmacist, the vaccine will be free, but you may be charged a consultation fee.

Q. What additives does HPV vaccine contain?

The vaccine contains yeast, aluminium adjuvant, sodium chloride, L-histidine, polysorbate and sodium borate. Additives are included in very small amounts to either assist the vaccine to work or to act as a preservative.

Q. How safe are vaccines?

Vaccines used in Australia are safe and must pass strict safety testing before being approved by the Therapeutic Goods Administration (TGA). In addition, the TGA monitors the safety of vaccines once they are in use.

Q. What are the side effects of vaccination?

Side effects are commonly mild and usually involve pain, swelling and redness at the injection site. Serious side effects are extremely rare. NSW parents who were followed up in the days after HPV vaccination reported that less than 11% of students experienced mild side effects while only 0.5% required medical attention. More information about side effects is available in the Consumer Medicines Information (CMI) for the vaccine available from www.health.nsw.gov.au/schoolvaccination. Parents concerned about side effects after vaccination should contact their GP who should also make a report to the local public health unit.

Q. What is anaphylaxis?

Anaphylaxis is a severe allergic reaction that may result in unconsciousness and death if not treated

quickly. It occurs very rarely after any vaccination. The school immunisation nurses are fully trained in the treatment of anaphylaxis.

Q. Will my daughter still need cervical screening?

Yes. Regular cervical screening (previously called Pap smears) is still important for vaccinated women, as the HPV vaccine does not protect against all types of HPV that can cause cervical cancer.

All women from 25 years of age who have ever been sexually active should have a Cervical Screening Test every 5 years, regardless of their HPV vaccination status.

Q. What if my child has asthma and takes cortisone or prednisone by a “puffer”?

The vaccine can be safely administered to someone who has asthma regardless of which medications they are taking.

Q. Who can consent to vaccination and can consent be withdrawn?

Only parents/guardians can consent to vaccination for students less than 18 years of age. Students aged 18 years and over may consent to their own vaccination and should complete and sign the Consent Form where ‘Parent/Guardian’ is indicated. Consent can be withdrawn at any time by providing the school with written notification of the withdrawal of consent or telephoning the school to withdraw consent.

Q. Should the vaccine be given to a female student who is or thinks she may be pregnant?

No. Any female student who is, or thinks she may be, pregnant should not be vaccinated. On the day of the clinic the vaccination nurse will ask female students if they are or could be pregnant.

If a student answers yes to this question, she will not be vaccinated. The student will be urged to immediately discuss the issue with her parent/guardian and to seek medical help. She will also be provided with contact details for a health referral service that will provide advice, support and guidance.

Q. What can I do if my child missed out on the vaccine because of illness or absence on the day of the nurses’ visit?

If HPV vaccination has been missed at school, catch-up should occur as soon as possible. Some schools will host catch-up clinics, otherwise parents should contact their local GP or pharmacist to arrange vaccination.

Q. How can I access a record of the vaccinations?

Information about your child’s vaccinations will be uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child’s existing immunisation history.

Parents can request a copy of their child’s AIR Immunisation History Statement at any time up to their child being 14 years of age, and students aged 14 years and over can request their own immunisation history statement, as follows:

- using the Medicare online account through myGov my.gov.au/
- using the Medicare Express Plus App www.humanservices.gov.au/individuals/subjects/express-plus-mobile-apps
- calling the AIR General Enquiries Line on 1800 653 809.

Q. What will happen to my child’s information?

The information you provide on the Consent Form is subject to strict confidentiality and privacy protections contained in NSW and Commonwealth legislation (see the enclosed Privacy Statement).

The information will be entered into a NSW Health immunisation register and then uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child’s existing immunisation history and viewed on MyGov.

Female students receiving HPV vaccine – by signing the Consent Form, you are agreeing to disclose your child’s health information for linkage to the National Cervical Screening Program Register in the future.

Q. Where can I find more information about school vaccination?

More information is available:

- by visiting the NSW Health website at www.health.nsw.gov.au/schoolvaccination
- by contacting your local public health unit on 1300 066 055.

Human papillomavirus (HPV) vaccine Parent Information Sheet

October 2023 © NSW Health. SHPN (HP NSW) 230689-1.



Consent for HPV Vaccination

Parent/Guardian to complete. Please print in **CAPITAL** letters using a **black** or **blue** pen.

1. Student's Details

Surname

Given Name/s

Date of Birth

 / /

Gender

 M F Indeterminate/Intersex/Unspecified

Grade

Name of School

Medicare Number

Number beside your child's name on the Medicare card

2. Indigenous Status

No Yes, Aboriginal Yes, Torres Strait Islander Yes, both Aboriginal and Torres Strait Islander

3. Your Details – Parent or Legal Guardian

I have read and understood the information provided regarding the benefits and the possible side effects of the HPV vaccine.

I hereby give consent for my child, named above, to receive a single dose of HPV vaccine and agree to disclose my child's health information for future linkage to the National Cervical Screening Program Register.

I declare, to the best of my knowledge, that my child:

- Has not had an anaphylactic reaction following any vaccine.
- Does not have an anaphylactic sensitivity to any of the vaccine components listed in the enclosed parent information sheet.
- Is not pregnant.

Name of Parent/Guardian (e.g. JOHN SMITH)

Home Address (e.g. 5 SMITH LANE)

Suburb

Postcode

Mobile Number

Best Alternate Number (include area code e.g. 02)

Signature of Parent/Guardian

Date

 / /

What to do after the vaccination

- Keep this record, as you may be required to provide this information later.
- Information about your child's vaccinations will automatically be uploaded to the Australian Immunisation Register (AIR). You may wish to update your GP regarding the vaccination date.

What to do if a local reaction occurs at the injection site

- Put a cold damp cloth on the injection site to relieve tenderness.
- Take paracetamol for pain.
- Drink extra fluids.

If your child suffers a reaction that you are concerned about please contact your local doctor.



What to do after the vaccination

- Keep this record, as you may be required to provide this information later.
- Information about your child's vaccinations will automatically be uploaded to the Australian Immunisation Register (AIR). You may wish to update your GP regarding the vaccination date.

What to do if a local reaction occurs at the injection site


- Put a cold damp cloth on the injection site to relieve tenderness.
- Take paracetamol for pain.
- Drink extra fluids.


If your child suffers a reaction that you are concerned about please contact your local doctor.



HPV Record of Vaccination

Parent/Guardian HPV Record of Vaccination

 Parent/Guardian to complete

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)

Name of Student (e.g. JANE SMITH)

OFFICE USE ONLY

OFFICE USE ONLY

Arm Left **Time of Vaccination (24hr)** : **Vaccine Batch Number**

Right :

Arm Left **Time of Vaccination (24hr)** : **Vaccine Batch Number**

Right :

Nurse's Signature **Date** / **2 0**

Nurse's Signature **Date** /

Nurse's notes

Reason not vaccinated

- Absent
- Refused
- Unwell
- No signature
- Consent withdrawn
- Other

SAMPLE

Measles, mumps and rubella (MMR) vaccine

Parent Information Sheet

NSW Health offers the vaccines recommended for adolescents by the National Health and Medical Research Council in a school vaccination program. Signed parental/guardian consent must be provided.

Your next steps

- Carefully read this information sheet.
- If you would like your child to be vaccinated against measles, mumps and rubella, complete the Consent Form and give the signed Consent Form to your child to return to school.
- If you do NOT wish your child to be vaccinated against measles, mumps and rubella, do NOT complete or return the Consent Form.

Q. What are measles, mumps and rubella?

Measles is a highly infectious virus causing fever, cough and a rash. Frequent complications include pneumonia, diarrhoea and middle ear infections. Brain inflammation occurs in about 1 in every 1,000 cases and 10-15% of these cases will die and many will have permanent brain damage.

Mumps is an infectious disease causing swollen neck glands and fever. Around 10% of infected people will develop inflammation of the membranes surrounding the brain and spinal cord (meningeal signs and symptoms) while 15-30% of males past puberty will develop inflammation of the testes (orchitis). Mumps infection during the first trimester may result in spontaneous abortion.

Rubella (German Measles) is an infectious viral disease causing rash, fever and swollen glands. It causes severe abnormalities in babies of infected pregnant women.

Up to 90% of infants infected during the first trimester of pregnancy will have a major congenital abnormality, including intellectual disability, deafness, blindness or heart defects.

Q. How are measles, mumps and rubella spread?

These viruses are spread by coughing and sneezing. Measles is one of the most easily spread of all human infections. Just being in the same room as someone with measles can result in infection.

Q. How do vaccines work?

Vaccines work by triggering the immune system to fight certain infections. 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.

Q. How effective is the vaccine?

MMR vaccine is very effective in providing protection against measles, mumps and rubella infection.

Q. Who should be vaccinated?

Two doses of measles-mumps-rubella vaccine (MMR) are recommended for adolescents for complete immunity to measles, mumps and rubella unless they have previously received two doses of vaccine.

Q. Who should not be vaccinated?

MMR vaccine should not be given to people who:

- have had anaphylaxis following a previous dose of MMR vaccine
- have had anaphylaxis following any vaccine component (listed over the page)
- are pregnant (pregnancy should be avoided for 28 days after vaccination)
- have received a live vaccine in the past 4 weeks e.g. varicella (chickenpox), BCG (tuberculosis) or yellow fever
- have received a blood transfusion/immunoglobulin injection within the past year
- have impaired immunity
 - i.e. people with HIV/AIDS
 - people taking high-dose oral corticosteroids
 - people who are receiving high-dose systemic immunosuppressive treatment, general radiation or x-ray therapy
 - people suffering from malignant conditions of the reticuloendothelial system, including lymphoma, leukaemia and Hodgkin's disease.

Q. What additives does MMR vaccine contain?

The MMR vaccine contains lactose, neomycin, sorbitol and mannitol. Additives are included in very small amounts to either assist the vaccine to work or to act as a preservative.

Q. How safe are vaccines?

Vaccines used in Australia are safe and must pass strict safety testing before being approved by the Therapeutic Goods Administration (TGA). In addition, the TGA monitors the safety of vaccines once they are in use.

Q. What are the side effects of MMR vaccination?

MMR vaccine is safe, effective and well tolerated. Side effects are commonly mild and may involve feeling generally unwell, fever and/ or rash (not infectious and may occur 5-12 days after MMR vaccination). Serious side effects including anaphylaxis (see information below), transient lymphadenopathy (short-lived swelling of the lymph nodes), arthralgia (joint pain) and thrombocytopenia (increased potential for bruising and bleeding) are extremely rare. More information about side effects is available in the Consumer Medical Information (CMI) for the vaccine available from www.health.nsw.gov.au/schoolvaccination. Parents concerned about side effects after vaccination should contact their GP who should also make a report to the local public health unit.

Q. What is anaphylaxis?

Anaphylaxis is a severe allergic reaction which may result in unconsciousness and death if not treated quickly. It occurs very rarely after any vaccination. The school immunisation nurses are fully trained in the treatment of anaphylaxis.

Q. Should the vaccine be given to a female student who is or thinks she may be pregnant?

No. Any female student who is or thinks she may be pregnant should not be vaccinated. On the day of the clinic the vaccination nurse will ask female students if they are or could be pregnant. If a student answers yes to this question, she will not be vaccinated. The student will be urged to immediately discuss the issue with her parent/ guardian and to seek medical help. She will also be provided with contact details for a health referral service that will provide advice, support and guidance.

Female students who have received MMR vaccine should not become pregnant for 28 days after vaccination.

Q. What if my child has asthma and takes cortisone or prednisone by a “puffer”?

MMR vaccine can be safely administered to someone who has asthma regardless of which medications they are taking.

Q. Who can consent to vaccination and can consent be withdrawn?

Only parents/guardians can consent to vaccination for students less than 18 years of age. Students aged 18 years and over may consent to their own vaccination and should complete and sign the Consent Form where ‘Parent/Guardian’ is indicated. Consent can be withdrawn at any time by providing the school with written notification of the withdrawal of consent or telephoning the school to withdraw consent.

Q. How can I access a record of the vaccinations?

Information about your child’s vaccinations will be uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child’s existing immunisation history.

Parents can request a copy of their child’s AIR Immunisation History Statement at any time up to their child being 14 years of age, and students aged 14 years and over can request their own immunisation history statement, as follows:

- using the Medicare online account through myGov my.gov.au/
- using the Medicare Express Plus App www.servicesaustralia.gov.au/express-plus-mobile-apps
- calling the AIR General Enquiries Line on 1800 653 809.

Q. What can I do if my child missed out on the vaccine at school because of illness or absence on the day of the nurses’ visit?

If vaccination has been missed at school, catch-up should occur as soon as possible. Parents should contact their local GP or pharmacist to arrange vaccination.

Q. What will happen to my child’s information?

The information you provide on the Consent Form is subject to strict confidentiality and privacy protections contained in NSW and Commonwealth legislation (see the enclosed Privacy Statement). The information will be entered into a NSW Health immunisation register and then uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child’s existing immunisation history and viewed on MyGov.

Q. Where can I find more information about school vaccination?

More information is available:

- by visiting the NSW Health website at www.health.nsw.gov.au/schoolvaccination
- by contacting your local public health unit on 1300 066 055

Consent for Measles, Mumps and Rubella (MMR) Vaccination

Parent/Guardian to complete. Please print in **CAPITAL** letters using a **black** or **blue** pen.

1. Student's Details

Surname

Given Name/s

Date of Birth

 / /

Gender

 M F

Indeterminate/
Intersex/
Unspecified

Grade

Name of School

Medicare Number

Number beside your child's name on the Medicare card

2. Indigenous Status

No Yes, Aboriginal Yes, Torres Strait Islander Yes, both Aboriginal and Torres Strait Islander

3. Your Details - Parent or Legal Guardian

I have read and understood the information provided regarding the benefits and the possible side effects of the Measles, Mumps and Rubella (MMR) vaccine.

I hereby give consent for my child, named above, to receive 2 doses of Measles, Mumps and Rubella (MMR) vaccine.

I declare, to the best of my knowledge, that my child:

- Has not had an anaphylactic reaction following any vaccine.
- Does not have an anaphylactic sensitivity to any of the vaccine components listed in the enclosed parent information sheet.
- Is not pregnant.

Name of Parent/Guardian (e.g. JOHN SMITH)

Home Address (e.g. 5 SMITH LANE)

Suburb

Postcode

Mobile Number

Best Alternate Number (include area code e.g. 02)

Signature of Parent/Guardian

Date

 / /

What to do after the vaccination

- Keep this record, as you may be required to provide this information later.
- Information about your child's vaccinations will automatically be uploaded to the Australian Immunisation Register (AIR). You may wish to update your GP regarding the vaccination date.

What to do if a local reaction occurs at the injection site

- Put a cold damp cloth on the injection site to relieve tenderness.
- Take paracetamol for pain.
- Drink extra fluids.

If your child suffers a reaction that you are concerned about please contact your local doctor.

What to do after the vaccination

- Keep this record, as you may be required to provide this information later.
- Information about your child's vaccinations will automatically be uploaded to the Australian Immunisation Register (AIR). You may wish to update your GP regarding the vaccination date.


What to do if a local reaction occurs at the injection site

- Put a cold damp cloth on the injection site to relieve tenderness.
- Take paracetamol for pain.
- Drink extra fluids.

If your child suffers a reaction that you are concerned about please contact your local doctor.

MMR Record of Vaccination

Parent/Guardian Measles, Mumps and Rubella (MMR) Record of Vaccination

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)

OFFICE USE ONLY

Arm Left Right Time of Vaccination (24hr) Vaccine Batch Number DOSE 1

Nurse's Signature Date / **2 0**

Arm Left Right Time of Vaccination (24hr) Vaccine Batch Number DOSE 2

Nurse's Signature Date / **2 0**


Nurse's notes

Reason not vaccinated

- Absent
- Refused
- Unwell
- No signature
- Consent withdrawn
- Other

MMR Record of Vaccination

DOSE 1

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)


OFFICE USE ONLY

Arm Left Right Time of Vaccination (24hr) Vaccine Batch Number

Nurse's Signature Date / **2 0**

MMR Record of Vaccination

DOSE 2

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)

OFFICE USE ONLY

Arm Left Right Time of Vaccination (24hr) Vaccine Batch Number

Nurse's Signature Date / **2 0**

Polio vaccine

Parent Information Sheet

NSW Health offers the vaccines recommended for adolescents by the National Health and Medical Research Council in a school vaccination program. Signed parental/guardian consent must be provided.

Your next steps:

- Carefully read this information sheet.
- If you would like your child to be vaccinated against polio, complete the Consent Form and give the signed Consent Form to your child to return to school.
- If you do NOT wish your child to be vaccinated against polio, do NOT complete or return the Consent Form.

Q. What is polio (poliomyelitis)?

Polio is a viral infection caused by the poliovirus that can cause paralysis and death. The majority of people infected with polio do not have any symptoms. A minor illness causing fever, headache, lethargy, nausea and vomiting occurs in about 10% of infected people. While most of these people completely recover, about 2% go on to experience severe muscle pain with back or neck stiffness caused by inflammation of the lining of the brain. Less than 1% of infected people develop severe weakness called acute flaccid paralysis that can affect the limbs, muscles of the head and neck and the muscles that are used for breathing.

Q. How is polio spread?

Polio is spread by close contact with an infected person through contact with very small amounts of faeces (i.e. on unwashed hands) or saliva from an infected person. The polio virus enters the body through the nose or mouth and infection starts in the gut. It then enters the blood stream and is carried to other parts of the body, including the nervous system. Cases are mostly infectious in the 10 days before, and the 10 days after, the onset of symptoms.

Q. How do vaccines work?

Vaccines work by triggering the immune system to fight certain infections. 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.

Q. How effective is the polio vaccine?

The 3 dose primary course of polio vaccine is at least 99% effective against the disease.

Q. Who should be vaccinated?

Students who have not received the primary course of polio vaccine (3 doses of vaccine at least 4 weeks apart) should be vaccinated. As most students will have received at least one dose of polio vaccine, up to 2 doses will be offered in Intensive English Centres and parents will be advised to attend their local doctor for the third dose, if required.

Q. Who should not be vaccinated?

Polio vaccine should not be given to people who:

- have had anaphylaxis following a previous dose of vaccine
- have had anaphylaxis following any of the vaccine additives (listed over the page)

Q. What is anaphylaxis?

Anaphylaxis is a severe allergic reaction that may result in unconsciousness and death if not treated quickly. It occurs very rarely after any vaccination. The school immunisation nurses are fully trained in the treatment of anaphylaxis.

Q. What should I do if I have no records or I cannot remember if my child has already received polio vaccine?

Children and adults can be safely vaccinated with polio vaccine if there is no available evidence of previous vaccination with polio vaccine.

Q. What additives does polio vaccine contain?

The vaccine contains phenoxylethanol, formaldehyde, polysorbate 80 and trace amounts of neomycin, streptomycin, polymyxin B and bovine serum albumin.

Additives are included in very small amounts to either assist the vaccine to work or to act as a preservative.

The vaccine was exposed to bovine-derived materials during manufacture.

Q. How safe are vaccines?

Vaccines used in Australia are safe and must pass strict safety testing before being approved by the Therapeutic Goods Administration (TGA). In addition, the TGA monitors the safety of vaccines once they are in use.

Q. What are the side effects of polio vaccination?

Side effects are commonly mild and usually involve redness, pain and swelling at the injection site or fever. Serious side effects are extremely rare. More information about side effects is available in the Consumer Medical Information (CMI) for the vaccine available from www.health.nsw.gov.au/schoolvaccination. Parents concerned about side effects after vaccination should contact their GP who should also make a report to the local public health unit.

Q. Should the vaccine be given to a female student who is or thinks she may be pregnant?

No. Any female student who is, or thinks she may be, pregnant should not be vaccinated. On the day of the clinic the vaccination nurse will ask female students if they are or could be pregnant. If a student answers yes to this question, she will not be vaccinated. The student will be urged to immediately discuss the issue with her parent/guardian and to seek medical help. She will also be provided with contact details for a health referral service that will provide advice, support and guidance.

Q. What if my child has asthma and takes cortisone or prednisone by a “puffer”?

Polio vaccine can be safely administered to someone who has asthma regardless of which medications they are taking.

Q. Who can consent to vaccination and can consent be withdrawn?

Only parents/guardians can consent to vaccination for students less than 18 years of age. Students aged 18 years and over may consent to their own vaccination

and should complete and sign the Consent Form where ‘Parent/Guardian’ is indicated. Consent can be withdrawn at any time by providing the school with written notification of the withdrawal of consent or telephoning the school to withdraw consent.

Q. How can I access a record of the vaccinations?

Information about your child’s vaccinations will be uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child’s existing immunisation history.

Parents can request a copy of their child’s AIR Immunisation History Statement at any time up to their child being 14 years of age, and students aged 14 years and over can request their own immunisation history statement, as follows:

- using the Medicare online account through [myGov my.gov.au/](http://myGov.my.gov.au/)
- using the Medicare Express Plus App www.servicesaustralia.gov.au/express-plus-mobile-apps
- calling the AIR General Enquiries Line on 1800 653 809.

Q. What can I do if my child missed out on the vaccine at school because of illness or absence on the day of the nurses’ visit?

If vaccination has been missed at school, catch-up should occur as soon as possible. Parents should contact their local GP or pharmacist to arrange vaccination.

Q. What will happen to my child’s information?

The information you provide on the Consent Form is subject to strict confidentiality and privacy protections contained in NSW and Commonwealth legislation (see the enclosed Privacy Statement). The information will be entered into a NSW Health immunisation register and then uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child’s existing immunisation history and viewed on MyGov.

Q. Where can I find more information about school vaccination?

More information is available:

- by visiting the NSW Health website at www.health.nsw.gov.au/schoolvaccination
- by contacting your local public health unit on 1300 066 055

Consent for Polio Vaccination

Parent/Guardian to complete. Please print in **CAPITAL** letters using a **black** or **blue** pen.

1. Student's Details

Surname

Given Name/s

Date of Birth

 / / **20**

Gender

 M F

Indeterminate/
Intersex/
Unspecified

Grade

Name of School

Medicare Number

Number beside your child's name on the Medicare card

2. Indigenous Status

No Yes, Aboriginal Yes, Torres Strait Islander Yes, both Aboriginal and Torres Strait Islander

3. Your Details - Parent or Legal Guardian

I have read and understood the information provided regarding the benefits and the possible side effects of the polio vaccine.

I hereby give consent for my child, named above, to receive a 2 dose course of polio vaccine.

I declare, to the best of my knowledge, that my child:

- Has not had an anaphylactic reaction following any vaccine.
- Does not have an anaphylactic sensitivity to any of the vaccine components listed in the enclosed parent information sheet.
- Is not pregnant.

Name of Parent/Guardian (e.g. JOHN SMITH)

Home Address (e.g. 5 SMITH LANE)

Suburb

Postcode

Mobile Number

Best Alternate Number (include area code e.g. 02)

Signature of Parent/Guardian

Date

 / / **20**

What to do after the vaccination

- Keep this record, as you may be required to provide this information later.
- Information about your child's vaccinations will automatically be uploaded to the Australian Immunisation Register (AIR). You may wish to update your GP regarding the vaccination date.

What to do if a local reaction occurs at the injection site

- Put a cold damp cloth on the injection site to relieve tenderness.
- Take paracetamol for pain.
- Drink extra fluids.

If your child suffers a reaction that you are concerned about please contact your local doctor.

What to do after the vaccination

- Keep this record, as you may be required to provide this information later.
- Information about your child's vaccinations will automatically be uploaded to the Australian Immunisation Register (AIR). You may wish to update your GP regarding the vaccination date.

What to do if a local reaction occurs at the injection site

- Put a cold damp cloth on the injection site to relieve tenderness.
- Take paracetamol for pain.
- Drink extra fluids.

If your child suffers a reaction that you are concerned about please contact your local doctor.

Polio Record of Vaccination

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)

OFFICE USE ONLY

Arm Left Right Time of Vaccination (24hr) : Vaccine Batch Number **DOSE 1**

Nurse's Signature Date / **2 0**

Arm Left Right Time of Vaccination (24hr) : Vaccine Batch Number **DOSE 2**

Nurse's Signature Date / **2 0**

Nurse's notes


Reason not vaccinated

- Absent
- Refused
- Unwell
- No signature
- Consent withdrawn
- Other

Parent/Guardian Polio Record of Vaccination

Polio Record of Vaccination

DOSE 1

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)


OFFICE USE ONLY

Arm Left Right Time of Vaccination (24hr) : Vaccine Batch Number

Nurse's Signature Date / **2 0**

Polio Record of Vaccination

DOSE 2

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)

OFFICE USE ONLY

Arm Left Right Time of Vaccination (24hr) : Vaccine Batch Number

Nurse's Signature Date /

Varicella (chickenpox) vaccine

Parent Information Sheet

NSW Health offers the vaccines recommended for adolescents by the National Health and Medical Research Council in a school vaccination program. Signed parental/guardian consent must be provided.

Your next steps

- Carefully read this information sheet.
- If you would like your child to be vaccinated against varicella, complete the Consent Form and give the signed Consent Form to your child to return to school.
- If you do NOT wish your child to be vaccinated against varicella, do NOT complete or return the Consent Form.

Q. What is varicella (chickenpox)?

Chickenpox is a highly contagious infection caused by the varicella-zoster virus. It is usually a mild disease of short duration in healthy children with symptoms such as slight fever, runny nose, feeling generally unwell and a skin rash that turns to blisters. However, it is more severe in adults and can cause serious and even fatal illness in individuals who are immunosuppressed. One in 4,000 cases will experience a sudden loss of muscle movement (acute cerebellar ataxia) while one in 100,000 will develop brain inflammation (encephalitis). Infection during pregnancy can result in congenital abnormalities in the baby, including skin scarring and limb defects.

Q. How is chickenpox spread?

Early in the illness, chickenpox is spread by coughing. Later in the illness, the virus is spread by direct contact with the fluid in the blisters. The infection is highly contagious to people who have never had chickenpox or who have not been immunised. People are infectious from one or two days before the rash appears (that is, during the runny nose phase) and up to five days after (when the blisters have formed crusts or scabs).

Q. How do vaccines work?

Vaccines work by triggering the immune system to fight certain infections. 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.

Q. How effective is the vaccine?

A single dose of chicken pox vaccine is 80-85% effective in preventing chickenpox and very effective against severe disease.

Q. Who should be vaccinated?

Students up to 14 years of age require a single dose of chickenpox vaccine, unless they have previously been vaccinated (usually at 18 months of age) or have had chickenpox disease. Students 14 years of age and older require two doses of chickenpox vaccine given at least 1-2 months apart via their doctor.

Q. Who should not be vaccinated?

Chickenpox vaccine should not be given to people who:

- have had anaphylaxis following a previous dose of vaccine
- have had anaphylaxis following any of the vaccine additives (listed over the page)
- are pregnant (pregnancy should be avoided for 28 days after vaccination)
- have received a blood transfusion/immunoglobulin injection within the previous 12 months
- have received a live vaccine in the past 4 weeks (e.g. MMR (measles, mumps and rubella), BCG (tuberculosis) or yellow fever)
- have impaired immunity i.e.
 - i. people with HIV/AIDS
 - ii. people who are receiving high-dose
 - iii. immunosuppressive treatment, such as chemotherapy, radiation therapy or high-dose oral corticosteroids
 - iv. people with severe immunocompromise, including lymphoma, leukaemia or generalised malignancy.

Q. What is anaphylaxis?

Anaphylaxis is a severe allergic reaction that may result in unconsciousness and death if not treated quickly. It occurs very rarely after any vaccination. The school immunisation nurses are fully trained in the treatment of anaphylaxis.

Q. What should I do if I have no records or I cannot remember if my child has already had chickenpox or received vaccine?

Children and adults can be safely vaccinated with chickenpox vaccine if there is an unknown history of chickenpox, or if there is no available evidence of previous vaccination with varicella vaccine.

Q. What additives does chickenpox vaccine contain?

The vaccine contains sucrose, hydrolysed porcine gelatin, urea, monosodium glutamate, residual components of MRC-5 cells, traces of neomycin and bovine serum. Additives are included in very small amounts to either assist the vaccine to work or to act as a preservative. The vaccine was exposed to bovine-derived materials during manufacture.

Q. How safe are vaccines?

Vaccines used in Australia are safe and must pass strict safety testing before being approved by the Therapeutic Goods Administration (TGA). In addition, the TGA monitors the safety of vaccines once they are in use.

Q. What are the side effects of varicella vaccination?

Side effects are commonly mild and usually involve redness, pain and swelling at the injection site or fever. Serious side effects are extremely rare. More information about side effects is available in the Consumer Medical Information (CMI) for the vaccine available from www.health.nsw.gov.au/schoolvaccination. Parents concerned about side effects after vaccination should contact their GP who should also make a report to the local public health unit.

Q. Should the vaccine be given to a female student who is or thinks she may be pregnant?

No. Any female student who is, or thinks she may be, pregnant should not be vaccinated. On the day of the clinic the vaccination nurse will ask female students if they are or could be pregnant. If a student answers yes to this question, she will not be vaccinated. The student will be urged to immediately discuss the issue with her parent/ guardian and to seek medical help. She will also be provided with contact details for a health referral service that will provide advice, support and guidance.

Female students who have received chickenpox vaccine should not become pregnant for 28 days after vaccination.

Q. What if my child has asthma and takes cortisone or prednisone by a “puffer”?

Chickenpox vaccine can be safely administered to someone who has asthma regardless of which medications they are taking.

Q. Can I withdraw consent?

Consent can be withdrawn at any time by providing the school with written notification of the withdrawal of consent or telephoning the school to withdraw consent.

Q. What do I do if my child missed out on the vaccine because of illness or absence on the day of the nurses' visit?

If vaccination has been missed at school, catch-up should occur as soon as possible. Parents should contact their local GP or pharmacist to arrange vaccination.

Q. How can I access a record of the vaccinations?

Information about your child's vaccinations will be uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child's existing immunisation history. Parents can request a copy of their child's AIR Immunisation History Statement at any time up to their child being 14 years of age, and students aged 14 years and over can request their own immunisation history statement, as follows:

- using the Medicare online account through myGov my.gov.au/
- using the Medicare Express Plus App www.servicessaustralia.gov.au/express-plus-mobile-apps
- calling the AIR General Enquiries Line on 1800 653 809.

Q. What will happen to my child's information?

The information you provide on the Consent Form is subject to strict confidentiality and privacy protections contained in NSW and Commonwealth legislation (see the enclosed Privacy Statement). The information will be entered into a NSW Health immunisation register and then uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child's existing immunisation history and viewed on MyGov.

Q. Where can I find more information about school vaccination?

More information is available:

- by visiting the NSW Health website at www.health.nsw.gov.au/schoolvaccination
- by contacting your local public health unit on 1300 066 055

Consent for Varicella (Chickenpox) Vaccination

Parent/Guardian to complete. Please print in **CAPITAL** letters using a **black** or **blue** pen.

1. Student's Details

Surname

Given Name/s

Date of Birth

 / / **2 0**

Gender

 M F

Indeterminate/
Intersex/
Unspecified

Grade

Name of School

Medicare Number

Number beside your child's
name on the Medicare card

2. Indigenous Status

No Yes, Aboriginal Yes, Torres Strait Islander Yes, both Aboriginal and Torres Strait Islander

3. Your Details - Parent or Legal Guardian

I have read and understood the information provided regarding the benefits and the possible side effects of the Varicella vaccine.

I hereby give consent for my child, named above, to receive a single dose of Varicella vaccine.

I declare, to the best of my knowledge, that my child:

1. Has not had an anaphylactic reaction following any vaccine.
2. Does not have an anaphylactic sensitivity to any of the vaccine components listed in the enclosed parent information sheet.
3. Is not pregnant.

Name of Parent/Guardian (e.g. JOHN SMITH)

Home Address (e.g. 5 SMITH LANE)

Suburb

Postcode

Mobile Number

Best Alternate Number (include area code e.g. 02)

Signature of Parent/Guardian

Date

 / / **2 0**

Meningococcal ACWY vaccination

Parent Information Sheet

NSW Health offers the vaccines recommended for adolescents by the National Health and Medical Research Council in a school vaccination program. Signed parental/guardian consent must be provided.

Your next steps:

- Carefully read this information sheet.
- If you would like your child to be vaccinated against meningococcal ACWY please provide your consent online or request a paper based consent form from your school.
- If you do not wish your child to be vaccinated against meningococcal ACWY, do not provide consent.

Q. How do I provide consent for school vaccination?

To provide online consent you will need:

1. Your Service NSW log-in details
 2. You and your child's Medicare card number (if you both have one)
- If you or your child do not have a Medicare card, consent can still be provided by requesting a paper-based consent form (available on request from schools).

Q. Can I withdraw consent?

Parents can withdraw consent at any time before vaccination takes place.

Where consent has been given online, please log-in to the secure NSW Health online consent portal and follow the prompts to withdraw consent.

Where consent has been given on the physical consent form, please write to or call the school to advise the student's name, school grade and those vaccines the withdrawn consent applies to.

Q. What is meningococcal disease?

Meningococcal disease is a rare but serious infection that usually leads to meningitis (inflammation of the lining of the brain and spinal cord) and/or septicaemia (blood poisoning).

Symptoms of meningococcal disease may be non-specific but may include sudden onset of fever, headache, neck stiffness, joint pain, a rash of red-purple spots or bruises, dislike of bright lights, nausea and vomiting.

Up to 10 per cent of meningococcal infections are fatal even with appropriate antibiotic treatment, and survivors may be left with long-term complications.

Q. How is meningococcal disease spread?

Meningococcal bacteria are passed between people in the saliva from the back of the nose and throat. This generally requires close and prolonged contact with a person carrying the bacteria who is usually completely well. An example of 'close and prolonged contact' is living in the same household or intimate (deep) kissing. Meningococcal bacteria are not easily spread from person to person and the bacteria do not survive well outside the human body.

Q. How do vaccines work?

Vaccines work by triggering the immune system to fight certain infections. 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.

Q. How effective is the meningococcal ACWY vaccine?

A single dose of meningococcal ACWY conjugate vaccine is very effective in providing protection against these four types of meningococcal disease. The vaccine does not protect against meningococcal disease caused by type B.

Q. Who should be vaccinated in this program?

All students in Year 10 in secondary schools, and those aged 15-19 years attending Intensive English Centres, should be vaccinated to be protected against meningococcal serogroups A, C, W and Y.

Q. Who should not be vaccinated?

Meningococcal ACWY vaccine should not be given to people who have had anaphylaxis:

- following a previous dose of meningococcal vaccine
- following any of the vaccine additives

People with a known hypersensitivity to diphtheria toxoid should also not be vaccinated with meningococcal ACWY vaccine.

Q. What is anaphylaxis?

Anaphylaxis is a severe allergic reaction that may result in unconsciousness and death if not treated quickly.

It occurs very rarely after any vaccination. The school immunisation nurses are fully trained in the treatment of anaphylaxis.

Q. Hasn't my child already received the meningococcal ACWY vaccine?

The Meningococcal ACWY vaccine has been included on the National Immunisation Program for children aged 12 months of age since July 2018. Your child may have previously received a meningococcal C vaccine which only protects against meningococcal C disease.

A small number of students with certain medical conditions (such as no spleen or immune deficiency) may have previously been given this vaccine. If so, please discuss with your GP or specialist if your child is due for a booster.

Q. My child has already received a meningococcal C vaccine - is it safe to receive meningococcal ACWY vaccine?

Most children will have received meningococcal C vaccine as infants.

In some countries an adolescent booster is recommended, and this ACWY vaccine will provide a booster dose against meningococcal C disease as well as protect against types A, W and Y. Some children will have received a dose of meningococcal C vaccine in 2015-2018 as part of the catch-up for No Jab, No Pay. Having a dose of meningococcal ACWY vaccine now is safe. It is preferable to leave at least 4 weeks between doses for optimal protection against all types.

Q. What are the other indications for this vaccine?

This vaccine is also recommended for people planning travel involving a greater risk of exposure to meningococcal disease, including the Hajj. The vaccine is also recommended for certain occupations, such as microbiology laboratory staff, and for people with certain medical conditions, such as not having a spleen.

Q. What additives does the meningococcal ACWY vaccine contain?

The vaccine may contain trometamol, sucrose and sodium chloride. Additives are included in very small amounts to either assist the vaccine to work or to act as a preservative.

Q. How safe are vaccines?

Vaccines used in Australia are safe and must pass strict safety testing before being approved by the Therapeutic Goods Administration (TGA). In addition, the TGA monitors the safety of vaccines once they are in use.

Q. What are the side effects of meningococcal ACWY vaccination?

Side effects are commonly mild and usually involve fever, headache, dizziness or pain, swelling and redness at the injection site. Injection site reactions generally resolve within 2-3 days. Serious side effects are extremely rare.

More information about side effects is available in the Consumer Medicines Information (CMI) for the vaccine available from www.health.nsw.gov.au/schoolvaccination.

Parents concerned about side effects after vaccination should contact their GP who should also make a report to the local public health unit.

Q. Should the vaccine be given to a female student who is or thinks she may be pregnant?

No. Any female student who is, or thinks she may be, pregnant should not be vaccinated. On the day of the clinic the vaccination nurse will ask female students if they are or could be pregnant. If a student answers yes to this question, she will not be vaccinated. The student will be urged to immediately discuss the issue with her parent/guardian and to seek medical help. She will also be provided with contact details for a health referral service that will provide advice, support and guidance.

Q. What if my child has asthma and takes cortisone or prednisone by a "puffer"?

Meningococcal ACWY vaccine can be safely administered to someone who has asthma regardless of which medications they are taking.

Q. What do I do if my child missed out on the vaccine because of illness or absence on the day of the nurses' visit?

If vaccination has been missed at school, catch-up should occur as soon as possible. Parents should contact their local GP or pharmacist to arrange vaccination.

Q. How can I access a record of the vaccinations?

Information about your child's vaccinations will be uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child's existing immunisation history.

Parents can request a copy of their child's AIR Immunisation History Statement at any time up to their child being 14 years of age, and students aged 14 years and over can request their own immunisation history statement, as follows:

- using the Medicare online account through myGov my.gov.au/
- using the Medicare Express Plus App servicesaustralia.gov.au/express-plus-mobile-apps
- calling the AIR General Enquiries Line on 1800 653 809.

Q. What will happen to my child's information?

The information you provide on the Consent Form is subject to strict confidentiality and privacy protections contained in NSW and Commonwealth legislation (see the enclosed Privacy Statement). The information will be entered into a NSW Health immunisation register and then uploaded to the Australian Immunisation Register (AIR) so it can be linked to your child's existing immunisation history and viewed on MyGov.

Q. Where can I find more information about school vaccination?

More information is available:

- by visiting the NSW Health website at www.health.nsw.gov.au/schoolvaccination
- by contacting your local public health unit on 1300 066 055

Consent for Meningococcal ACWY Vaccination



Parent/Guardian to complete. Please print in **CAPITAL** letters using a **black** or **blue** pen.

1. Student's Details

Surname

Given Name/s

Date of Birth

 / / 2 0

Gender

 M F

Indeterminate/
Intersex/Unspecified

Grade

Name of School

Medicare Number

Number beside your child's
name on the Medicare card

2. Indigenous Status

No Yes, Aboriginal Yes, Torres Strait Islander Yes, both Aboriginal and Torres Strait Islander

3. Your Details – Parent or Legal Guardian

I have read and understood the information provided regarding the benefits and the possible side effects of the Meningococcal ACWY vaccine.

I hereby give consent for my child, named above, to receive a single dose of Meningococcal ACWY vaccine.

I declare, to the best of my knowledge, that my child:

1. Has not had an anaphylactic reaction following any vaccine.
2. Does not have an anaphylactic sensitivity to any of the vaccine components listed in the enclosed Parent Information sheet.
3. Is not pregnant.

Name of Parent/Guardian (e.g. JOHN SMITH)

Home Address (e.g. 5 SMITH LANE)

Suburb

Postcode

Mobile Number

Best Alternate Number (include area code e.g. 02)


Email Address

Signature of Parent/Guardian

Date

 / / 2 0

Meningococcal ACWY Record of Vaccination

 Parent/Guardian to complete (these details must match the details shown on the Medicare card)

Name of Student (e.g. JANE SMITH)

OFFICE USE ONLY

Arm Left Time of Vaccination (24hr) Vaccine Batch Number
 Right :

Nurse's Signature Date
 / 2 0

Nurse's notes


Reason not vaccinated

- Absent
- Refused
- Unwell
- No signature
- Consent withdrawn
- Other

SAMPLE

Parent/Guardian Meningococcal ACWY Record of Vaccination

Meningococcal ACWY Record of Vaccination

 Parent/Guardian to complete

Name of Student (e.g. JANE SMITH)

OFFICE USE ONLY

Arm Left Time of Vaccination (24hr) Vaccine Batch Number
 Right :

Nurse's Signature Date
 /

What to do after the vaccination

- Keep this record, as you may be required to provide this information later.
- Information about your child's vaccinations will automatically be uploaded to the Australian Immunisation Register (AIR). You may wish to update your GP regarding the vaccination date.

What to do if a local reaction occurs at the injection site

- Put a cold damp cloth on the injection site to relieve tenderness.
- Take paracetamol for pain.
- Drink extra fluids.

If your child suffers a reaction that you are concerned about please contact your local doctor.