

DAEMEN FLU SHOT DECLINATION FORM (AMHERST CAMPUS)



SUBMISSION OPTIONS: Online (preferred): daemen.edu/healthupload

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New York State mandates that healthcare facilities document the influenza vaccine status of all healthcare personnel each year and that unvaccinated personnel wear a surgical mask at all times in areas where patients or residents “may be present” during the entire flu season.

If you choose not to have a flu shot this year, please complete this form to declare in writing that you are declining the vaccination and submit a copy of the completed form to the Health Services office.

I understand that because I work/will be working in a health care environment that I may place others at risk: patients and co-workers, if I work while infected with the influenza virus.

In declining an influenza vaccination for non-medical reasons, I am aware that:

- The vaccine does not cause influenza illness.
- I can be infected by the influenza virus but not feel ill and pass the virus to vulnerable patients who are at-risk of complications or death from influenza.
- I can pass influenza virus to my family, friends and co-workers.
- Influenza strains change every year and an immunization received in prior years does not usually provide immunity to this year's strain of influenza.
- I will have to wear a surgical mask at all times in areas where patients or residents may be present during the entire flu season.
- Failure to comply with institutional infection control policies is unprofessional conduct and may result in removal from the assigned site and/or disciplinary action by the University.

Student's Name (please print)

Student's Signature

Academic Program

Date Signed

For more information, visit:

https://www.health.ny.gov/prevention/immunization/health_care_personnel/