

Affiliated Physicians Daily **Baby** CV Vaccinator Questionnaire

HC or ML must complete document with all vax nurses daily. Vaccinating cannot begin until all questions are answered, reviewed and document is signed by both HC/ML and vaccinating nurse.

Date:

Vaccinating Nurse:

Location:

Shift hours:

Vaccine Type:

1. What ages are you vaccinating in your vax station today?
2. What vaccine are you administering?
3. This vaccine requires dilution. Yes or no?
4. How long can the vaccine be used after first puncture?
5. What color of vial (label and cap) will you be using today?
6. What is the dose and volume you will be administering today?
7. How many doses will you get out of one vial?
8. What does a red bracelet mean and who wears them?
9. How do you know the age and weight of the child you are vaccinating?
10. Anterolateral thigh injection to be used for what ages? Deltoid injection to be used for what ages?
11. Epinephrine or Benadryl is the first line of treatment for anaphylaxis in children?
12. What if child/guardian comes to your vax station with no age attestation?
13. True or false: all vax nurses need to note child's age and weight in the EMR notes before vaccinating?
14. Who is your head clinician today? Who is your site manager today?
15. What do you do when it is time for your break?
16. What do you do if something in the EMR is incorrect?

Date / Signature Vaccinating Nurse: _____

Date / Signature Head Clinician/Managing Lead: _____