

Today _____, I am working as a JYNNEOS Vaccinating Nurse at _____ NYC DOHMH Affiliated Physicians Vaccination Clinic. Prior to the event start time, Head Clinician/ Managing Lead _____ completed a training on the characteristics of this vaccine dose. I am aware that the dose of the JYNNEOS Vaccine I will be administering today is 0.1ml, administered intradermally using a 1mL tuberculin syringe, and a 1/4 to 1/2 in, 26 or 27 gauge needle. I am aware that a bleb must be visible when injecting the vaccine in order to be considered a successful administration, and I will always point it out to the patient

Vaccinating Nurse (Print and sign):

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Head Clinician/Managing Lead (Print and sign):

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Program/Site Manager (Print and sign):

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