**Astra Zeneca screening questions**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Calling Name** | **Date of birth** | **Date of Birth** |
| **Surname** | **Surname** | | |
| **Home address** | **Home Full Address (single line)** | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Assessors Name or another identifier:** |  | | **ID** |  | |
| **Please ask the person presenting for vaccination these questions and record that they have received appropriate counselling as to the purpose of the vaccine and side effects** | | | | | |
| **Are you currently unwell with fever, a new continuous cough or loss of smell or taste?**  **If so – do not proceed further.** | | **No** |  | **Yes** |  |
| **Have you ever had a severe allergic reaction to any vaccine before?** | | **No** |  | **Yes** |  |
| **Are you pregnant, breastfeeding or planning to be pregnant in the next 2 months?** | | **No** |  | **Yes** |  |
| **Have you got a bleeding disorder (is patient on warfarin & is INR in range?)**  (If regularly checked and latest INR equal or less than 3 no need to consult a GP-book them in for the vaccine). | | **No** |  | **Yes** |  |
| **Have you had any other vaccines within the last 7 days** | | **No** |  | **Yes** |  |
| **Have you had a positive COVID test within the last month?** | | **No** |  | **Yes** |  |
| **Are you in COVID trial?** | | **No** |  | **Yes** |  |
| **Patients are not supposed to drive for 15 min post AZ vaccination. They can stay in their car.** | |  |  |  |  |

**If any of the boxes in red are ticked, then a further review by the vaccinator must take place.**

**If you or the person presenting for are uncertain as to the response or counselling, they receive they must be brought to the attention of the vaccinator.**

***‘Administration of the COVID-19 Vaccine AstraZeneca in patients with a history of cerebral venous sinus thrombosis, acquired or hereditary thrombophilia, heparin-induced thrombocytopenia or antiphospholipid syndrome should only be considered when the potential benefit outweighs any potential risks. Patients who have experienced major venous and arterial thrombosis occurring with thrombocytopenia following vaccination with any COVID-19 vaccine should not receive a second dose of COVID-19 Vaccine AstraZeneca.’***