## HEALTH CHECK COVID-19 vaccination



**Note:** it is very important that you complete the questionnaire below. Please complete it and take it with you to your vaccination appointment.

**Note:** if you are using any medication, please bring a list of your medication with you to the vaccination location. If you do not have this list, you can request it at the pharmacy.

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1	Corona Please answer the first four questions at registration and on the day of your vaccination appointment.						
	1.1	Have you been tested positive for coronavirus in the last four weeks?	Yes	No			
	1.2	Have you presently got a fever of 38 degrees Celsius or higher?	Yes	No			
	1.3	Do you have coronavirus related symptoms such as a runny nose, cough, chest tightness, elevated temperature or fever, loss of smell or taste?	Yes	No			
		If yes, stay at home and have yourself tested for coronavirus.					
	1.4	Are you presently in home quarantine because of coronavirus?	Yes	No			
If you answer one of the questions 1.1 to 1.4 with 'yes', you cannot make an appointment.							
	1.5	Do you have an appointment soon for a vaccination other than the coronavirus vaccination?	Yes	No			
		<i>If yes:</i> check that there are at least 7 days between the corona vaccination and the other vaccination.					
	1.6	After your first corona vaccination, have you had a serious or immediate allergic reaction to the vaccination and have you been treated medically for this allergic reaction?		No en't had			
		If yes: we cannot give you a second vaccination.	-	rst corona nation yet			
2	Surg	geries					
	2.1	Will you be operated on under general anesthetic within 2 days of your first or second vaccination?	Yes	No			
If the answer to question 2.1 is 'yes', you must reschedule your appointment until after the operation.							
3	Pregnancy						
	3.1	Are you pregnant?	Yes	No			
;	3.1b	<i>If yes:</i> Have you received information about a COVID-19 vaccination during pregnancy?	Yes	No			
		: we advise you to first contact your midwife, attending physician, gynecologist or company doctor to discuss your vaccination wishes.					
		<i>If yes:</i> we request that you register your vaccination at: http://www.lareb.nl/news/moeders-van-morgen-meer-kennis-over-geneesmiddelen-en-vaccins-rondom-de-zwangerschap. Mothers of Tomorrow/Moeders van Morgen (part of Lareb) conducts research into drug use during pregnancy.					

4 1	<b>/</b> ledic	cal						
4	. <b>1</b> H	lave you ever fainted after a vaccination?	Yes	No				
4	.2 H	lave you ever had a serious allergic reaction?	Yes	No				
4.	2b <i>lf</i>	<i>f yes:</i> To what?						
4.	<b>2c</b> H	lave you been treated for it?	Yes	No				
4.	<b>2</b> d D	o you carry an EpiPen or a medical passport?	Yes	No				
4	1.3 H	lave you (had) breast cancer?	Yes	No				
4.	3b <i>lf</i>	f yes:	Left	Right				
If you have (had) breast cancer, it is important to know on which side you have (had) it, so that the placement of the vaccination is taken into account.								
4	. <b>4</b> D	o you use anticoagulants/blood thinners?	Yes	No				
4.	4b <i>lf</i>	<i>yes:</i> Which medication and dosage have you used in the last seven days?						
	If o							
you		to vaccination						
4		lave you had an epileptic seizure in the past with ever or after a vaccination?	Yes	No				
If one of the answers to questions 4.1 to 4.5 is 'yes', you will first need to talk to a doctor at the vaccination location in order to make sure that your vaccination can proceed without any problems.								
4	. <b>6</b> D	o you have a coagulation disorder?	Yes	No				
	If	f yes: which one?						
		Hemophilia Other						
		Von Willebrand disease						
		A shortage of blood platelets (thrombocytopathy/thrombocytopenia)						
If you have answered 'yes' to question 4.6, it is important that you talk to your family doctor. Please do this before you come to your vaccination appointment.								
<b>Note:</b> is your medical situation not in this health statement? For example, do you have another illness								

or do you use other medication? Then you can get vaccinated. If you have any questions about this, you can find information on the RIVM website: Questions and answers corona vaccines: disease,

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