

Del Mar College
Department of Nurse Education
Seasonal Flu Vaccine Policy/Form

To protect patients, visitors, coworkers, healthcare workers, family members and the community, health care facilities at which students are assigned for clinical rotations require all faculty, students, volunteers, contract staff, and physicians to receive a Seasonal Flu Vaccine by **October 31st** of each year.

Individuals that do not receive a flu vaccine on or before **October 31st** will be required to wear a surgical mask while on duty between **November 1st and March 31st** of each year.

In accordance with CDC guidelines, individuals who should **NOT** receive the flu vaccine include:

- Persons with severe, life-threatening allergies to the flu vaccine or any ingredient in the vaccine. This might include gelatin, antibiotics, or other ingredients

In accordance with CDC guidelines, individuals who should speak with their physician before getting the flu vaccine include:

- Persons with an allergy to eggs or any of the ingredients in the vaccine
- Persons with a history of Guillain-Barre Syndrome
- Persons with other conditions or illnesses who have questions regarding the flu vaccine

More information regarding current CDC guidelines regarding the flu vaccine can be found at www.cdc.gov/flu.

Individuals who are unable to receive the flu vaccine due to a severe, life-threatening allergy, or do not receive the flu vaccine at the recommendation of their physician, will be required to wear a surgical mask while on duty as specified above.

Faculty and students are asked to stay home if they experience flu-like symptoms. Symptoms include:

- Fever (100°F or higher)
- Sore throat
- Congestion
- Cough

Anyone who has experienced flu-like symptoms must wait 7 days after the symptoms have resolved to return to unless they have been treated with Tamiflu. If treated with Tamiflu, they may return 2 days after symptoms have resolved. Each student's instructor is responsible for monitoring student absences and their return to the clinical setting.

Students who receive the flu vaccine will receive a sticker to place on their badge indicating proof of vaccination after documentation has been submitted to the nursing office.

I have read and understand the information provided above. (Please mark below as applicable to you.)

- I have received the seasonal flu vaccine and have attached proof thereof.
- I did not receive a seasonal flu vaccine and understand I must wear a surgical mask during clinical rotations because (select one below):
 - I have a severe, life-threatening allergy to the flu vaccine or an ingredient in the vaccine.
 - My physician recommends I do not receive the flu vaccine.

Student's Name

DMC ID

Student's Signature

Date