

COVID-19 VACCINE COMMUNICATION CARD

AM DEAF OR HARD OF HEARI

I AM USING THIS CARD TO **COMMUNICATE WITH YOU**

The Best Way To Communicate With Me Is











Available?

YES

NO

YOU MAY ALSO USE THIS CARD TO **COMMUNICATE WITH ME**

This communication card does not replace the requirement of federal and state laws for effective communication to Deaf, Hard of Hearing, and DeafBlind persons, such as sign language interpreters or other services.

RESPONSE COMMUNICATION SIGNS

YES (✓)	NO (X)	Don't Know (?)
4	71	434
*	***************************************	? ?
Yes	No	Don't Know

PLEASE ASK ME BY POINTING ON PICTURES I WILL RESPOND USING RESPONSE COMMUNICATION SIGNS

PRE-VACCINATION CHECKL



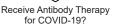


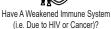


for COVID-19?

Are You Sick Today?









Take Immuno-suppressant Drugs or Therapies?















Severe Allergic Reaction To Previous (First) Vaccine Shot?



EpiPen©? Any Non-Vaccine Allergies?

Food, Pet. Venom, Environmental, or Latex Allergies

VACCINATING

Pfizer-

BioNTech



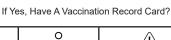
Received A Dose of Vaccine Before?



Receive Vaccine In Last 14 Days?



Vaccine Shot Now



Moderna

If Yes, Which Vaccine Product?

Janssen

(Johnson &

Johnson)



Another

Product?

Please Have A Seat

Monitor for Side **Effects**









POSSIBLE VACCINE SIDE EFFECTS



Pain



Redness



Swelling



Tiredness



Headache







POST-VACCINATION

Come Back for Second Dose?

Chills

Yes

No Done



Next Appointment Date



Record Card

The COVID-19 Vaccine Communication Card is adapted from the Illinois Deaf and Hard of Hearing Commission and the Illinois Department of Public Health, by the Vermont Department of Disabilities, Aging & Independent Living in collaboration with the Vermont Department of Health. The COVID-19 Vaccine Communication Card may be updated in the event Centers for Disease Control and Prevention updates the Vaccination Recommendations and Guidelines.