Pharmacist section

To be completed by the Boots Pharmacist

- 1. Please ensure a technician/second pharmacist has checked the named seasonal flu vaccine you have selected (see below).
- 2. Go through the customer questionnaire with the customer.
- 3. Confirm that the customer has not answered 'yes' to the first five questions.
- 4. If the customer has answered 'yes' to the latex question, you must assess the severity of the reaction and record on the allergies section of the customer guestionnaire and decide if the customer is eligible.
- 5. Using the laminated sheet, check the customer has no known allergies to the excipients in the brand selected.
- 6. If the customer is **not** eligible for this service, please indicate 'not vaccinated' and inform the customer of the refund process.
- 7. If the customer is eligible, administer the vaccine and please make sure you fill in the boxes below.
- 8. Tear off the customer questionnaire section from the leaflet.
- 9. Give the customer the advice section of the leaflet and ask them. to remain in the store for five minutes.
- 10. Retain the customer questionnaire and file securely.

Name of drug	
Selected by	
Checked by (technician / 2 nd pharmacist)	
Batch / Lot no. Expiry date DD / MM / YYYY	
(Complete if no vaccine label attached)	
Vaccinated Yes No Dose: 1 unit No. of items: 1	
Vaccination site: right arm	
Pharmacist name	
Pharmacist signature	
Date DD / MM / YYYY	
Time	
	Attach vacci label here

Customer advice

We recommend you inform your GP that you have been vaccinated so they can update your medical records. This is particularly important if you are entitled to a free NHS winter flu vaccination, as the vaccination should not be duplicated.

- 1. Being vaccinated is likely to provide effective protection against this vear's strain of the winter flu virus: however, there will still be a small chance of you catching flu.
- 2. This winter's flu vaccination includes protection against the H1N1 (swine flu) virus.
- 3. After vaccination, it takes 10-21 days to be protected against flu. You cannot catch flu from a flu vaccination.
- 4. Blood tests for HIV, hepatitis C and HTLV1 should not be taken for two weeks following vaccination because there is a possibility of a false positive result.
- 5. On rare occasions, anaphylaxis may occur. We have procedures in place to deal with this.
- 6. If you are concerned about any aspects of your vaccination or about any side effects, you should talk to your pharmacist immediately.

Side effects

Occasionally, people develop side effects after a winter flu vaccination. Most of the possible side effects are not serious and will disappear on their own in a day or two.

- Most common side effects can include fever, feeling unwell, shivering, headache, sweating, muscle and joint pain and skin reactions such as redness, swelling, pain, bruising and hardening of the skin at the injection site
- Rare reactions include nerve pain and inflammation, numbness, tingling, fits, thrombocytopaenia (a blood disorder), vasculitis (inflammation of the blood vessels) and rare nerve disorders. Seek medical advice if you experience any of these

Boots UK Limited Nottingham, England 97-42-328 63395/01

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Available at selected Boots stores only: visit www.boots.com/flujab or call **0845 070 8090**

Winter Flu **Jab Service**



Book your **flu vaccination** in store today



*Collect Boots Advantage Card points with all service purchases Standard Advantage Card terms and conditions apply



Boots Winter Flu Jab Service What is flu?

Fever, headache, sore throat and all-over aches and pains are all symptoms that can be associated with flu. Caused by an existing flu virus, it is a common infection in the UK that usually occurs during a two-month period in winter. For most people it is an unpleasant, but not life-threatening, infection.

Boots are able to provide a winter flu jab service to help you avoid flu this winter.

What are the benefits of the Winter Flu Jab Service?

The current winter flu vaccination is designed to protect against the viruses responsible for causing most cases of flu.

The Boots Winter Flu Jab Service is priced at **£12.99** and is available from early October. To find your nearest participating store, please log onto www.boots.com/flujab or contact our Customer Care team on 0845 070 8090.*

The winter flu vaccination can be given at the same time as other vaccinations.

The vaccination service will be available while stocks last.

*Any time between 8.30am and 7pm (Mon-Fri), or 8.45am and 5pm (Sat and Sun). We may record your call to help us maintain high standards of service to you.

What do I do now?

*Collect Boots Advantage Card points with all service purchases Standard Advantage Card terms and conditions apply.

guestions. The pharmacy team will confirm your eligibility for the service. 2. If you are eligible for the vaccination, book your appointment at the pharmacy counter. 3. Pay for the Boots Winter Flu Jab Service at the pharmacy till.* 4. Bring your completed form and till receipt with you to the pharmacy to receive the winter flu vaccination at the time of your appointment. 5. Remain in the store for five minutes following your vaccination in case you suffer from any immediate side effects. You may be entitled to a free NHS flu vaccination. A winter flu vaccination is offered free from your GP if you are over 65 or if you have any of the following conditions: diabetes, lung disease, asthma, heart disease, kidney disease, liver disease, lowered immunity due to disease or treatment (such as steroid medication or cancer treatment) or removal of the spleen, or if you have had a stroke. Front-line healthcare workers, poultry workers, residents of nursing or residential homes, people who are in receipt of a carer's allowance or those who are the main carer for an elderly or disabled person whose welfare may be at risk if the carer falls ill, are also eligible for a free NHS flu vaccination. Pregnant women who have not already received the H1N1 (swine flu) vaccination are also entitled to a free NHS flu vaccination.

1. Fill in the customer questionnaire with your personal details and answer the

Have Have Please

Signa

Customer questionnaire

To be retained by the store and filed securely

Mr / Mrs / N	/liss / Ms / Other				
Surname					
First name		Date of birth DD / MN	I / YYYY		
Address					
		Postcode			
Are you male or female					
Please tick answers to these questions:					
Are you under					
Are you pregr					
Do you feel ur					
Are you allerg					
Have you ever had an allergic reaction to a previous vaccination? Yes					
Have you ever had an allergic reaction to latex? Yes No					
Please state a	ny other allergies				

I confirm that I have read and understood the contents of this leaflet and confirm the information provided is correct to the best of my knowledge. I understand that the Boots Winter Flu Jab Service will only be offered if the pharmacist believes the vaccination is appropriate for me. I am happy to proceed with the vaccination at a cost of £12.99 and I understand that certain groups are entitled to a free seasonal flu vaccination from their GP. If this applies to me, I still wish to proceed at a cost of £12.99.

at	u	re

Date