

TELL US WHAT YOU WANT FOR YOUR VACCINATION!

We use the CARD system here to help make getting vaccinations a more positive experience.



COMFORT	ASK	RELAX	DISTRACT
 <ul style="list-style-type: none"> <input type="checkbox"/> Child on lap/ sit together 	 <ul style="list-style-type: none"> <input type="checkbox"/> Right side <input type="checkbox"/> Left side 	 <ul style="list-style-type: none"> <input type="checkbox"/> I want someone with me 	 <ul style="list-style-type: none"> <input type="checkbox"/> Tell me when <input type="checkbox"/> Don't tell me when
 <ul style="list-style-type: none"> <input type="checkbox"/> Sit upright 	 <ul style="list-style-type: none"> <input type="checkbox"/> About the vaccine 	 <ul style="list-style-type: none"> <input type="checkbox"/> Privacy. No extra people around 	 <ul style="list-style-type: none"> <input type="checkbox"/> Look <input type="checkbox"/> Don't look
 <ul style="list-style-type: none"> <input type="checkbox"/> Lie down 	 <ul style="list-style-type: none"> <input type="checkbox"/> Numbing cream 	 <ul style="list-style-type: none"> <input type="checkbox"/> No talking/noise 	 <ul style="list-style-type: none"> <input type="checkbox"/> Distract myself
 <ul style="list-style-type: none"> <input type="checkbox"/> Eat snack 	 <ul style="list-style-type: none"> <input type="checkbox"/> How it feels 	 <ul style="list-style-type: none"> <input type="checkbox"/> Deep breaths 	 <ul style="list-style-type: none"> <input type="checkbox"/> Talk to me

Tell us if you have any other requests: _____

Do you ever feel dizzy or faint during needles? Yes No

Some people are afraid of needles. How afraid are you?

Not at all A little bit Medium amount A lot