**2018 – 2019 Seasonal Influenza Vaccination.**

**For those aged 65 and over.**

**Introduction**

This year, the FLUAD vaccine has been recommended for the 65 years and over age group. The ingredients in this vaccine have been shown to help the body’s immune system create a greater immune response when compared to other vaccines.

However, there have been issues with ensuring adequate supply across the UK.

**Why are we offering you an alternative vaccine?**

If you have received a copy of this letter it is because you are aged 65 years or older and are eligible to receive FLUAD for free, courtesy of the NHS.

However, we do not have any stock of FLUAD so we would like to offer you an alternative. It is important to note that the alternative is thought to be less effective at preventing flu in those aged 65 years or older.

We have decided to offer an alternative for our patients as we worry that if we turn patients away who are eligible for FLUAD, then they may not receive if from anywhere else. As such, we believe that offering an alternative is better than receiving no vaccine.

**What are my options?**

We would like to offer you the opportunity of having your seasonal influenza vaccine with us and to receive the less effective alternative vaccine today. However, if you decline our offer of vaccination we advise you to try and get the more effective FLUAD from a local Pharmacy.

**What are the risks?**

Influenza vaccines are designed to help prevent or lessen the impact of Influenza, which can be life threatening. If you receive a less effective vaccine then you may be more at risk of developing influenza and developing the consequences of this.

**What should I do now?**

If you would like to take up our offer of receiving the less effective influenza vaccine, please take this opportunity to ask us questions about it to ensure you are happy with your decision.

If you are happy to proceed, we’ll need you to sign the consent below.

**Consent**

* I understand that I am consenting to receive the quadrivalent influenza vaccination which is less effective in my age group.
* I am aware that I may be able to source the FLUAD vaccine from a local pharmacy.
* I have had the opportunity to ask questions about the seasonal influenza programme.
* I am happy to be vaccinated with quadrivalent influenza vaccine today.

Name ………………………………………………………………………………….

Signature ………………………………………………………………………………….

Date ………………………………………………………………………………….