



## Declination Form for Tetanus Vaccination

Please read the attached Vaccine Information Sheet from the Centers for Disease Control and Prevention. If you have any questions regarding the declination process or policy, please contact the Biosafety and Occupational Health Department (BOHD) at (612) 626-5008 or [uohs@umn.edu](mailto:uohs@umn.edu). If you have a health concern, please contact your primary care provider or BOHD for a referral. Please return the signed form to BOHD by e-mail, mail, or fax (information below).

Full Name (please print): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Employee ID: \_\_\_\_\_

I understand that the vaccine indicated above is being offered by my employer due to my risk of occupational exposure and not for the purpose of providing general health care. I have had a chance to ask questions which were answered to my satisfaction. I know that the BOHD can provide me with a physician to consult or I can consult my private physician before declining this vaccination.

I believe that I understand the benefits and risks of the vaccine indicated above. I understand I may be at risk of acquiring an infection through occupational exposure. I have been given the opportunity to be vaccinated with the above indicated vaccine at no charge to me.

I have been given and read the applicable Vaccine Information Statement. I understand that by declining this vaccine, I continue to be at risk of acquiring infections and/or a serious disease that may have been prevented or made less severe by this vaccine. If, in the future, I continue to have occupational exposure, and I want to be vaccinated with the above indicated vaccine, I can receive the vaccine at no charge to me.

**I decline the vaccine at this time, and voluntarily assume the risks and costs associated with my decision not to receive the above indicated vaccine.**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Printed Name: \_\_\_\_\_

Send as a PDF to [uohs@umn.edu](mailto:uohs@umn.edu) or mail to one of the addresses listed below:

U.S. Mail:  
BOHD  
Thompson Center for Environmental Management  
501 23rd Ave. SE  
Minneapolis, MN 55455

Campus Mail:  
Environmental Health/Safety  
ThompCtr  
2681A  
Confidential Fax: (612) 626-9643

# Td (Tetanus, Diphtheria) Vaccine: What You Need to Know

Many vaccine information statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis)

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite [www.immunize.org/vis](http://www.immunize.org/vis)

## 1. Why get vaccinated?

Td vaccine can prevent **tetanus** and **diphtheria**.

Tetanus enters the body through cuts or wounds.

Diphtheria spreads from person to person.

- **TETANUS (T)** causes painful stiffening of the muscles. Tetanus can lead to serious health problems, including being unable to open the mouth, having trouble swallowing and breathing, or death.
- **DIPHThERIA (D)** can lead to difficulty breathing, heart failure, paralysis, or death.

## 2. Td vaccine

Td is only for children 7 years and older, adolescents, and adults.

Td is usually given as a **booster dose every 10 years**, or after 5 years in the case of a severe or dirty wound or burn.

Another vaccine, called “Tdap,” may be used instead of Td. Tdap protects against pertussis, also known as “whooping cough,” in addition to tetanus and diphtheria.

Td may be given at the same time as other vaccines.

## 3. Talk with your health care provider

Tell your vaccination provider if the person getting the vaccine:

- Has had an **allergic reaction after a previous dose of any vaccine that protects against tetanus or diphtheria**, or has any **severe, life-threatening allergies**
- Has ever had **Guillain-Barré Syndrome** (also called “GBS”)
- Has had **severe pain or swelling after a previous dose of any vaccine that protects against tetanus or diphtheria**

In some cases, your health care provider may decide to postpone Td vaccination until a future visit.

People with minor illnesses, such as a cold, may be vaccinated. People who are moderately or severely ill should usually wait until they recover before getting Td vaccine.

Your health care provider can give you more information.



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## 4. Risks of a vaccine reaction

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- Pain, redness, or swelling where the shot was given, mild fever, headache, feeling tired, and nausea, vomiting, diarrhea, or stomachache sometimes happen after Td vaccination.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

As with any medicine, there is a very remote chance of a vaccine causing a severe allergic reaction, other serious injury, or death.

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## 5. What if there is a serious problem?

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An allergic reaction could occur after the vaccinated person leaves the clinic. If you see signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness), call **9-1-1** and get the person to the nearest hospital.

For other signs that concern you, call your health care provider.

Adverse reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your health care provider will usually file this report, or you can do it yourself. Visit the VAERS website at [www.vaers.hhs.gov](http://www.vaers.hhs.gov) or call **1-800-822-7967**. *VAERS is only for reporting reactions, and VAERS staff members do not give medical advice.*

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## 6. The National Vaccine Injury Compensation Program

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The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines. Claims regarding alleged injury or death due to vaccination have a time limit for filing, which may be as short as two years. Visit the VICP website at [www.hrsa.gov/vaccinecompensation](http://www.hrsa.gov/vaccinecompensation) or call **1-800-338-2382** to learn about the program and about filing a claim.

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## 7. How can I learn more?

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- Ask your health care provider.
- Call your local or state health department.
- Visit the website of the Food and Drug Administration (FDA) for vaccine package inserts and additional information at [www.fda.gov/vaccines-blood-biologics/vaccines](http://www.fda.gov/vaccines-blood-biologics/vaccines).
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call **1-800-232-4636 (1-800-CDC-INFO)** or
  - Visit CDC's website at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines).

