

Which vaccines do I need today?

Name: _____

Birthdate: _____

Immunizations can help prevent common diseases that can be serious and costly for you or your loved ones.

Please fill out the questionnaire below to help us decide which vaccines you need based on your health and age. This list may not include every vaccine you need.

Check <i>all</i> that apply to you.	Vaccines you should get
<input type="radio"/> I am 19 years or older	<ul style="list-style-type: none">• Seasonal Flu (Influenza) vaccine every year• Tetanus (Td) vaccine every 10 years• One time dose of whooping cough (Tdap) vaccine for all adults who have never received Tdap vaccine• Pregnant women should get a Tdap vaccine during each pregnancy• Covid-19 primary series + 1st Booster
<input type="radio"/> I am 50 years or older	<ul style="list-style-type: none">• Shingles (Shingrix) vaccine (2 doses 2-6 months apart)• 2nd Covid-19 Booster
<input type="radio"/> I am 65 years or older	<ul style="list-style-type: none">• If Prevnar-13 received prior → Pneumovax 23• If Pneumovax 23 received prior → Prevnar 20• If no prior pneumonia vaccine → Prevnar 20
<input type="radio"/> I am a smoker	<ul style="list-style-type: none">• Pneumonia vaccine (Prevnar 20) one dose between ages 19-64.
<input type="radio"/> I have a chronic condition or long term health problem: Anemia, Asthma, Diabetes, Heart Disease, Liver Disease, Other	<ul style="list-style-type: none">• Pneumonia vaccine (Prevnar 20) one dose between ages 19-64.

I would like to get:

- ☐ Seasonal Flu (Influenza)
- ☐ (Moderna) Covid-19 Vaccine (please bring Covid-19 Immunization Record Card)
- ☐ Tetanus and Whooping Cough (Tdap)
- ☐ Shingles (need 2 doses 2-6 months apart)
- ☐ Pneumonia: _____ Pneumovax 23 _____ Prevnar20

If you have any questions about which vaccines are best for you, please call

Providence Community Pharmacy at 402-375-8862 and speak with one of our pharmacists.