

For Facility Use Only

INFLUENZA IMMUNIZATION - HEALTH CARE WORKER RECORD

FACILITY:	
UNIT/FLOOR/DEPARTMENT:	

Use this template if needed to track Health Care Worker Immunizations.

List all health care workers employed per unit/floor/department. Enter the date of influenza vaccine or indicate medical contraindications. If no date is entered, the employee is assumed to be unvaccinated. Please keep this record on file.

Name	Vaccine	Lot#	Site eg. LA/RA	Immunization Date	Provider Details	Medical Contraindication