

Medical/Allergy Exemption Request Form – Part B NON-FLU

To be completed by requestor’s personal health care provider.

Patient Name: _____ Date of Birth: _____

Please mark the vaccine for which your patient has a contraindication and indicate the medical contraindication:

<input type="checkbox"/> MMR vaccine	<input type="checkbox"/> Varicella vaccine	<input type="checkbox"/> Tdap vaccine
<input type="checkbox"/> Severe allergic reaction to the antibiotic neomycin.	<input type="checkbox"/> Severe allergic reaction to the antibiotic neomycin or to gelatin.	<input type="checkbox"/> Encephalopathy, coma, or prolonged seizures not attributable to another cause, within 7 days of administration of a dose of DTP, DTaP, or Tdap
<input type="checkbox"/> Severe allergic reaction after a previous dose of MMR or a component single antigen vaccine	<input type="checkbox"/> Severe allergic after a previous dose of varicella vaccine	<input type="checkbox"/> Severe allergic reaction after a previous dose of Tdap, DPT or DTaP
If any of the above reasons have been checked for any of the vaccines listed, describe reaction:		
Date of reaction:		
How long after vaccination did symptoms begin?		
<input type="checkbox"/> Pregnancy (MMR and Varicella only) EDD:		
<input type="checkbox"/> Severe immunodeficiency (MMR and Varicella only) Please describe immune deficiency. For immunosuppressive medications include dose and likely duration of treatment:		
<input type="checkbox"/> Other contraindication (describe):		

Note: Individuals may decline the hepatitis B vaccine without attestation by a health care provider. Exemptions for influenza vaccine are requested on a different form.

To a responsible degree of medical certainty, it is my opinion that my patient referenced above has the vaccine contraindication as identified.

Provider’s Signature _____ Date _____

Provider’s Name (printed) _____

Address _____ Phone _____

Fax this document to 615-936-0966 or submit electronically at <https://healthandwellness.vanderbilt.edu/submit-records/>