

CAREGIVER HEALTH SERVICES

PLEASE RETURN COMPLETED FORM TO CAREGIVER (EMPLOYEE) HEALTH SERVICES

COVID-19 Declination Form 2024-2025

Providence St. Joseph Health and its family of organizations requests caregivers participate in the COVID-19 vaccination process by either being vaccinated or completing a written declination.

LEGAL NAME: _____ DOB: _____ EMPLOYEE ID# _____

CAMPUS/SITE: _____ DEPT: _____ PHONE: _____

IF NOT EMPLOYED BY PROVIDENCE, CHECK ONE:

- Medical Provider Volunteer Agency/Contractor Student Other _____

I AM DECLINING A COVID-19 VACCINE. I ACKNOWLEDGE THAT I AM AWARE OF THE FOLLOWING FACTS:

- COVID-19 can cause severe illness or death and you can continue to have long-term health issues after COVID-19 infection. The level of protection people get from a COVID-19 infection may vary depending on how mild or severe their illness was, the time since their infection, and their age.
- Getting a COVID-19 vaccine can provide added protection for people who have already had COVID-19.
- Getting a COVID-19 vaccine is a safer and more dependable way to build immunity than getting sick with COVID-19, as vaccination causes a more predictable immune response than an infection with the virus that causes COVID-19.
- COVID-19 vaccines are recommended for healthcare workers because of the potential for workplace exposure and because of the vulnerability of the patients and residents they care for.
- COVID-19 vaccines help prevent severe illness, hospitalization, and death. Unvaccinated people are more likely to get COVID-19 and much more likely to be hospitalized and die from COVID-19, compared to people who are up to date with their COVID-19 vaccinations.
- COVID-19 vaccination is recommended for people who are pregnant, breastfeeding, or trying to get pregnant, as well as people who might become pregnant in the future. COVID-19 vaccination during pregnancy helps prevent severe illness and death and helps protect babies younger than 6 months old from hospitalization.
- Persons infected with COVID-19 virus, including those who are pre-symptomatic, can transmit the virus to coworkers and patients, some of whom may be at higher risk for complications from COVID-19.
- Some people are more likely than others to get very sick if they get COVID-19. This includes people who are older, are immunocompromised, have certain disabilities, or have underlying health conditions.
- Side effects after a COVID-19 vaccination tend to be mild, temporary, and like those experienced after routine vaccinations. Serious side effects are rare but may occur.
- I understand I must follow all current infection prevention policies and procedures for my location, such as masking, to limit the possibility of transmission of the virus.
- I understand that I can change my mind and agree to provide my vaccination record if I receive the vaccine in the future.

Resources for future reference:

[COVID-19 Vaccine Frequently Asked Questions | COVID-19 | CDC](#)[Myths & Facts About COVID-19 Vaccines | COVID-19 | CDC](#)[Healthcare Worker Vaccination is Important for Respiratory Virus Season | Blogs | CDC](#)**I am declining the COVID-19 vaccine because of:**

- My Licensed independent practitioner-documented allergy or medical contraindication to the components of the vaccine
- My religious beliefs, including my sincerely held ethical or moral beliefs

ELECTRONIC SIGNATURE ACKNOWLEDGEMENT AND CONSENT FORM

I, _____, agree and understand that by signing the Electronic Signature Acknowledgment and Consent Form, that all electronic signatures are the **legal equivalent** of my manual/handwritten signature and I consent to be legally bound to this agreement.

Signature: _____

Date: _____