CHECKLIST TO COMPLETE PRIOR TO ADMINISTRATION OF YELLOW FEVER VACCINE

This checklist is intended for use by registered healthcare professionals in the United Kingdom who have been designated in the administration of yellow fever vaccine (Stamaril) by the National Travel Health Network and Centre (NaTHNaC) in England, Northern Ireland and Wales or Public Health Scotland (PHS) in Scotland

This checklist must be used as part of the travel health consultation in order to determine:

- If yellow fever vaccination is indicated for the intended destination(s), based on WHO International Health Regulations¹
- If there are any contraindications, warnings or precautions for use of yellow fever vaccine in the individual

This checklist should support appropriate evaluation of whether the benefit of vaccination outweighs the risk for the individual

This checklist is not a replacement for the full travel health risk assessment by a qualified practitioner¹

Yellow fever vaccine must only be administered in a registered Yellow Fever Vaccination Centre by registered healthcare professionals who have completed the yellow fever training programme run by NaTHNaC in England, Wales and Northern Ireland or PHS in Scotland.

If there is any doubt to the Traveller's suitability for yellow fever vaccine, delay vaccination and seek expert advice from NaTHNaC (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or Public Health Scotland (www.travelhealthpro.org.uk or 0845 602 6712) or 0845 602 6712 for 0845 602 671

1.	Gender (M/F):				
2.	Traveller's age:				
3.	Intended date of Travel:				
4.	Travel destination(s) (please specify countries/areas to be visited, including during transit):				
	Individuals should not receive the vaccine if they travel to a country without an ongoing risk of YF transmission at the time of travel.				
	Is the need for YF vaccine supported by a current or periodic risk of yellow fever transmission? Yes $\hfill\Box$				
	No □				
	Is there a country requirement for an international certificate of vaccination or prophylaxis (ICVP) 2 ? Yes \Box No \Box				
For deta •	ails of recommendations and country requirement at entry please refer to: England, Northern Ireland and Wales: TravelHealthPro (www.travelhealthpro.org.uk or 0845 602 6712) Scotland: TRAVAX (www.travax.nhs.uk or 0141 300 1164)				
Contraindications: Stamaril must <u>not</u> be administered if 'yes' is ticked for any of these questions as these are likely to increase the risk of serious and/or life-threatening adverse reactions:		Please Tick			
		Yes	No		
5.	Does the Traveller have any severe hypersensitivity to YF vaccine components, particularly to eggs or chicken protein?				
6.	Has the Traveller ever experienced severe hypersensitivity reaction to a previous yellow fever vaccine or any of its components?				

² A registered healthcare professional who has completed the Yellow fever training programme

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¹ For updated yellow fever vaccination requirements and recommendations consult the WHO dedicated website www.who.int/news-room/fact-sheets/detail/yellow-fever# or refer to resources provided by national health authorities. Country requirements are subject to change at any time; it is important for travellers to ensure that they know the requirements of the country to which they are travelling by checking with the relevant consulate or embassy.

2. A subject to the between the fever travellers to the fever travellers to ensure that they will be the requirements of the country to which they are travelling by checking with the relevant consulate or embassy.

7	. Does the Traveller have any current or recent immunosuppression? (e.g. primary immunodeficiency,		
	symptomatic HIV infection, asymptomatic HIV infection accompanied by evidence of impaired immune		
	function, leukaemia or lymphoma, recent bone marrow transplant, treatment with high dose systemic		
	corticosteroids, or any other medicinal products including biologicals with known immunosuppressive		
	properties, radiotherapy, cytotoxic drugs or any other condition which may result in		
	immunocompromised status)		
8	Does the Traveller have current or history of thymus dysfunction (e.g. myasthenia gravis, Di George syndrome), thymoma?		
9	. Does the Traveller have a history of thymectomy (removal of thymus gland for any reason, including incidental thymectomy)?		
1	10. Is the Traveller currently experiencing a moderate/severe febrile illness or acute illness episode (temporare contraindication until illness resolves)?		
1	1. Is the Traveller aged less than 6 months?		
		Yes	No
Precautions: If any of the following apply, Stamaril should only be administered following a full			

Precautions: If any of the following apply, Stamaril should only be administered following a full evaluation of the specific risks and benefits and review of section 4.4 and 4.6 of the SmPC:	Yes	No
Age		
1. Is the Traveller aged 60 years or over?		
There is an increased risk of serious and potentially fatal adverse reactions in persons aged 60 years and over (refer to Notes for further information). Stamaril should be administered only when there is a significant and unavoidable risk of acquiring yellow fever infection, such as travel to an area where there is an ongoing risk of yellow fever transmission at the time of travel - this excludes travel to areas in which vaccination is 'not generally recommended or not recommended by WHO. Refer to the WHO list of countries with risk of yellow fever transmission (https://www.who.int/publications/m) or to resources provided by national health authorities (as above).		
2. Is the Traveller aged 6-9 months?		
Children aged from 6 months up to 9 months are at increased risk serious neurological adverse reactions and should only be vaccinated under special circumstances (e.g. during major outbreaks) and based on official advice. Expert advice should be sought on whether to vaccinate.		
Pregnant and breast-feeding women		
There is a probable risk of transmission of the vaccine virus to infants from breast-feeding mothers. Stamaril should not be given to nursing mothers unless when clearly needed such as during an outbreak control and following a full evaluation of the potential risks and benefits. There is insufficient information on the safety of administration during pregnancy. The vaccine should be given to pregnant women only when clearly needed and only after careful		

3. Is the Traveller breastfeeding and cannot discontinue for at least 14 days following vaccination?

4. Is the Traveller pregnant or planning a pregnancy within 1 month following vaccination?

consideration of the potential risks and benefits:

	Yes (include rationale for vaccination if 'Yes' to any of the above):						
		Rationale:					
		☐ Was the traveller informed of risks associated with vaccination					
		☐ Was a patient information leaflet (PIL) provided					
□ No:							
Name of registered healthcare professional:			Date				

Notes: (This checklist is not a replacement for a full travel health risk assessment)

Administration of Stamaril recommended?

- For updated yellow fever vaccination requirements and recommendations consult the WHO dedicated website www.who.int/news-room/fact-sheets/detail/yellow-fever# or refer to resources provided by national health authorities (England, Northern Ireland and Wales: National Travel Health Network and Centre (NaTHNaC) http://travelhealthpro.org.uk; Scotland: TRAVAX www.travax.nhs.uk).
- The vaccine should be given at least 10 days before entering an endemic area since protective immunity may not be achieved until at least this time has elapsed.

Those aged 60 years and older may have an increased risk of serious and potentially fatal adverse reactions (including systemic and neurological reactions persisting more than 48 hours, YEL-AVD and YEL-AND):

Yellow Fever Vaccine-Associated Viscerotropic Disease (YEL-AVD) which can result in multiorgan failure Yellow Fever Vaccine-Associated Neurotropic Disease (YEL-AND) which can affect the peripheral or central nervous systems³

Revaccination is not generally recommended for most healthy travellers. The duration of protection following administration of one single dose of STAMARIL is expected to last at least 10 years and may be lifelong. However, revaccination may be required in certain groups.

Additional information resources include the Stamaril Summary of Product Characteristics, the <u>yellow fever chapter</u> in the online Green Book (Immunisation against infectious disease), and the World Health Organisation webpages on yellow fever.

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³ For further information refer to Commission on Human Medicines (CHM) report https://www.gov.uk/government/publications/report-of-the-commission-on-human-medicines-expert-working-group-on-benefit-risk-and-risk-minimisation-measures-of-the-yellow-fever-vaccine