

7 Select from the following vaccines:

Live

- M-M-R II
- Priorix
- Priorix-Tetra

Tick all that apply

- ProQuad
- Rotarix

Non-live

- ActHIB
- AstraZeneca Vaxzevria
- Gardasil 9
- Hiberix
- Infanrix
- Infanrix Hexa
- Infanrix IPV

Tick all that apply

- Moderna Spikevax
- Moderna Spikevax Biv BA.1
- Moderna Spikevax Biv BA.4-5
- Nimenrix
- Novavax NUVAXOVID
- Pfizer Comirnaty
- Pfizer Comirnaty Biv BA.1
- Pfizer Comirnaty Biv BA.4-5
- Prevenar 13
- Quadracel
- Tripacel

Other Specify

Antigens exempt due to natural immunity

Natural immunity to a disease is a valid exemption to vaccination for the antigens listed below. Exemption to a combination of vaccine(s) on the basis of natural immunity is only valid if immunity is confirmed for all vaccine antigens. Advice on what constitutes acceptable evidence of natural immunity is provided on page 3 of this form.

8 The individual has a natural immunity to:

- Hepatitis B
- Mumps
- Varicella
- Measles
- Rubella

This has been confirmed by:

Laboratory testing Date of test (DD MM YYYY)

or

Physician-based clinical diagnosis Date of diagnosis (DD MM YYYY)

Privacy and your personal information

9 The privacy and security of your personal information is important to us, and is protected by law. We collect this information to provide payments and services. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to servicesaustralia.gov.au/privacy

Provider's declaration

10 I declare that:

- I am eligible to certify immunisation medical exemptions under the *Australian Immunisation Register Act 2015* and its amendments
- the information I have provided in this form is complete and correct.

I understand that:

- under the *Australian Immunisation Register Act 2015*, general practitioners, as defined in the *Health Insurance Act 1973*, are eligible to certify immunisation medical exemptions on the Australian Immunisation Register.
- paediatricians, public health physicians, infectious diseases physicians, and clinical immunologists are also eligible to certify immunisation medical exemptions on the Australian Immunisation Register.
- this form will not be accepted if it has been altered in any way or is incomplete.
- giving false or misleading information is a serious offence, under the *Criminal Code Act 1995 (Cth)*. Services Australia regularly undertakes audits and can make relevant enquiries to make sure recipients receive the correct entitlement. If we become aware of the provision of false or misleading information, or any fraudulent activity, to the extent permitted by law, the Commonwealth will pursue the relevant person(s).

Medicare Provider number or AIR Registration number

Provider's full name

Provider's signature

Date (DD MM YYYY)

Returning this form

Return the completed form online using your PRODA account and the Form upload function in Health Professional Online Services (HPOS). For more information, go to servicesaustralia.gov.au/hpos

Guidelines for immunisation medical exemption

What is considered a valid medical contraindication to immunisation?

The medical basis for vaccine exemption is to be based on guidance in *The Australian Immunisation Handbook* which is available on the Department of Health and Aged Care website immunisationhandbook.health.gov.au

The Australian Technical Advisory Group on Immunisation has released expanded guidance on acute major medical conditions that warrant a temporary medical contraindication relevant for COVID-19 vaccines. This information is available on the Department of Health and Aged Care website health.gov.au/resources/collections/covid-19-vaccination-provider-resources

Medical contraindications include:

- anaphylaxis following a previous dose of the relevant vaccine
- anaphylaxis following any component of the relevant vaccine
- significant immunocompromise (for live attenuated vaccines only).

For further details, including what is considered significant immunocompromise, see *The Australian Immunisation Handbook*. For example, HIV-infected persons in whom immunocompromise is mild can be given MMR and varicella vaccines.

Individuals should not be denied the benefits of immunisation by withholding vaccines for inappropriate reasons. A comprehensive list of false contraindications to vaccination is provided in *The Australian Immunisation Handbook*.

- Egg allergy, even severe, is not necessarily a valid exemption for any vaccine routinely recommended for children.
- Presence of a chronic underlying medical condition (apart from significant immunocompromise) is not a valid vaccine exemption.
- Family history of any adverse events following immunisation is not a valid vaccine exemption.

In what circumstances should a vaccine be temporarily deferred?

There are some circumstances where the administration of a vaccine should be deferred. These include:

- acute major medical condition
- significantly impaired immune function that is anticipated to be of short duration
- pregnancy (for live attenuated vaccines only).

While vaccination should be deferred in persons with acute febrile illness (current T $\geq 38.5^{\circ}\text{C}$) or other self-limiting acute systemic illness, this would usually be for short periods only and not require completion of this form. For detailed advice check *The Australian Immunisation Handbook*.

What evidence should I consider when assessing a possible natural immunity?

A previous infection is not a contraindication to immunisation against that same disease. Laboratory testing (via serology, antigen detection or polymerase chain reaction [PCR]) can reliably provide evidence of immunity to hepatitis B, varicella, measles, mumps and rubella. A physician-based clinical diagnosis is accepted although is less reliable than laboratory testing as these diseases are now uncommon among Australian children due to the widespread immunisation and other infections can have similar clinical presentations.

Who do I contact if I am uncertain whether to vaccinate or not?

Further advice can be sought from your state or territory health authority (see contact details below). In most states and territories specialist immunisation clinics exist which are equipped to assist with complex issues, such as how to manage patients who have experienced a previous adverse event following immunisation or who have an underlying medical condition.

Resources for communicating the risks and benefits of immunisation

The following resources are available to facilitate discussion on the risks and benefits of immunisation with patients and/or their carers, including those who may have concerns relating to vaccines and immunisation:

- The summary table inside the back cover of the *The Australian Immunisation Handbook* providing 'Comparison of the effects of diseases and the side effects of NIP vaccines'.
- Other resources available at health.gov.au/health-topics/immunisation/health-professionals
- Vaccine preventable disease and vaccine safety factsheets prepared by the National Centre for Immunisation Research and Surveillance available at ncirs.org.au/health-professionals/ncirs-fact-sheets-faqs
- Commonwealth COVID-19 vaccine hub available at health.gov.au/COVID19-vaccines

Contact details for state and territory government health authorities

Australian Capital Territory Immunisation Enquiry	immunisation@act.gov.au
New South Wales	1300 066 055
Northern Territory Centre for Disease Control	immunisation.phd@nt.gov.au
Queensland	13 HEALTH (13 4325 84)
South Australia	1300 232 272
Tasmania	1800 671 738
Victoria	immunisation@health.vic.gov.au
Western Australia	immunisation@health.wa.gov.au