

# COVID-19 VACCINE COMMUNICATION CARD



? I don't know

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O
P	Q	R	S	T	U	V	W	X	Y	Z				
		0	1	2	3	4	5	6	7	8	9			

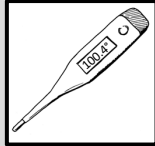
Tell the provider all of your medical conditions, including:



received a COVID-19 vaccine



allergies



fever



bleeding disorder



on blood thinner



pregnant or planning pregnancy



breastfeeding



Immunocompromised or on medicine affecting immune system

Don't get vaccine if you:



are younger than 16 years of age



had a severe allergic reaction after a previous dose of this vaccine



had a severe allergic reaction to any ingredient of this vaccine

Possible side effects:



injection site pain



injection site swelling



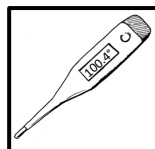
injection site redness



muscle or joint pain



swollen lymph nodes



fever



chills



tiredness



nausea



feeling unwell

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## I communicate in...

Español – Spanish

中文 – Chinese

Русский – Russian

ਪੰਜਾਬੀ – Punjabi

Tiếng Việt – Vietnamese

អក្សរខ្មែរ – Cambodian (Khmer)

Українська – Ukrainian

日本語 – Japanese

한국어 – Korean

አማርኛ – Amharic

Af-soomaali – Somali

Gagana fa'a Samoa - Samoan

Tagalog – Tagalog

Kajin Ṃajō! - Marshallese

العربية – Arabic

American Sign Language

## Communication Needs



language  
interpreter



ASL  
interpreter



get my  
family



pen and  
paper



assistive  
listening  
devices



lip reading