

FLU CONSENT & EXEMPTION

Health and Occupational Management at Emory



Need help with?

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Accessing HOME remotely

1. Visit emoryhealthcare.org
2. Scroll to the bottom of the site and click on "[An Emory Employee](#)" under the "I AM..." box
3. Click on "[Go to E-Vantage](#)"

e-Vantage

A self-service, online benefits and payroll tool, e-Vantage, allows you to view your EHC pay advice and current benefits plan enrollment, as well as update your personal contact information from any computer with Internet access.

GO TO E-VANTAGE

Outlook Web Mail

Outlook Web Mail lets you read, send and delete email; manage your Contacts; and schedule meetings on your Calendar from any computer with an internet connection.

GO TO OUTLOOK WEB MAIL

I AM...

AN EXISTING PATIENT

A VISITOR

A MEDICAL PROFESSIONAL

A JOB SEEKER

AN EMORY EMPLOYEE

For more information, visit ourhec.org/home-health

Updated 9/9/2020

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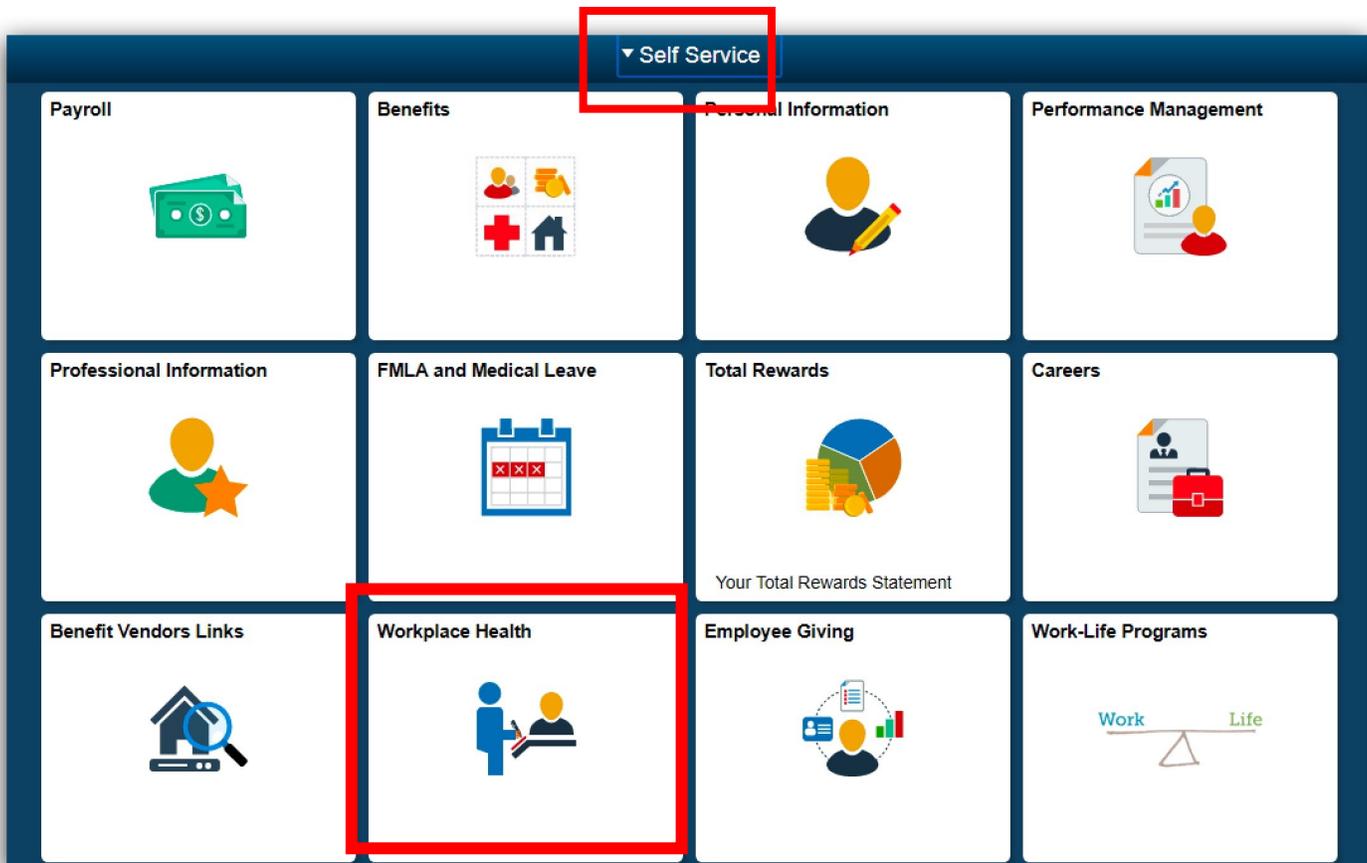
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Logging in to HOME & Influenza Vaccination Authorization

- 1) Access the HOME tool - log in to e-Vantage via the intranet, ourehc.org, or through emoryhealthcare.org/i-am/index
- 2) Select Self-Service from the dropdown menu in the blue bar
- 3) Click on the Workplace Health tile



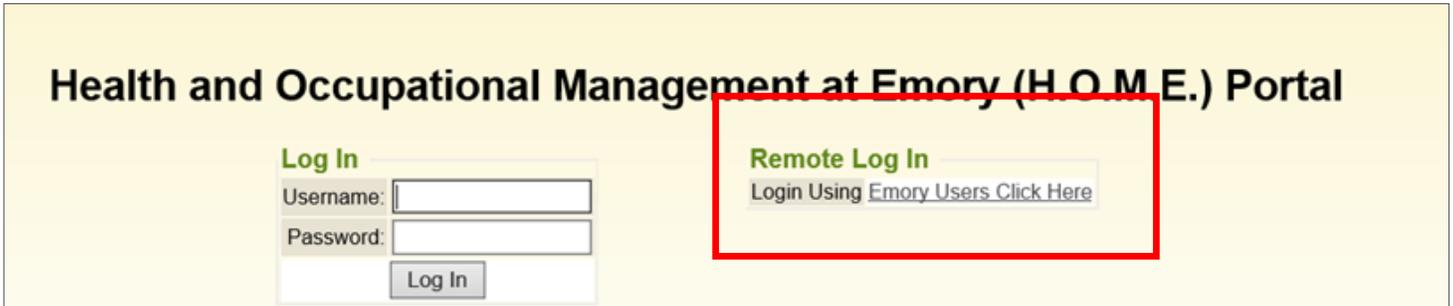
For more information, visit ourehc.org/home-health

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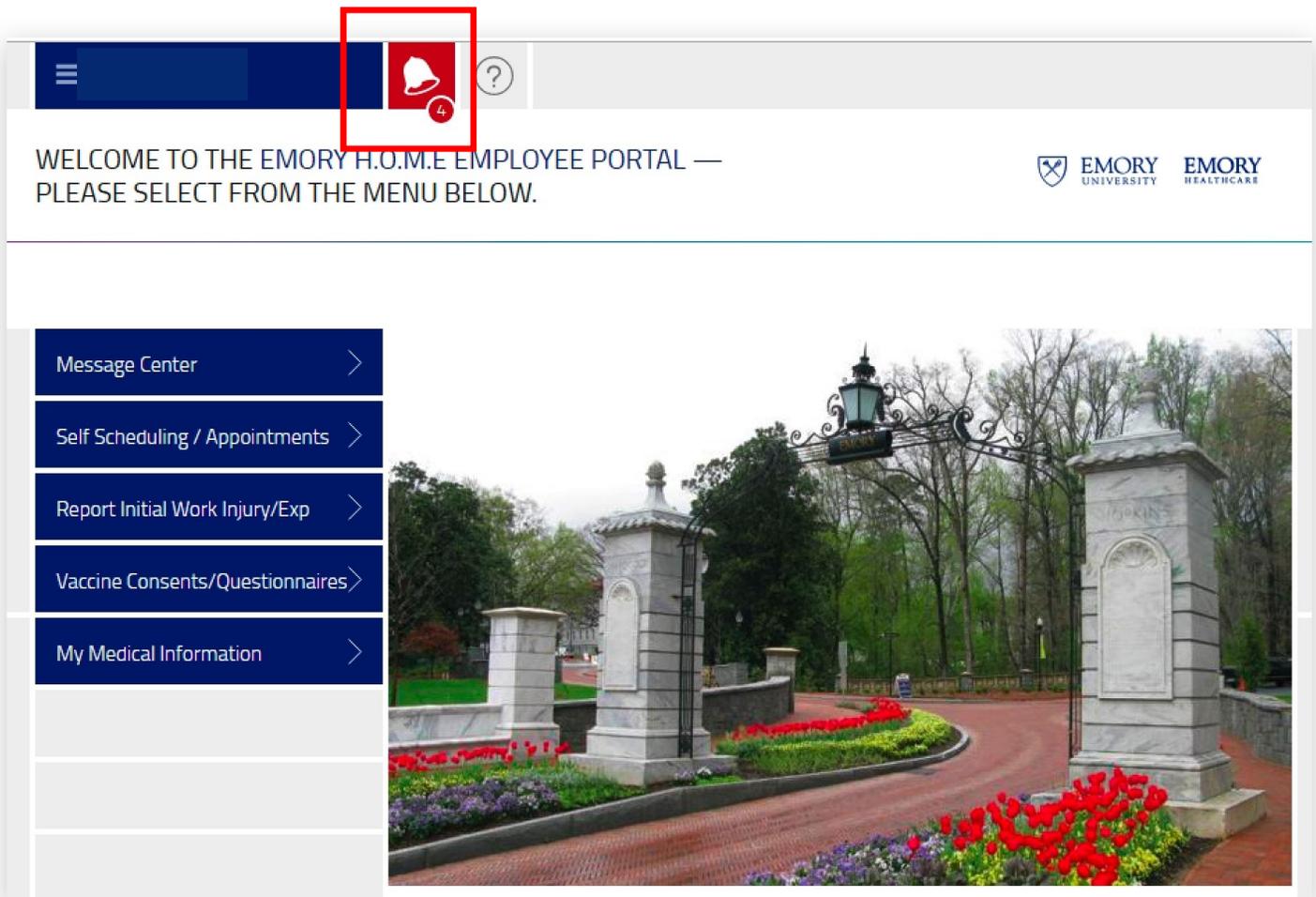
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If logging in from outside the Workspace, you will see a second logon screen.

Login to HOME under Remote Log In using your EHC username and password. (The same as Outlook.)



Once logged in, click on the bell to read your messages. When the bell is red, that



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Note:

- If you are receiving your vaccine at an Employee Health or flu vaccination marathon, **do not complete the consent for no more than 24 hours before receiving your vaccine.**

- If you are receiving your vaccine at a retail pharmacy or physician's office, please complete the consent form when you are ready to upload your documentation.

When you are ready, begin the Influenza Consent or Exemption form.



Read the influenza education information and answer the questionnaire.

If you have not read the influenza education, please click save for later on the bottom LEFT of this questionnaire, and navigate to the link below. You will need to copy and past the link into your web browser.

VIS in English: <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/flu.html>

VIS in Spanish: available at the site

Influenza Education Acknowledgement * Yes

Have you already received your flu vaccine this season?

Save for later

For more information, visit ourhec.org/home-health

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Completing consent for a flu vaccination marathon or Employee Health Office

If you select “**No**” that you have not already received your vaccine this season, you will receive a blue warning box directing you to further questions. Answer “No” if you will be receiving your flu vaccine at a flu vaccination marathon of Employee Health Office.

Once you select this option, you cannot change your choice.

Influenza Education Acknowledgement * Yes

Have you already received your flu vaccine this season?

Will you be receiving your flu vaccine from Employee Health or do you need to apply for an exemption? *

NOTE: If you plan on receiving your vaccine at a different facility, such as your family doctor's office or a retail pharmacy (CVS or Walgreens), please click save for later on the bottom LEFT of this questionnaire and fill this form out when you have documentation of your vaccine.

Are you allergic to any components of the influenza vaccine? *

Do you have a latex allergy? *

Have you had a fever of at least 100.4 F in the last 24 hours? *

Have you ever had Guillain-Barre Syndrome within 6 weeks of receiving an influenza vaccine? *

Guillain-Barre syndrome: a rare disorder in which your body's immune system affects the nerves producing weakness, tingling or paralyzing of your extremities or whole body.

Have you ever experienced an anaphylactic reaction to the influenza vaccine? *

Anaphylactic reaction: A rapidly developing life-threatening allergy or reaction that is sudden and affects more than one system of the body. Symptoms may include a an immediate skin rash, nausea, vomiting, difficulty breathing, and shock

Do you currently have a bleeding disorder or are you on anticoagulant therapy (Coumadin)? *

For more information, visit ourhec.org/home-health

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Filing a medical exemption?

Before logging in to HOME to file your medical exemption, follow the below steps.

- 1.) Download the medical exemption form from ourehc.org/flu and have the form completed by your physician's office.
- 2.) Or, obtain a letter from your physician.
- 3.) Scan the form to your computer.

Log in to HOME and select the red bell to view the messages in your inbox. Begin the Influenza Consent or Exemption form. Select "No" that you have not already received your flu vaccine this season, then answer the exemption questions. Finally, upload your medical exemption

If you have not read the influenza education, please click save for later on the bottom LEFT of this questionnaire, and navigate to the link below. You will need to copy and past the link into your web browser.

VIS in English: <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/flu.html>

VIS in Spanish: available at the site

Influenza Education Acknowledgement *

Yes

Have you already received your flu vaccine this season?

Yes

No

Will you be receiving your flu vaccine from Employee Health or do you need to apply for an exemption? *

Vaccine from Employee Health

Apply for Exemption

Already Received Vaccine

What kind of exemption do you need to apply for?

Medical Exemption

Religious Exemption

You must provide a supporting document to be reviewed by the Flu Exemption Committee. You may upload your documentation below. If you do not have documentation, please either review your answers above for accuracy or click save for later at the bottom LEFT of the questionnaire to complete at a later date.

Please upload a copy of your medical exemption documentation (PNG, PDF or JPG file only). Your influenza immunization requirement will not be complete without supporting documentation. *

Choose file

Save for later

SUBMIT

Filing a religious exemption?

Log in to HOME and select the red bell to view the messages in your inbox. Begin the Influenza Consent or Exemption form. Select "No" that you have not already received your flu vaccine this season, then answer the exemption questions. You will need to provide a description of your religious belief, doctrine, tenet or practice and click submit.

If you have not read the influenza education, please click save for later on the bottom LEFT of this questionnaire, and navigate to the link below. You will need to copy and past the link into your web browser.

VIS in English: <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/flu.html>

VIS in Spanish: available at the site

Influenza Education Acknowledgement *

Have you already received your flu vaccine this season?

Will you be receiving your flu vaccine from Employee Health or do you need to apply for an exemption? *

What kind of exemption do you need to apply for?

Religious Exemption: To apply for an exemption due to a sincerely held religious belief, doctrine, tenet or practice, please describe such religious belief, doctrine, tenet or practice and attest that you sincerely hold it: *

I attest that I sincerely hold the above-referenced religious belief, doctrine, tenet or practice that is inconsistent with my receipt of the seasonal influenza vaccine. I also attest that the information submitted on this form is true and stated to the best of my knowledge. *

Save for later

SUBMIT

Yes

Yes No

Vaccine from Employee Health Apply for Exemption

Already Received Vaccine

Medical Exemption Religious Exemption

I agree

Did you receive your vaccine at a retail pharmacy or a physician's office (including Emory Clinic office)?

Log in to HOME and select the red bell to view the messages in your inbox. Begin the Influenza Consent or Exemption form. Select "Yes" that you have already received your flu vaccine this season. **Be sure that you received the flu vaccine after August 1, 2020.**

If you have not read the influenza education, please click save for later on the bottom LEFT of this questionnaire, and navigate to the link below. You will need to copy and past the link into your web browser.

VIS in English: <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/flu.html>

VIS in Spanish: available at the site

Influenza Education Acknowledgement *

Have you already received your flu vaccine this season?

Was your flu vaccine received after August 1 of this year? *

Please indicate the date you received your vaccine *

Supporting Documentation

You must provide a supporting document to be reviewed by the Flu Exemption Committee. You may upload your documentation below. If you do not have documentation, please either review your answers above for accuracy or click save for later at the bottom LEFT of the questionnaire to complete at a later date.

Please upload a copy of your influenza immunization from this season (PNG, PDF or JPG file only). Your influenza immunization requirement will not be complete without supporting documentation. *

Save for later

SUBMIT

