Notice of Adachi City Voluntary Influenza Vaccination for the Elderly

【Please read and understand the following carefully and receive vaccination only when you are in good health.】

This vaccination is available only to individuals who wish to receive it. There is no obligation to receive the vaccination, and individuals who do not wish to receive it are not required to do so.

[Be sure to bring this document with you at the time of vaccination.]

※**Please fill out the consent form on the back.**

■**Implementation Period**

From October 1 (Thu.), 2026 to January 31 (Sun.), 2027

■**Eligible persons**：Persons who are registered residents of Adachi City as of the date of vaccination and meet the following criteria

① Persons who will turn **65 years old** in FY2026, and whose date of birth falls within the following range: **January 2, 1962 to April 1, 1962**

② Persons who will turn **60 years old** in FY2026, who have a disability affecting the functions of the heart, kidney, or respiratory organs, or an immune disorder caused by human immunodeficiency virus (HIV) (equivalent to Grade 1 of the Physical Disability Certificate), and whose date of birth falls within the following range: **January 2, 1967 to April 1, 1967**

■**Vaccination Fee**

Free of charge (once only during the vaccination period)

※The vaccine is valued at approximately 6,000 yen.

※Note that the second and subsequent doses will be subject to a fee (approximately 6,000 yen).

■**Vaccination locations**

Designated medical institutions within Adachi City(refer to the attached list)

※You can receive vaccination only at the designated medical institutions within Adachi City using the Vaccination Register and Screening Questionnaire.

※Details such as the start date, vaccination days and hours, and whether an appointment is required vary by medical institution. As these details may change during the fiscal year, please be sure to check with the medical institution in advance.

■**How to receive the vaccination**

On the day of vaccination, please bring the following two items to the designated medical institution.

① **"Vaccination Register and Screening Questionnaire FY2026 Influenza Vaccination for the Elderly"**
Please fill out the section inside the bold bordered box.

② **"Notice of Adachi City Voluntary Influenza Vaccination for the Elderly" (this document)**
Please fill out the consent form on the back.

※If you have difficulty signing the form yourself, a family member or your attending physician will make the decision after carefully confirming your wishes. Vaccination cannot be administered if your wishes cannot be confirmed.

What is Influenza?

(1) How does one become infected?

You can become infected by inhaling viruses through the throat or nose released by coughing, sneezing, or spitting from a person infected with influenza.

(2) What are the main symptoms?

Symptoms include a sudden high fever, headache, joint pain, and muscle pain, as well as a sore throat, cough, and runny nose.

Before receiving vaccination

(1) Things to keep in mind before vaccination

① Make an informed decision before receiving the vaccination.

Please receive the vaccination only after understanding the effects of the vaccine and its adverse reactions. If you have any concerns, consult a doctor beforehand. If you are not satisfied that you understand or agree with the vaccination, you do not need to receive it.

② Fill out the vaccination register and screening questionnaire accurately.

The vaccination register and screening questionnaire is an important document that allows the doctor to determine whether it is safe for you to receive the vaccination. Please provide accurate information about your health condition.

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(2) Persons who cannot receive the vaccination

① Persons with an obvious fever (generally temperature 37.5℃ or higher)

② Persons who clearly have a serious acute illness:
Persons who need to take medication for an acute illness should, as a general rule, postpone vaccination on that day, because it may be difficult to determine how the illness is progressing after vaccination.

③ Persons with a clear history of anaphylaxis to any of the ingredients in the vaccine:
Anaphylaxis is a severe allergic response that occurs usually within 30 minutes of vaccination.
Symptoms include sweating, acute facial swelling, severe hives all over the body, nausea, vomiting, difficulty speaking and difficulty breathing, followed by shock symptoms such as a drop in blood pressure.

④ Persons for whom a doctor determines that vaccination is otherwise inappropriate:
Even if you do not fall under ① through ③ above, if the doctor decides the vaccination is inappropriate, you cannot receive the vaccination.

(3) Persons who must consult the attending doctor before receiving the vaccination

① Persons with clear underlying conditions such as cardiovascular, kidney, liver, or blood disorders

② Persons with a history of convulsions (seizures)

③ Persons who have previously been diagnosed with an immunodeficiency disorder, or who have a close relative with congenital immunodeficiency disorder

④ Persons with interstitial pneumonia, bronchial asthma, or other respiratory diseases

(4) Interval between influenza vaccine and other vaccines

The influenza vaccine may be administered at the same time as other vaccines, such as the COVID-19 and pneumococcal vaccines, if a doctor specifically determines that concurrent administration is necessary. There are no restrictions on the interval between the influenza vaccine and other vaccinations.

Precautions after vaccination

① Sudden adverse reactions may occur within 30 minutes after vaccination. Please make sure that you can contact a doctor or medical institution promptly if necessary.

② Most adverse reactions appear within 24 hours. Please pay attention to your physical condition during this period.

③ There is no particular problem with taking a bath on the day of vaccination, but do not rub the injection site firmly. You can go about your daily life as usual, but avoid strenuous exercise and excessive alcohol consumption.

Adverse reactions of vaccination

Adverse reactions such as redness, swelling, or pain at the injection site, as well as fever, chills, headache, and general fatigue may occur, but they usually resolve within two to three days. If the symptoms are severe or persist, please consult a doctor or medical institution. In addition, the person who received the vaccination or their guardian may report symptoms occurring after vaccination to Adachi City using the "Report on Symptoms Occurring After Vaccination" form.

Remedial Measures for Health Damage caused by Vaccination

If you suffer health damage as a result of an adverse reaction to this vaccination, such as a disability that interferes with your daily life, you may be eligible for relief under the Act on the Pharmaceuticals and Medical Devices Agency.

＜Consent Form＞

I wish to receive the vaccination under the voluntary vaccination program. This form is intended to ensure the safety of vaccinations. I understand it and agree that this form will be submitted to Adachi City.

Signature of Applicant＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿

Emergency Contact＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿

Inquiries: Inoculation Subsection, Health Preventive Control Section, Hygiene Division, TEL 3880-5094

Adachi City