



**The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Department of Public Health  
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Dear Healthcare Provider:

As a healthcare provider, you can help monitor the safety of vaccines by promptly and accurately reporting any clinically significant adverse event that occurs following vaccination to the Vaccine Adverse Event Reporting System (VAERS). Clinically significant adverse events are those events that are of concern to you or your vaccinated patients or their caregivers. Please report clinically significant adverse events after vaccination, whether or not you administered the vaccine and even if you are not sure if the vaccine caused the adverse event.

VAERS is a US vaccine safety surveillance system, co-managed by the Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA). VAERS is the front-line monitoring system for collecting and analyzing voluntary reports of adverse events following vaccination. CDC and FDA analyze VAERS reports to identify potential vaccine safety concerns that may need further study or public health action.

There are three ways to report to VAERS:

- 1) Submit online via a secure website at <https://secure.vaers.org/VaersDataEntryintro.htm>
- 2) Fax a completed VAERS form to 877-721-0366, or
- 3) Mail a completed VAERS form to VAERS, P.O. Box 1100, Rockville, MD 20849-1100.

A VAERS form may be downloaded from the VAERS website at [www.vaers.hhs.gov/pdf/vaers\\_form.pdf](http://www.vaers.hhs.gov/pdf/vaers_form.pdf). Alternatively, you may request a VAERS form by sending an email to [info@vaers.org](mailto:info@vaers.org), by calling toll-free 800-822-7967, or by sending a faxed request to 877-721-0366. For additional information on VAERS or vaccine safety, visit the VAERS website at [www.vaers.hhs.gov](http://www.vaers.hhs.gov) or call 800-822-7967. You can also call the Massachusetts Department of Public Health at 617-983-6800 and ask to speak with a nurse or epidemiologist if you have any questions. When submitting a report to VAERS, please include as much information requested on the form as possible to assist VAERS staff analyze and follow-up of the adverse event. For example, please include information about vaccination location, date, vaccine type, lot number and dose. The form also includes a space to provide contact information for the person reporting the adverse event.

Influenza vaccination record cards <http://www.cdc.gov/h1n1flu/vaccination/slv/pdf/h1n1vaxrecord.pdf> will be given to people who receive 2009 influenza A (H1N1) monovalent vaccine. The information on this card may be helpful in completing a VAERS report for an adverse event that occurred after 2009 H1N1 or seasonal influenza vaccines.

Thank you in advance for your support of our nation's immunization programs. Together we can ensure that vaccination continues to be as safe as possible.

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