

# TELL US WHAT YOU WANT FOR YOUR VACCINATION



cardsystem.ca

We use the CARD system to help make getting vaccinations a more positive experience. Choose from the options below.

## I WANT...

### COMFORT



- ☐ Child on lap/  
sit together



- ☐ Sit upright  
☐ Lie down

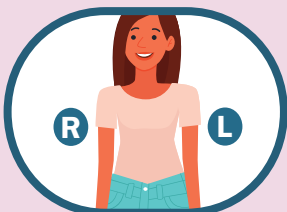


- ☐ Eat snack

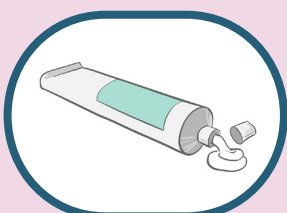
### ASK



- ☐ About the vaccine  
☐ What will happen



- ☐ For right side  
☐ For left side

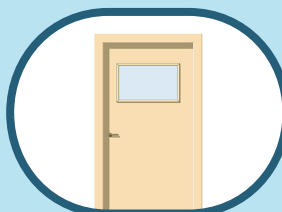


- ☐ About other ways  
to make it better

### RELAX



- ☐ I want someone  
with me



- ☐ Privacy. No extra  
people around

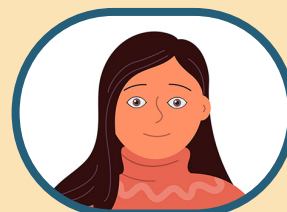


- ☐ Talk to me about  
something I like  
☐ No talking/noise

### DISTRACT



- ☐ Tell me when  
☐ Don't tell me when



- ☐ Look  
☐ Don't look



- ☐ Use item from  
home  
☐ Item from clinic

Tell us if you have any other requests: \_\_\_\_\_

Do you ever feel dizzy or faint during needles? ☐ Yes ☐ No

Some people are afraid of needles. How afraid are you?

☐ Not at all ☐ A little bit ☐ Medium amount ☐ A lot

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