

VA New Mexico Health Care System Employee Health Information

Name: _____ Last Four SSN: _____

Please fill out for Employee Health to complete your employee file.

Was your *laboratory titer blood test* (immunities) drawn at your pre-hire physical here or where your labs drawn from another facility for transfer?

Have you received a letter about your immunity for your *titers* drawn?

Do you want to receive any of the needed vaccinations noted in the letter?

When was the date of your last flu shot? _____

Where did you receive your last flu shot vaccination? _____

Did you give EH a copy of your COVID card or flu shot during your pre-hire physical?

Did you give Employee Health a copy of the paperwork?

Please understand that Human Resources paperwork such as COVID-19, Booster, and Influenza/Flu information does not get passed on to Employee Health. If you have a copy of your COVID-19 or flu shot, please pass it on with this paper, or take it to Employee Health. If you have questions, please contact the Employee Health Department:

Employee Health

Bldg. 1, 4th Floor

505-265-1711, ext. 4181