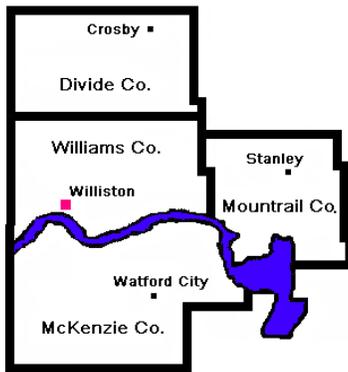


# Upper Missouri District Health Unit

*"Your Public Health Professionals"*



**DIVIDE COUNTY**  
Divide Co. Courthouse  
P.O. Box 69  
Crosby, ND 58730  
Phone 701-965-6813  
Fax 701-965-6814

**MCKENZIE COUNTY**  
P.O. Box 1066  
201 5th St. NW Suite  
1100  
Watford City, ND 58854  
Phone 701-444-3449

**MOUNTRAIL COUNTY**  
Memorial Building  
P.O. Box 925  
Stanley, ND 58784  
Phone 701-628-2951

**WILLIAMS COUNTY**  
110 W. Bdwy, Ste 101  
Williston, ND 58801-  
6032  
Phone 701-774-6400  
Fax 701-577- 8536

October 2020

Dear Parent/Guardian:

Upper Missouri District Health Unit is happy to be able to provide an influenza vaccination clinic at your child's school this year on Tuesday, October 13<sup>th</sup> from 9:00 am-1:00 pm. We encourage all children to get vaccinated against influenza this year!

Influenza ("flu") is a contagious disease that can be spread by coughing, sneezing, and close contact. Your child is likely to be exposed to this every day in school! Influenza is a respiratory disease characterized by fever/chills, sore throat, muscle aches, fatigue, cough, headache, or runny/stuffy nose. It can lead to pneumonia, diarrhea, and seizures in some people. Influenza is NOT the same thing as the "stomach flu" or gastritis, which causes nausea and vomiting.

## **Payment is determined by the following conditions:**

***\*Blue Cross/Blue Shield, Sanford Health, United Health Care, Meritain, or Medica:*** Please provide all of your policy information and we will bill directly. If payment applies, you will be billed from UMDHU.

***\*Medicaid:*** We will file with North Dakota Medicaid only. Please provide your Medicaid #.

***\*Other Insurance (Any Health Insurance other than the ones listed above):*** Please send a check, cash, or money order for \$50 per shot per child with the completed form to the school secretary. We will mail a receipt to you. Please file receipt with your insurance company to receive reimbursement.

***\*No Insurance:*** Please send a check, cash, or money order for recommended payment of \$21 per shot per child with the completed form to the school secretary. Checks and money orders can be made out to UMDHU.

Please review the enclosed information and return the Vaccine Administration Record Form to your school's secretaries by Thursday, October 8<sup>th</sup>. Please feel free to call 965-6813 with any questions.

❖ **Please answer the health questionnaire on the back side of the form.**

Sincerely,

Juliet Artman, RN, Public Health Nurse