



Bright Futures Parent Handout 6 Month Visit

Here are some suggestions from Bright Futures experts that may be of value to your family.

Feeding Your Baby

- Most babies have doubled their birth weight.
- Your baby's growth will slow down.
- If you are still breastfeeding, that's great! Continue as long as you both like.
- If you are formula feeding, use an iron-fortified formula.
- You may begin to feed your baby solid food when your baby is ready.
- Some of the signs your baby is ready for solids
 - Opens mouth for the spoon.
 - Sits with support.
 - Good head and neck control.
 - Interest in foods you eat.

Starting New Foods

- Introduce new foods one at a time.
 - Iron-fortified cereal
- Good sources of iron include
 - Red meat
- Introduce fruits and vegetables after your baby eats iron-fortified cereal or pureed meats well.
 - Offer 1–2 tablespoons of solid food 2–3 times per day.
- Avoid feeding your baby too much by following the baby's signs of fullness.
 - Leaning back
 - Turning away
- Do not force your baby to eat or finish foods.
 - It may take 10–15 times of giving your baby a food to try before she will like it.
- Avoid foods that can cause allergies—peanuts, tree nuts, fish, and shellfish.
- To prevent choking
 - Only give your baby very soft, small bites of finger foods.
 - Keep small objects and plastic bags away from your baby.

How Your Family Is Doing

- Call on others for help.
- Encourage your partner to help care for your baby.
- Ask us about helpful resources if you are alone.
- Invite friends over or join a parent group.

FUNCTIONING

- Choose a mature, trained, and responsible babysitter or caregiver.
- You can talk with us about your child care choices.

Healthy Teeth

- Many babies begin to cut teeth.
- Use a soft cloth or toothbrush to clean each tooth with water only as it comes in.
- Ask us about the need for fluoride.
- Do not give a bottle in bed.
- Do not prop the bottle.
- Have regular times for your baby to eat. Do not let him eat all day.

ORAL HEALTH

Your Baby's Development

- Place your baby so she is sitting up and can look around.
- Talk with your baby by copying the sounds your baby makes.
- Look at and read books together.
- Play games such as peekaboo, patty-cake, and so big.
- Offer active play with mirrors, floor gyms, and colorful toys to hold.
- If your baby is fussy, give her safe toys to hold and put in her mouth and make sure she is getting regular naps and playtimes.

INFANT DEVELOPMENT

Crib/Playpen

- Put your baby to sleep on her back.
 - In a crib that meets current safety standards, with no drop-side rail and slats no more than 2³/₈ inches apart. Find more information on the Consumer Product Safety Commission Web site at www.cpsc.gov.
 - If your crib has a drop-side rail, keep it up and locked at all times. Contact the crib company to see if there is a device to keep the drop-side rail from falling down.
- Keep soft objects and loose bedding such as comforters, pillows, bumper pads, and toys out of the crib.
- Lower your baby's mattress all the way.
- If using a mesh playpen, make sure the openings are less than ¼ inch apart.

Safety

- Use a rear-facing car safety seat in the back seat in all vehicles, even for very short trips.
- Never put your baby in the front seat of a vehicle with a passenger air bag.
- Don't leave your baby alone in the tub or high places such as changing tables, beds, or sofas.
- While in the kitchen, keep your baby in a high chair or playpen.
- Do not use a baby walker.
- Place gates on stairs.
- Close doors to rooms where your baby could be hurt, like the bathroom.
- Prevent burns by setting your water heater so the temperature at the faucet is 120°F or lower.
- Turn pot handles inward on the stove.
- Do not leave hot irons or hair care products plugged in.
- Never leave your baby alone near water or in bathwater, even in a bath seat or ring.
 - Always be close enough to touch your baby.
- Lock up poisons, medicines, and cleaning supplies; call Poison Help if your baby eats them.

SAFETY

What to Expect at Your Baby's 9 Month Visit

We will talk about

- Disciplining your baby
- Introducing new foods and establishing a routine
- Helping your baby learn
- Car seat safety
- Safety at home

Poison Help: 1-800-222-1222

Child safety seat inspection:
1-866-SEATCHECK; seatcheck.org

NUTRITION AND FEEDING

FAMILY FUNCTIONING



American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

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Dear Parents,

Because your child's first years of life are so important, we want to help you provide the best start for your child. Our practice has been using Ages and Stages Questionnaires (ASQ) to monitor your child's development. We are now able to provide this screening online for your convenience.

You will be asked to answer questions about some things your child can and cannot do. The questionnaire includes questions about your child's communication, gross motor, fine motor, problem solving and personal social skills. You, as a parent, will be filling these questionnaires out for your child for his/her 9 month, 12 month, 15 month, 18 month, 2 year, 3 year, 4 year, and 5 year well child checks.

We will email you a reminder to complete your questionnaire two weeks before your child's upcoming well child check. Please add our email address, info@johnscreekpediatrics.net to your safe list. That way, when we email you the reminder, it will go directly to your inbox. To participate in this screening study, please access the secure URL listed in the email. You do not need to print out the questionnaire. Complete the items online. Be sure to go through all the questions and then press the *SUBMIT* button. We will receive the results electronically. If we have not received them a few days prior to your appointment, we will give you a reminder call.

If you have any difficulties, please contact our office at 770.814.1160. We look forward to your participation in ASQ-3.

Sincerely,

Johns Creek Pediatrics, PC
Karen Dewling, M.D.
Harriette Perlstein, M.D.
Jennifer Kadlec-Looby, M.D.

Home Safety

To help ensure your home is a safe place for your child, please review the following guidelines.

Bedroom Dangers

1. The changing table can be a dangerous place for an unattended child. Always use the safety belt and keep a hand on your child at all times.
2. Baby powder should be kept out of reach of children. Avoid using it around your baby's face because talc or cornstarch in the powder can injure a baby's lungs.
3. All window coverings ideally should be cordless but if you do have drapery or blind cords make sure these are tied up without loops so your child can't reach. Loose cords can strangle a child.
4. Babies should sleep on their backs until the age of 1 year to decrease the risk of sudden infant death syndrome. The crib should be free of clutter (no stuffed toys, pillows, quilts, comforters or anything that could cover their face). The mattress should be firm, covered with a tight crib sheet, and fit snugly in the frame. The slats should be no wider than 2 3/8 inches. Make sure the head and foot board does not have any cut outs that your child may become trapped. The crib must be correctly assembled with all hardware tightened securely. Nothing with strings or ribbons should be hung over the crib.
5. Make sure night lights are away from drapes or bedding to avoid starting a fire. You should buy only "cool" nightlights.
6. Make sure all outlets in the home are covered with plug protectors.
7. Make sure window guards are secure to prevent a fall from the window.
8. Depending on the size of your home you will probably have multiple smoke alarms. Make sure there are alarms outside of every bedroom or any place where people sleep. Batteries should be changed yearly and tested monthly to make sure the alarm still works.
9. The best type of toy chest is a box or a basket without a lid. If you have a chest make sure the hinges hold the lid open, the chest is non-locking, and has air holes in case your child gets trapped inside. Any furniture that a child could pull down on top of their body should be secured to the wall to prevent this.
10. If you have a humidifier it should be cool mist to prevent burns and should be kept clean to avoid bacteria or mold growth

Kitchen Dangers

1. Any sharp objects, hazardous materials, or anything that could be harmful to your child if ingested or handled (cleaning supplies, dishwashing detergent, vitamins, medicine, matches, lighters, etc.) should be kept in drawer or cabinet with child safety locks.
2. Keep stools or chairs away from counters. Use back burners and point pot handles toward the back of the stove. Keep your child away from the stove when it is on. All appliances should be out of reach of your child and unplugged when not in use. Appliance cords should also be kept out of your child's reach.
3. Make sure your dishwasher and stove have a childproof lock. Make sure knob protectors have been placed on stove knobs.
4. Make sure your child's high chair has a safety belt with a strap between the legs.
5. Keep a working fire extinguisher on hand at all times and know how to use it.

Bathroom Dangers

1. Since there are many potential hazards in the bathroom keep the door closed with a childproof doorknob cover to keep your child out when not with you. Keep the toilet lid down and consider a lock for the lid.
2. Always stay within arm's reach of your child when he is in the bathtub. A child can drown in even a few inches of water. You should also make sure the bathmat is non-skid and the tub has nonskid strips to prevent falls.
3. Just like in the kitchen keep all medications, cleaners, toiletries, or any potentially hazardous items in a childproof locked cabinet. Make sure all medications have child resistant caps. Make sure all electrical appliances are unplugged and out of reach. Outlets should have ground fault interrupters (GFIs).
4. The hottest temperature at the faucet should be no more than 120°F to avoid burns. Usually you can adjust your hot water heater.

Other General Home Dangers

1. Make sure all furniture and any other heavy items like a TV or lamp are secure so they can't fall on your child.
2. Some houseplants are poisonous so keep out of reach of children. Teach your child to never pick and eat anything from an indoor or outdoor plant.
3. Make sure any sharp edges on tables, fireplace, etc. are padded.
4. Make sure all electrical outlets are covered with a childproof cover. There should be no frayed, worn, or damaged electrical cords and outlets should never be overloaded. Cords should also be kept out of reach of children. Run them behind furniture and don't let them hang down for children to grab.
5. All fireplaces should be blocked from access and lighters and matches kept in a locked cabinet. Only use candles when an adult is present. Candles should never be left unattended.
6. Homes without firearms are safest for children, but if you must have a gun make sure it is stored unloaded in a locked safe. Ammunition should be stored locked in a separate area.
7. Make sure your family has a fire escape plan. You should practice home fire drills with the entire family.
8. All stairs should be blocked with a child safety gate.
9. Make sure all areas of your home are free of small parts, small toys, coins, balloons, plastic bags, or anything which may present a choking hazard.
10. Paper shredders should always be unplugged and out of reach of children. Treadmills should also be unplugged and cord concealed from children.
11. Make sure the poison control number is posted by all phones and programmed into your cell phone. Teach your child how to call 911 in an emergency.

Pool and Playground Dangers

1. Home playground equipment should be assembled correctly, on level ground and anchored firmly. The swings should be made of soft material such as plastic, rubber, or canvas. Wood chips, mulch, or shredded rubber should be under the equipment. The recommended depth of the mulch is 9 inches for play equipment up to 7 feet high.
2. Pools should always have at least a 4 foot fence surrounding them and separating them from the house. The fence gate should swing out, self-close and self-latch. The latch should be high and out of reach of children.
3. You should have easy access to rescue equipment such as a shepherd's hook or a life preserver. A phone should also be easily accessible.
4. Learn CPR. Your skills could save your child's life!

DTaP (Diphtheria, Tetanus, Pertussis) Vaccine: *What You Need to Know*

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

DTaP vaccine can help protect your child from **diphtheria, tetanus, and pertussis**.

- **DIPHTHERIA (D)** can cause breathing problems, paralysis, and heart failure. Before vaccines, diphtheria killed tens of thousands of children every year in the United States.
- **TETANUS (T)** causes painful tightening of the muscles. It can cause “locking” of the jaw so you cannot open your mouth or swallow. About 1 person out of 5 who get tetanus dies.
- **PERTUSSIS (aP)**, also known as Whooping Cough, causes coughing spells so bad that it is hard for infants and children to eat, drink, or breathe. It can cause pneumonia, seizures, brain damage, or death.

Most children who are vaccinated with DTaP will be protected throughout childhood. Many more children would get these diseases if we stopped vaccinating.

2 DTaP vaccine

Children should usually get 5 doses of DTaP vaccine, one dose at each of the following ages:

- 2 months
- 4 months
- 6 months
- 15–18 months
- 4–6 years

DTaP may be given at the same time as other vaccines. Also, sometimes a child can receive DTaP together with one or more other vaccines in a single shot.

3 Some children should not get DTaP vaccine or should wait

DTaP is only for children younger than 7 years old. DTaP vaccine is not appropriate for everyone—a small number of children should receive a different vaccine that contains only diphtheria and tetanus instead of DTaP.

Tell your health care provider if your child:

- Has had an **allergic reaction after a previous dose of DTaP**, or has any **severe, life-threatening allergies**.
- Has had a **coma or long repeated seizures within 7 days after a dose of DTaP**.
- Has **seizures or another nervous system problem**.
- Has had a condition called **Guillain-Barré Syndrome (GBS)**.
- Has had **severe pain or swelling after a previous dose** of DTaP or DT vaccine.

In some cases, your health care provider may decide to postpone your child’s DTaP vaccination to a future visit.

Children with minor illnesses, such as a cold, may be vaccinated. Children who are moderately or severely ill should usually wait until they recover before getting DTaP vaccine.

Your health care provider can give you more information.



4 Risks of a vaccine reaction

- Redness, soreness, swelling, and tenderness where the shot is given are common after DTaP.
- Fever, fussiness, tiredness, poor appetite, and vomiting sometimes happen 1 to 3 days after DTaP vaccination.
- More serious reactions, such as seizures, non-stop crying for 3 hours or more, or high fever (over 105°F) after DTaP vaccination happen much less often. Rarely, the vaccine is followed by swelling of the entire arm or leg, especially in older children when they receive their fourth or fifth dose.
- Long-term seizures, coma, lowered consciousness, or permanent brain damage happen extremely rarely after DTaP vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a severe allergic reaction, other serious injury, or death.

5 What if there is a serious problem?

An allergic reaction could occur after the child leaves the clinic. If you see signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness), call 9-1-1 and get the child to the nearest hospital.

For other signs that concern you, call your child's health care provider.

Serious reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor will usually file this report, or you can do it yourself. Visit www.vaers.hhs.gov or call 1-800-822-7967. *VAERS is only for reporting reactions, it does not give medical advice.*

6 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines. Visit www.hrsa.gov/vaccinecompensation or call 1-800-338-2382 to learn about the program and about filing a claim. There is a time limit to file a claim for compensation.

7 How can I learn more?

- Ask your healthcare provider.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO) or
 - Visit www.cdc.gov/vaccines

Vaccine Information Statement (Interim)
DTaP (Diphtheria, Tetanus,
Pertussis) Vaccine



Office use only

Hepatitis B Vaccine

What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Hepatitis B is a serious disease that affects the liver. It is caused by the hepatitis B virus. Hepatitis B can cause mild illness lasting a few weeks, or it can lead to a serious, lifelong illness.

Hepatitis B virus infection can be either acute or chronic.

Acute hepatitis B virus infection is a short-term illness that occurs within the first 6 months after someone is exposed to the hepatitis B virus. This can lead to:

- fever, fatigue, loss of appetite, nausea, and/or vomiting
- jaundice (yellow skin or eyes, dark urine, clay-colored bowel movements)
- pain in muscles, joints, and stomach

Chronic hepatitis B virus infection is a long-term illness that occurs when the hepatitis B virus remains in a person's body. Most people who go on to develop chronic hepatitis B do not have symptoms, but it is still very serious and can lead to:

- liver damage (cirrhosis)
- liver cancer
- death

Chronically-infected people can spread hepatitis B virus to others, even if they do not feel or look sick themselves. Up to 1.4 million people in the United States may have chronic hepatitis B infection. About 90% of infants who get hepatitis B become chronically infected and about 1 out of 4 of them dies.

Hepatitis B is spread when blood, semen, or other body fluid infected with the Hepatitis B virus enters the body of a person who is not infected. People can become infected with the virus through:

- Birth (a baby whose mother is infected can be infected at or after birth)
- Sharing items such as razors or toothbrushes with an infected person
- Contact with the blood or open sores of an infected person
- Sex with an infected partner
- Sharing needles, syringes, or other drug-injection equipment
- Exposure to blood from needlesticks or other sharp instruments

Each year about 2,000 people in the United States die from hepatitis B-related liver disease.

Hepatitis B vaccine can prevent hepatitis B and its consequences, including liver cancer and cirrhosis.

2 Hepatitis B vaccine

Hepatitis B vaccine is made from parts of the hepatitis B virus. It cannot cause hepatitis B infection. The vaccine is usually given as 2, 3, or 4 shots over 1 to 6 months.

Infants should get their first dose of hepatitis B vaccine at birth and will usually complete the series at 6 months of age.

All **children and adolescents** younger than 19 years of age who have not yet gotten the vaccine should also be vaccinated.

Hepatitis B vaccine is recommended for unvaccinated **adults** who are at risk for hepatitis B virus infection, including:

- People whose sex partners have hepatitis B
- Sexually active persons who are not in a long-term monogamous relationship
- Persons seeking evaluation or treatment for a sexually transmitted disease
- Men who have sexual contact with other men
- People who share needles, syringes, or other drug-injection equipment
- People who have household contact with someone infected with the hepatitis B virus
- Health care and public safety workers at risk for exposure to blood or body fluids
- Residents and staff of facilities for developmentally disabled persons
- Persons in correctional facilities
- Victims of sexual assault or abuse
- Travelers to regions with increased rates of hepatitis B
- People with chronic liver disease, kidney disease, HIV infection, or diabetes
- Anyone who wants to be protected from hepatitis B

There are no known risks to getting hepatitis B vaccine at the same time as other vaccines.



3 Some people should not get this vaccine

Tell the person who is giving the vaccine:

- **If the person getting the vaccine has any severe, life-threatening allergies.**

If you ever had a life-threatening allergic reaction after a dose of hepatitis B vaccine, or have a severe allergy to any part of this vaccine, you may be advised not to get vaccinated. Ask your health care provider if you want information about vaccine components.

- **If the person getting the vaccine is not feeling well.**

If you have a mild illness, such as a cold, you can probably get the vaccine today. If you are moderately or severely ill, you should probably wait until you recover. Your doctor can advise you.

4 Risks of a vaccine reaction

With any medicine, including vaccines, there is a chance of side effects. These are usually mild and go away on their own, but serious reactions are also possible.

Most people who get hepatitis B vaccine do not have any problems with it.

Minor problems following hepatitis B vaccine include:

- soreness where the shot was given
- temperature of 99.9°F or higher

If these problems occur, they usually begin soon after the shot and last 1 or 2 days.

Your doctor can tell you more about these reactions.

Other problems that could happen after this vaccine:

- People sometimes faint after a medical procedure, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting and injuries caused by a fall. Tell your provider if you feel dizzy, or have vision changes or ringing in the ears.
- Some people get shoulder pain that can be more severe and longer-lasting than the more routine soreness that can follow injections. This happens very rarely.
- Any medication can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

5 What if there is a serious problem?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a **severe allergic reaction** can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would start a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a **severe allergic reaction** or other emergency that can't wait, call 9-1-1 or get to the nearest hospital. Otherwise, call your clinic.

Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not give medical advice.

6 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling 1-800-338-2382 or visiting the VICP website at www.hrsa.gov/vaccinecompensation. There is a time limit to file a claim for compensation.

7 How can I learn more?

- Ask your healthcare provider. He or she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO) or
 - Visit CDC's website at www.cdc.gov/vaccines

Vaccine Information Statement
Hepatitis B Vaccine



Office use only

Pneumococcal Conjugate Vaccine (PCV13)

What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Vaccination can protect both children and adults from **pneumococcal disease**.

Pneumococcal disease is caused by bacteria that can spread from person to person through close contact. It can cause ear infections, and it can also lead to more serious infections of the:

- Lungs (pneumonia),
- Blood (bacteremia), and
- Covering of the brain and spinal cord (meningitis).

Pneumococcal pneumonia is most common among adults. Pneumococcal meningitis can cause deafness and brain damage, and it kills about 1 child in 10 who get it.

Anyone can get pneumococcal disease, but children under 2 years of age and adults 65 years and older, people with certain medical conditions, and cigarette smokers are at the highest risk.

Before there was a vaccine, the United States saw:

- more than 700 cases of meningitis,
- about 13,000 blood infections,
- about 5 million ear infections, and
- about 200 deaths

in children under 5 each year from pneumococcal disease. Since vaccine became available, severe pneumococcal disease in these children has fallen by 88%.

About 18,000 older adults die of pneumococcal disease each year in the United States.

Treatment of pneumococcal infections with penicillin and other drugs is not as effective as it used to be, because some strains of the disease have become resistant to these drugs. This makes prevention of the disease, through vaccination, even more important.

2 PCV13 vaccine

Pneumococcal conjugate vaccine (called PCV13) protects against 13 types of pneumococcal bacteria.

PCV13 is routinely given to children at 2, 4, 6, and 12–15 months of age. It is also recommended for children and adults 2 to 64 years of age with certain health conditions, and for all adults 65 years of age and older. Your doctor can give you details.

3 Some people should not get this vaccine

Anyone who has ever had a life-threatening allergic reaction to a dose of this vaccine, to an earlier pneumococcal vaccine called PCV7, or to any vaccine containing diphtheria toxoid (for example, DTaP), should not get PCV13.

Anyone with a severe allergy to any component of PCV13 should not get the vaccine. *Tell your doctor if the person being vaccinated has any severe allergies.*

If the person scheduled for vaccination is not feeling well, your healthcare provider might decide to reschedule the shot on another day.

4 Risks of a vaccine reaction

With any medicine, including vaccines, there is a chance of reactions. These are usually mild and go away on their own, but serious reactions are also possible.

Problems reported following PCV13 varied by age and dose in the series. The most common problems reported among children were:

- About half became drowsy after the shot, had a temporary loss of appetite, or had redness or tenderness where the shot was given.
- About 1 out of 3 had swelling where the shot was given.
- About 1 out of 3 had a mild fever, and about 1 in 20 had a fever over 102.2°F.
- Up to about 8 out of 10 became fussy or irritable.

Adults have reported pain, redness, and swelling where the shot was given; also mild fever, fatigue, headache, chills, or muscle pain.

Young children who get PCV13 along with inactivated flu vaccine at the same time may be at increased risk for seizures caused by fever. Ask your doctor for more information.



Problems that could happen after any vaccine:

- People sometimes faint after a medical procedure, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting, and injuries caused by a fall. Tell your doctor if you feel dizzy, or have vision changes or ringing in the ears.
- Some older children and adults get severe pain in the shoulder and have difficulty moving the arm where a shot was given. This happens very rarely.
- Any medication can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very small chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

5

What if there is a serious reaction?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness—usually within a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 or get the person to the nearest hospital. Otherwise, call your doctor.

Reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS does not give medical advice.

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7

How can I learn more?

- Ask your healthcare provider. He or she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/vaccines

Vaccine Information Statement
PCV13 Vaccine

11/05/2015

42 U.S.C. § 300aa-26

Office Use Only



Polio Vaccine

What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

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1 Why get vaccinated?

Vaccination can protect people from **polio**. Polio is a disease caused by a virus. It is spread mainly by person-to-person contact. It can also be spread by consuming food or drinks that are contaminated with the feces of an infected person.

Most people infected with polio have no symptoms, and many recover without complications. But sometimes people who get polio develop paralysis (cannot move their arms or legs). Polio can result in permanent disability. Polio can also cause death, usually by paralyzing the muscles used for breathing.

Polio used to be very common in the United States. It paralyzed and killed thousands of people every year before polio vaccine was introduced in 1955. There is no cure for polio infection, but it can be prevented by vaccination.

Polio has been eliminated from the United States. But it still occurs in other parts of the world. It would only take one person infected with polio coming from another country to bring the disease back here if we were not protected by vaccination. If the effort to eliminate the disease from the world is successful, some day we won't need polio vaccine. Until then, we need to keep getting our children vaccinated.

2 Polio vaccine

Inactivated Polio Vaccine (**IPV**) can prevent polio.

Children

Most people should get IPV when they are children. Doses of IPV are usually given at 2, 4, 6 to 18 months, and 4 to 6 years of age.

The schedule might be different for some children (including those traveling to certain countries and those who receive IPV as part of a combination vaccine). Your health care provider can give you more information.

Adults

Most adults do not need IPV because they were already vaccinated against polio as children. But some adults are at higher risk and should consider polio vaccination, including:

- people traveling to certain parts of the world,
- laboratory workers who might handle polio virus, and
- health care workers treating patients who could have polio.

These higher-risk adults may need 1 to 3 doses of IPV, depending on how many doses they have had in the past.

There are no known risks to getting IPV at the same time as other vaccines.

3 Some people should not get this vaccine

Tell the person who is giving the vaccine:

- **If the person getting the vaccine has any severe, life-threatening allergies.**

If you ever had a life-threatening allergic reaction after a dose of IPV, or have a severe allergy to any part of this vaccine, you may be advised not to get vaccinated. Ask your health care provider if you want information about vaccine components.

- **If the person getting the vaccine is not feeling well.**

If you have a mild illness, such as a cold, you can probably get the vaccine today. If you are moderately or severely ill, you should probably wait until you recover. Your doctor can advise you.

4 Risks of a vaccine reaction

With any medicine, including vaccines, there is a chance of side effects. These are usually mild and go away on their own, but serious reactions are also possible.

Some people who get IPV get a sore spot where the shot was given. IPV has not been known to cause serious problems, and most people do not have any problems with it.



Other problems that could happen after this vaccine:

- People sometimes faint after a medical procedure, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting and injuries caused by a fall. Tell your provider if you feel dizzy, or have vision changes or ringing in the ears.
- Some people get shoulder pain that can be more severe and longer-lasting than the more routine soreness that can follow injections. This happens very rarely.
- Any medication can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at about 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

5

What if there is a serious problem?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a **severe allergic reaction** can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would start a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a **severe allergic reaction** or other emergency that can't wait, call 9-1-1 or get to the nearest hospital. Otherwise, call your clinic.

Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS does not give medical advice.

6

The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling **1-800-338-2382** or visiting the VICP website at www.hrsa.gov/vaccinecompensation. There is a time limit to file a claim for compensation.

7

How can I learn more?

- Ask your healthcare provider. He or she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/vaccines

Vaccine Information Statement
Polio Vaccine

7/20/2016

42 U.S.C. § 300aa-26

Office Use Only



Rotavirus Vaccine

What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Rotavirus is a virus that causes diarrhea, mostly in babies and young children. The diarrhea can be severe, and lead to dehydration. Vomiting and fever are also common in babies with rotavirus.

Before rotavirus vaccine, rotavirus disease was a common and serious health problem for children in the United States. Almost all children in the United States had at least one rotavirus infection before their 5th birthday.

Every year before the vaccine was available:

- more than 400,000 young children had to see a doctor for illness caused by rotavirus,
- more than 200,000 had to go to the emergency room,
- 55,000 to 70,000 had to be hospitalized, and
- 20 to 60 died.

Since the introduction of the rotavirus vaccine, hospitalizations and emergency visits for rotavirus have dropped dramatically.

2 Rotavirus vaccine

Two brands of rotavirus vaccine are available. Your baby will get either 2 or 3 doses, depending on which vaccine is used.

Doses are recommended at these ages:

- First Dose: 2 months of age
- Second Dose: 4 months of age
- Third Dose: 6 months of age (if needed)

Your child must get the first dose of rotavirus vaccine before 15 weeks of age, and the last by age 8 months. Rotavirus vaccine may safely be given at the same time as other vaccines.

Almost all babies who get rotavirus vaccine will be protected from severe rotavirus diarrhea. And most of these babies will not get rotavirus diarrhea at all.

The vaccine will not prevent diarrhea or vomiting caused by other germs.

- Another virus called porcine circovirus (or parts of it) can be found in both rotavirus vaccines. This is not a virus that infects people, and there is no known safety risk. For more information, see <http://wayback.archive-it.org/7993/20170406124518/https://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm212140.htm>

3 Some babies should not get this vaccine

A baby who has had a life-threatening allergic reaction to a dose of rotavirus vaccine should not get another dose. A baby who has a severe allergy to any part of rotavirus vaccine should not get the vaccine. *Tell your doctor if your baby has any severe allergies that you know of, including a severe allergy to latex.*

Babies with “severe combined immunodeficiency” (SCID) should not get rotavirus vaccine.

Babies who have had a type of bowel blockage called “intussusception” should not get rotavirus vaccine.

Babies who are mildly ill can get the vaccine. Babies who are moderately or severely ill should wait until they recover. This includes babies with moderate or severe diarrhea or vomiting.

Check with your doctor if your baby’s immune system is weakened because of:

- HIV/AIDS, or any other disease that affects the immune system
- treatment with drugs such as steroids
- cancer, or cancer treatment with x-rays or drugs

4 Risks of a vaccine reaction

With a vaccine, like any medicine, there is a chance of side effects. These are usually mild and go away on their own. Serious side effects are also possible but are rare.

Most babies who get rotavirus vaccine do not have any problems with it. But some problems have been associated with rotavirus vaccine:

Mild problems following rotavirus vaccine:

- Babies might become irritable, or have mild, temporary diarrhea or vomiting after getting a dose of rotavirus vaccine.



Serious problems following rotavirus vaccine:

- Intussusception is a type of bowel blockage that is treated in a hospital, and could require surgery. It happens “naturally” in some babies every year in the United States, and usually there is no known reason for it.

There is also a small risk of intussusception from rotavirus vaccination, usually within a week after the 1st or 2nd vaccine dose. This additional risk is estimated to range from about 1 in 20,000 to 1 in 100,000 US infants who get rotavirus vaccine. Your doctor can give you more information.

Problems that could happen after any vaccine:

- Any medication can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at fewer than 1 in a million doses, and usually happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

5 What if there is a serious problem?

What should I look for?

For **intussusception**, look for signs of stomach pain along with severe crying. Early on, these episodes could last just a few minutes and come and go several times in an hour. Babies might pull their legs up to their chest.

Your baby might also vomit several times or have blood in the stool, or could appear weak or very irritable. These signs would usually happen during the first week after the 1st or 2nd dose of rotavirus vaccine, but look for them any time after vaccination.

Look for anything else that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a **severe allergic reaction** can include hives, swelling of the face and throat, difficulty breathing, or unusual sleepiness. These would usually start a few minutes to a few hours after the vaccination.

What should I do?

If you think it is **intussusception**, call a doctor right away. If you can't reach your doctor, take your baby to a hospital. Tell them when your baby got the rotavirus vaccine.

If you think it is a **severe allergic reaction** or other emergency that can't wait, call 9-1-1 or get your baby to the nearest hospital.

Otherwise, call your doctor.

Afterward, the reaction should be reported to the “Vaccine Adverse Event Reporting System” (VAERS). Your doctor might file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

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Vaccine Information Statement Rotavirus Vaccine

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