IMMUNIZATION RESOURCES FOR PARENTS

2015 Edition
Dear Parent,

This booklet contains helpful information on vaccines (shots) for you and your family.

Vaccines save lives. They protect against serious diseases like measles, flu, whooping cough and chickenpox. Immunizing children against certain diseases is one important way to help them stay healthy. WIC’s mission is to be a partner with other services that are key to childhood and family well-being, such as immunizations. You are encouraged to bring your child’s shot record to your WIC appointments so that WIC staff can review that record and make sure that your child is up-to-date on all of his or her vaccines. If not, WIC staff will suggest a place you can go to get your child the vaccines he or she needs.

If your children do not have health insurance, are Medicaid-eligible, or are underinsured, they may be able to receive free vaccines at their doctor’s office through the Vaccines for Children (VFC) Program. For more information on the VFC Program, see the Q&A page in this booklet or visit www.cdc.gov/features/vfcprogram.

Adults, especially pregnant women, need vaccines too. By getting yourself vaccinated you are protecting both you and your family from getting diseases.

This booklet was created by

Every Child By Two - Carter/Bumpers Champions for Immunization

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### 2015 Recommended Immunizations for Children from Birth Through 6 Years Old

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<td>12 months</td>
<td>HepB, DTaP, Hib, PCV, IPV, MMR, Varicella</td>
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<td>15 months</td>
<td>HepB, DTaP, Hib, PCV, IPV, MMR, Varicella, HepA§</td>
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<tr>
<td>18 months</td>
<td>HepB, DTaP, Hib, PCV, IPV, MMR, Varicella, HepA§</td>
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<td>19–23 months</td>
<td>HepB, DTaP, Hib, PCV, IPV, MMR, Varicella, HepA§</td>
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<td>2–3 years</td>
<td>HepB, DTaP, Hib, PCV, IPV, MMR, Varicella, HepA§</td>
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<tr>
<td>4–6 years</td>
<td>HepB, DTaP, Hib, PCV, IPV, MMR, Varicella, HepA§</td>
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**NOTE:** If your child misses a shot, you don't need to start over, just go back to your child's doctor or the next shot. Talk with your child's doctor if you have questions about vaccines.

**FOOTNOTES:**
- *Two doses given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting a Tdap vaccine for the first time and for some other children in this age group.*
- § *Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 to 18 months later. HepA vaccination may be given to any child 12 months and older to protect against HepA. Children and adolescents who did not receive the HepA vaccine and are at high-risk, should be vaccinated against HepA.*
- "If your child has any medical conditions that put him at risk for infection or is traveling outside the United States, talk to your child's doctor about additional vaccines that he may need."
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<th>Disease symptoms</th>
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<tr>
<td>Chickenpox</td>
<td>Varicella vaccine protects against chickenpox.</td>
<td>Air, direct contact</td>
<td>Rash, tiredness, headache, fever</td>
<td>Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs)</td>
</tr>
<tr>
<td>Diphtheria</td>
<td>DTaP* vaccine protects against diphtheria.</td>
<td>Air, direct contact</td>
<td>Sore throat, mild fever, weakness, swollen glands in neck</td>
<td>Swelling of the heart muscle, heart failure, coma, paralysis, death</td>
</tr>
<tr>
<td>Hib</td>
<td>Hib vaccine protects against <em>Haemophilus influenzae</em> type b.</td>
<td>Air, direct contact</td>
<td>May be no symptoms unless bacteria enter the blood</td>
<td>Meningitis (infection of the covering around the brain and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpipe and lead to serious breathing problems), pneumonia (infection in the lungs), death</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>HepA vaccine protects against hepatitis A.</td>
<td>Direct contact, contaminated food or water</td>
<td>May be no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice (yellowing of skin and eyes), dark urine</td>
<td>Liver failure, arthralgia (joint pain), kidney, pancreatic, and blood disorders</td>
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<tr>
<td>Hepatitis B</td>
<td>HepB vaccine protects against hepatitis B.</td>
<td>Contact with blood or body fluids</td>
<td>May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain</td>
<td>Chronic liver infection, liver failure, liver cancer</td>
</tr>
<tr>
<td>Flu</td>
<td>Flu vaccine protects against influenza.</td>
<td>Air, direct contact</td>
<td>Fever, muscle pain, sore throat, cough, extreme fatigue</td>
<td>Pneumonia (infection in the lungs)</td>
</tr>
<tr>
<td>Measles</td>
<td>MMR** vaccine protects against measles.</td>
<td>Air, direct contact</td>
<td>Rash, fever, cough, runny nose, pinkeye</td>
<td>Encephalitis (brain swelling), pneumonia (infection in the lungs), death</td>
</tr>
<tr>
<td>Mumps</td>
<td>MMR** vaccine protects against mumps.</td>
<td>Air, direct contact</td>
<td>Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain</td>
<td>Meningitis (infection of the covering around the brain and spinal cord), encephalitis (brain swelling), inflammation of testicles or ovaries, deafness</td>
</tr>
<tr>
<td>Pertussis</td>
<td>DTaP* vaccine protects against pertussis (whooping cough).</td>
<td>Air, direct contact</td>
<td>Severe cough, runny nose, apnea (a pause in breathing in infants)</td>
<td>Pneumonia (infection in the lungs), death</td>
</tr>
<tr>
<td>Polio</td>
<td>IPV vaccine protects against polio.</td>
<td>Air, direct contact, through the mouth</td>
<td>May be no symptoms, sore throat, fever, nausea, headache</td>
<td>Paralysis, death</td>
</tr>
<tr>
<td>Pneumococcal</td>
<td>PCV vaccine protects against pneumococcus.</td>
<td>Air, direct contact</td>
<td>May be no symptoms, pneumonia (infection in the lungs)</td>
<td>Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death</td>
</tr>
<tr>
<td>Rotavirus</td>
<td>RV vaccine protects against rotavirus.</td>
<td>Through the mouth</td>
<td>Diarrhea, fever, vomiting</td>
<td>Severe diarrhea, dehydration</td>
</tr>
<tr>
<td>Rubella</td>
<td>MMR** vaccine protects against rubella.</td>
<td>Air, direct contact</td>
<td>Children infected with rubella virus sometimes have a rash, fever, swollen lymph nodes</td>
<td>Very serious in pregnant women—can lead to miscarriage, stillbirth, premature delivery, birth defects</td>
</tr>
<tr>
<td>Tetanus</td>
<td>DTaP* vaccine protects against tetanus.</td>
<td>Exposure through cuts in skin</td>
<td>Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever</td>
<td>Broken bones, breathing difficulty, death</td>
</tr>
</tbody>
</table>

* DTaP combines protection against diphtheria, tetanus, and pertussis.
** MMR combines protection against measles, mumps, and rubella.
# 2015 Recommended Immunizations for Children from 7 Through 18 Years Old

<table>
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<tr>
<th>7–10 YEARS</th>
<th>11–12 YEARS</th>
<th>13–18 YEARS</th>
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<tbody>
<tr>
<td>Tdap¹</td>
<td>Tdap</td>
<td>Tdap</td>
</tr>
<tr>
<td><strong>Tetanus, Diphtheria, Pertussis (Tdap) Vaccine</strong></td>
<td><strong>Human Papillomavirus (HPV) Vaccine (3 Doses)²</strong></td>
<td><strong>HPV</strong></td>
</tr>
<tr>
<td><strong>Meningococcal Conjugate Vaccine (MCV4) Dose ¹</strong></td>
<td><strong>MCV4 Dose ¹</strong></td>
<td><strong>Booster at age 16 years</strong></td>
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<thead>
<tr>
<th><strong>Influenza (Yearly)³</strong></th>
<th><strong>Pneumococcal Vaccine⁴</strong></th>
<th><strong>Hepatitis A (HepA) Vaccine Series⁵</strong></th>
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<tr>
<td><strong>Hepatitis B (HepB) Vaccine Series</strong></td>
<td><strong>Inactivated Polio Vaccine (IPV) Series</strong></td>
<td><strong>Measles, Mumps, Rubella (MMR) Vaccine Series</strong></td>
</tr>
<tr>
<td><strong>Varicella Vaccine Series</strong></td>
<td>****</td>
<td>****</td>
</tr>
</tbody>
</table>

1. Tdap vaccine is recommended at age 11 or 12 to protect against tetanus, diphtheria, and pertussis. If your child has not received any or all of the DTaP vaccine series, or if you don't know if your child has received these shots, your child needs a single dose of Tdap when they are 7-10 years old. Talk to your child's health care provider to find out if they need additional catch-up vaccines.

2. All 11 or 12 year olds—both girls and boys—should receive 3 doses of HPV vaccine to protect against HPV-related disease. The full HPV vaccine series should be given as recommended for best protection.

3. Meningococcal conjugate vaccine (MCV) is recommended at age 11 or 12. A booster shot is recommended at age 16. Teens who received MCV for the first time at age 13 through 15 years will need a one-time booster dose between the ages of 16 and 18 years. If your teenager missed getting the vaccine altogether, ask their health care provider about getting it now, especially if your teenager is about to move into a college dorm or military barracks.

4. Everyone 6 months of age and older—including preteens and teens—should get a flu vaccine every year. Children under the age of 9 years may require more than one dose. Talk to your child's health care provider to find out if they need more than one dose.

5. Pneumococcal conjugate vaccine (PCV13) and Pneumococcal polysaccharide vaccine (PPSV23) are recommended for some children 6 through 18 years old with certain medical conditions that place them at high risk. Talk to your healthcare provider about pneumococcal vaccines and what factors may place your child at high risk for pneumococcal disease.

6. Hepatitis A vaccination is recommended for older children with certain medical conditions that place them at high risk. HepA vaccine is licensed, safe, and effective for all children of all ages. Even if your child is not at high risk, you may decide you want your child protected against HepA. Talk to your healthcare provider about HepA vaccine and what factors may place your child at high risk for HepA.

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**FOOTNOTES**

¹ Tdap vaccine is recommended at age 11 or 12 to protect against tetanus, diphtheria, and pertussis. If your child has not received any or all of the DTaP vaccine series, or if you don't know if your child has received these shots, your child needs a single dose of Tdap when they are 7-10 years old. Talk to your child's health care provider to find out if they need additional catch-up vaccines.

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For more information, call toll free 1-800-CDC-INFO (1-800-232-4636) or visit [http://www.cdc.gov/vaccines/teens](http://www.cdc.gov/vaccines/teens)
Every Child By Two’s
Vaccine-Preventable Diseases eBook

VaccinateYourBaby.org/ebook.pdf

PROTECT YOUR CHILD
IMMUNIZE ON TIME, EVERY TIME.

- Diphtheria
- Haemophilus Influenzae Type B (Hib)
- Hepatitis A
- Hepatitis B
- Human Papillomavirus (HPV)
- Influenza (Flu)
- Measles
- Meningococcal Disease
- Mumps
- Pertussis (Whooping Cough)
- Polio
- Rotavirus
- Rubella
- Pneumococcal Disease
- Varicella (Chickenpox)
- Tetanus

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MEASLES

Measles is a highly contagious respiratory disease caused by a virus. The disease spreads quickly and can be serious or even fatal for small children. The disease kills hundreds of thousands of children a year around the world, most under the age of 5.

Even in previously healthy children, measles can be a serious illness requiring hospitalization in 1 out of 4 cases. As many as 1 out of every 20 children with measles gets pneumonia, and about 1 child in every 1,000 who get measles will develop encephalitis. (This is a swelling of the brain that can lead to convulsions, and can leave the child deaf or intellectually disabled.)

Recently, measles has re-emerged as a threat in the United States, despite being eliminated in 2000. Outbreaks across the country have put children at risk.

SYMPTOMS

Measles signs and symptoms appear seven to fourteen days after exposure to the virus. Signs and symptoms of measles typically include:

- Fever
- Dry cough
- Runny nose
- Sore throat
- Red eyes (conjunctivitis)
- Sensitivity to light
- Tiny white spots inside the mouth
- A skin rash made up of large, flat blotches

PREVENTION

To prevent measles, children should be vaccinated with the combined measles, mumps, and rubella (MMR) vaccine.

For the best protection against measles, your children need to receive the two recommended doses of the vaccine. To see if your children are up-to-date on their vaccines, look at the CDC’s immunization schedule and talk to your healthcare provider.

Adults born after 1957 who have not had the measles or the MMR vaccine (and don’t show evidence of immunity) should receive at least one dose of the vaccine.

For more information, visit vaccinateyourbaby.org.
You may be hearing a lot about measles lately, and all of this news on TV, social media, Internet, newspapers and magazines may leave you wondering what you as a parent really need to know about this disease. CDC has put together a list of the most important facts about measles for parents like you.

Measles can be serious.

Some people think of measles as just a little rash and fever that clears up in a few days, but measles can cause serious health complications, especially in children younger than 5 years of age. There is no way to tell in advance the severity of the symptoms your child will experience.

- About 1 in 4 people in the U.S. who get measles will be hospitalized.
- 1 out of every 1,000 people with measles will develop brain swelling, which could lead to brain damage.
- 1 or 2 out of 1,000 people with measles will die, even with the best care.

Some of the more common measles symptoms include:

- Fever
- Rash
- Runny nose
- Red eyes

Measles is very contagious.

Measles spreads through the air when an infected person coughs or sneezes. It is so contagious that if one person has it, 9 out of 10 people around him or her will also become infected if they are not protected. Your child can get measles just by being in a room where a person with measles has been, even up to two hours after that person has left. An infected person can spread measles to others even before knowing he/she has the disease—from four days before developing the measles rash through four days afterward.

Your child can still get measles in United States.

Measles was declared eliminated from the U.S. in 2000 thanks to a highly effective vaccination program. Eliminated means that the disease is no longer constantly present in this country. However, measles is still common in many parts of the world, including some countries in Europe, Asia, the Pacific, and Africa. Worldwide, an estimated 20 million people get measles and 146,000 people, mostly children, die from the disease each year.

Even if your family does not travel internationally, you could come into contact with measles anywhere in your community. Every year, measles is brought into the United States by unvaccinated travelers (Americans or foreign visitors) who get measles while they are in other countries. Anyone who is not protected against measles is at risk.

You have the power to protect your child against measles with a safe and effective vaccine.

The best protection against measles is measles-mumps-rubella (MMR) vaccine. MMR vaccine provides long-lasting protection against all strains of measles. Your child needs two doses of MMR vaccine for best protection:

- The first dose at 12 through 15 months of age
- The second dose 4 through 6 years of age

If your family is traveling overseas, the vaccine recommendations are a little different:

- If your baby is 6 through 11 months old, he or she should receive 1 dose of MMR vaccine before leaving.
- If your child is 12 months of age or older, he or she will need 2 doses of MMR vaccine (separated by at least 28 days) before departure.
1. Why your child should be vaccinated

Children need immunizations (shots) to protect them from dangerous childhood diseases. These diseases can have serious complications and even kill children.

2. Diseases that childhood vaccines prevent

- Diphtheria
- *Haemophilus influenzae* type b (Hib disease - a major cause of bacterial meningitis)
- Hepatitis A
- Hepatitis B
- Human Papillomavirus (HPV)
- Influenza (Flu)
- Measles
- Meningococcal
- Mumps
- Pertussis (Whooping Cough)
- Pneumococcal (causes bacterial meningitis and blood infections)
- Polio
- Rotavirus
- Rubella (German Measles)
- Tetanus (Lockjaw)
- Varicella (Chickenpox)

3. Number of doses your child needs

The following vaccinations are recommended by age two and can be given over 5 visits to a doctor or clinic.

- 4 doses of diphtheria, tetanus & pertussis vaccine (DTaP)
- 3-4 doses of Hib vaccine (depending on the brand of vaccine used)
- 4 doses of pneumococcal vaccine
- 3 doses of polio vaccine
- 2 doses of hepatitis A vaccine
- 3 doses of hepatitis B vaccine
- 1 dose of measles, mumps & rubella vaccine (MMR)
- 2-3 doses of rotavirus vaccine (depending on the brand of vaccine used)
- 1 dose of varicella vaccine
- 1 or 2 doses of flu vaccine each year (given to children 6 months and older; number of doses depends on child’s flu vaccine history)
4. **Like any medicine, there may be minor side effects**

Side effects can occur with any medicine, including vaccines. Depending on the vaccine, these can include: slight fever, rash, or soreness where the shot was given. Slight discomfort is normal and should not be a cause for alarm. Your health care provider can give you additional information.

5. **What to do if your child has a serious reaction**

Although it’s very rare, some children may have more serious reactions to their shots. The risk of serious complications from a vaccine-preventable disease is far greater than the risk of a serious reaction to a vaccine. If you think your child is experiencing a persistent or severe reaction, call your doctor or get the child to a doctor right away. Write down what happened and the date and time it happened. Ask your doctor, nurse or health department to file a Vaccine Adverse Event Report form or go to [www.vaers.hhs.gov](http://www.vaers.hhs.gov) to file this form yourself electronically.

6. **Why you should not wait to vaccinate**

Children under 5 are especially susceptible to disease because their immune systems have not built up the necessary defenses to fight infection. By fully immunizing on time (by age 2), you can protect your child from disease and also protect others at school or daycare.

7. **Be sure to track your child’s shots with a vaccination record**

A vaccination record (also known as a shot record) helps you and your doctor keep your child’s vaccinations on schedule. If you move or change doctors, having an accurate record might prevent your child from repeating vaccinations he or she has already had. A shot record should be started when your child receives his/her first vaccination and updated with each vaccination visit. Ask your doctor if your child has his/her vaccination record in your local or state electronic immunization registry.

8. **Some are eligible for free vaccinations**

A federal program called Vaccines for Children (VFC) provides free vaccines to eligible children, including those without health insurance coverage, all those who are enrolled in Medicaid, American Indians and Alaskan Natives and those whose health insurance dues does not cover vaccines and go to Federally Qualified Health Clinics or Rural Health Centers.

9. **More information is available.**

For general questions about vaccines, call the Centers for Disease Control and Prevention (CDC) at 1-800-CDC-INFO (1-800-232-4636) English and Español, or visit [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines).

Every Child By Two’s Vaccinate Your Baby website – [www.vaccinateyourbaby.org](http://www.vaccinateyourbaby.org)

American Academy of Pediatrics (AAP) – [www.healthychildren.org](http://www.healthychildren.org)
### Are vaccines safe?

Yes. Vaccines are very safe. The United States’ long-standing vaccine safety system ensures that vaccines are as safe as possible. Currently, the United States has the safest, most effective vaccine supply in its history. Millions of children are safely vaccinated each year. The most common side effects are typically very mild, such as pain or swelling at the injection site.

### What are the side effects of the vaccines? How do I treat them?

Vaccines, like any medication, may cause some side effects. *Most of these side effects are very minor, like soreness where the shot was given, fussiness, or a low-grade fever.* These side effects typically only last a couple of days and are treatable. For example, you can apply a clean, cool, wet washcloth on the sore area to ease discomfort. Serious reactions are very rare. However, if your child experiences any reactions that concern you, call the doctor’s office.

### What are the risks and benefits of vaccines?

Vaccines can prevent infectious diseases that once killed or harmed many infants, children, and adults. Without vaccines, your child is at risk for getting seriously ill and suffering pain, disability, and even death from diseases like measles and whooping cough. The main risks associated with getting vaccines are side effects, which are almost always mild (redness and swelling at the injection site) and go away within a few days. Serious side effects following vaccination, such as severe allergic reaction, are very rare and doctors and clinic staff are trained to deal with them. *The disease-prevention benefits of getting vaccines are much greater than the possible side effects for almost all children.*

### Is there a link between vaccines and autism?

No. Scientific studies and reviews continue to show no relationship between vaccines and autism.

Some people have suggested that thimerosal (a compound that contains mercury) in vaccines given to infants and young children might be a cause of autism, and others have suggested that the MMR (measles-mumps-rubella) vaccine may be linked to autism. However, numerous scientists and researchers have studied and continue to study the MMR vaccine and thimerosal, and reach the same conclusion: that there is no link between them and autism.

### Can vaccines overload my baby’s immune system?

Vaccines do not overload the immune system. Every day, a healthy baby’s immune system successfully fights off millions of germs. Antigens are parts of germs that cause the body’s immune system to go to work. The antigens in vaccines come from the germs themselves, but the germs are weakened or killed so they cannot cause serious illness. *Even if they receive several vaccinations in one day, vaccines contain only a tiny fraction of the antigens that babies encounter every day in their environment.* Vaccines provide your child with the antibodies they need to fight off the serious illnesses for which they have been vaccinated.

### Why are so many doses needed for each vaccine?

Getting every recommended dose of each vaccine provides your child with the best protection possible. Depending on the vaccine, more than one dose is needed to build high enough immunity to prevent disease, boost immunity that fades over time, make sure people who did not get immunity from a first dose are protected, or protect against germs that change over time, like flu. Every dose of a vaccine is important because they all protect against infectious diseases that are threats today and can be especially serious for infants and very young children.

### Why do vaccines start so early?

The recommended schedule is designed to protect infants and children by providing immunity early in life, before they are exposed to life-threatening diseases. Children are immunized early because they are susceptible to diseases at a young age, and the consequences of these diseases can be very serious, and even life-threatening, for infants and young children.

### What do you think of delaying some vaccines or following an alternative schedule?

Children do not receive any known benefits from following schedules that delay vaccines. Infants and young children who follow immunization schedules that spread out shots—or leave out shots—are at risk of developing diseases during the time that shots are delayed. Some vaccine-preventable diseases remain common in the United States, and children may be exposed to these diseases during the time they are not protected by vaccines, placing them at risk for a serious case of the disease that might cause hospitalization or death.
### Haven't we gotten rid of most of these diseases in this country?

Some vaccine-preventable diseases, like pertussis (whooping cough) and chickenpox, remain common in the United States. On the other hand, other diseases prevented by vaccines are no longer common in this country because of vaccines. **However, if we stopped vaccinating, even the few cases we have in the United States could very quickly become tens or hundreds of thousands of cases.** Even though many serious vaccine-preventable diseases are uncommon in the United States, some are common in other parts of the world. Even if your family does not travel internationally, you could come into contact with international travelers anywhere in your community. Kids that are not fully vaccinated and are exposed to a disease can become seriously sick and spread it through a community.

### What are combination vaccines? Why are they used?

Combination vaccines protect your child against more than one disease with a single shot. They reduce the number of shots and office visits your child would need, which not only saves you time and money, but also is easier on your child.

Some common combination vaccines that are currently used are: DTaP (diphtheria-tetanus-pertussis) and MMR (measles-mumps-rubella).

### Can’t I just wait until my child goes to school to catch up on immunizations?

Before entering school, young children can be exposed to vaccine-preventable diseases from parents and other adults, brothers and sisters, on a plane, at child care, or even at the grocery store. Children under age 5 are especially susceptible to diseases because their immune systems have not built up the necessary defenses to fight infection. **Don’t wait to protect your baby and risk getting these diseases when he or she needs protection now.**

### Why does my child need a chickenpox shot? Isn’t it a mild disease?

Your child needs a chickenpox vaccine because chickenpox can actually be a serious disease. In many cases, children experience a mild case of chickenpox, but other kids may have blisters that become infected. Others may develop pneumonia. There is no way to tell in advance the severity of the symptoms your child will experience.

Before vaccine was available, about 50 kids died every year from chickenpox, and about 1 in 500 kids who got chickenpox was hospitalized.

### My child is sick right now. Is it okay for her to still get shots?

Talk with the doctor, but children can usually get vaccinated even if they have a mild illness like a cold, earache, mild fever, or diarrhea. If the doctor says it is okay, your child can still get vaccinated.

### What are the ingredients in vaccines and what do they do?

Vaccines contain ingredients that cause the body to develop immunity. Vaccines also contain very small amounts of other ingredients—all of which play necessary roles either in making the vaccine, or in ensuring that the final product is safe and effective.

### Don’t infants have natural immunity? Isn’t natural immunity better than the kind from vaccines?

Babies may get some temporary immunity (protection) from mom during the last few weeks of pregnancy—but only for the diseases to which mom is immune. Breastfeeding may also protect your baby temporarily from minor infections, like colds. **These antibodies do not last long, leaving the infant vulnerable to disease.**

Natural immunity occurs when your child is exposed to a disease and becomes infected. It is true that natural immunity usually results in better immunity than vaccination, but the risks are much greater. A natural chickenpox infection may result in pneumonia, whereas the vaccine might only cause a sore arm for a couple of days.
Making the choice to vaccinate your child is vital for their health and well-being. Even so, getting shots can still be stressful for you and your little one. Fortunately, there are simple ways you can support your child before, during, and after shots.

Before Getting Shots
Come prepared! Take these steps before your child gets a shot to help make the immunization visit less stressful on you both.

- Read any vaccine materials you received from your child’s health care professional and write down any questions you may have.
- Find your child’s personal immunization record and bring it to your appointment. An up-to-date record tells your doctor exactly what shots your child has already received.
- Pack a favorite toy or book, and a blanket that your child uses regularly to comfort your child.

For older children
- Be honest with your child. Explain that shots can pinch or sting, but that it won’t hurt for long.
- Engage other family members, especially older siblings, to support your child.
- Avoid telling scary stories or making threats about shots.

At the Doctor’s Office
If you have questions about immunizations, ask your child’s doctor or nurse. Before you leave the appointment, ask your child’s doctor for advice on using non-aspirin pain reliever and other steps you can take at home to comfort your child.

Try these ideas for making the shots easier on your child.
- Distract and comfort your child by cuddling, singing, or talking softly.
- Smile and make eye contact with your child. Let your child know that everything is ok.
- Comfort your child with a favorite toy or book. A blanket that smells familiar will help your child feel more comfortable.
- Hold your child firmly on your lap, whenever possible.

Help children see vaccines as a good thing. Never threaten your child with shots, by saying “If you misbehave I will have the nurse give you a shot.” Instead, remind children that vaccines can keep them healthy.

Ways to soothe your baby:
- Swaddling
- Skin-to-skin contact
- Offering a sweet beverage, like juice (when the child is older than 6 months)
- Breastfeeding

Your health care professional may cool or numb the injection site to reduce the pain associated with your child’s shots.

The Centers for Disease Control and Prevention (CDC), the American Academy of Family Physicians (AAFP), and the American Academy of Pediatrics (AAP) adapted this information from Be There for Your Child during Shots, California Department of Public Health Immunization Branch.
For older children

- Take deep breaths with your child to help “blow out” the pain.
- Point out interesting things in the room to help create distractions.
- Tell or read stories.
- Support your child if he or she cries. Never scold a child for not “being brave.”

Once your child has received all of the shots, be especially supportive. Hold, cuddle, and, for infants, breastfeed or offer a bottle. A soothing voice, combined with praise and hugs will help reassure your child that everything is ok.

After the Shots

Sometimes children experience mild reactions from vaccines, such as pain at the injection site, a rash or a fever. These reactions are normal and will soon go away. The following tips will help you identify and minimize mild side effects.

- Review any information your doctor gives you about the shots, especially the Vaccine Information Statements or other sheets that outline which side effects might be expected.
- Use a cool, wet cloth to reduce redness, soreness, and swelling in the place where the shot was given.
- Reduce any fever with a cool sponge bath. If your doctor approves, give non-aspirin pain reliever.
- Give your child lots of liquid. It’s normal for some children to eat less during the 24 hours after getting vaccines.
- Pay extra attention to your child for a few days. If you see something that concerns you, call your doctor.
What are Immunization Information Systems?

Also known as Immunization Registries, Immunization Information Systems (IIS) are computer systems that have information on the shots that were given to your child. Some IIS can remind you or your doctor of the next shot due to keep your child up-to-date with their immunizations.

What are the benefits of having my child’s shot record saved in an IIS?

- Helps to make sure that your child doesn't miss any shots or get too many shots
- Reminds you by mail or telephone when your child need shots
- Allows you to get a copy of your child's shot record from the doctor quickly
- Makes sure your child has all of the shots needed to start child care or school

What information is in an IIS?

Information in an IIS is different in every state, but most contain at least the following information:

- patient name (first, middle, and last)
- patient birth date
- patient gender (male or female)
- patient birth state/country
- mother's name
- the types of shots given
- the dates the shots were given

Who do I contact to see if my child’s shot record is in an IIS or if I want a copy of my child's shot record?

You must contact your doctor’s office, or your local or state health department. Some states allow the public to access the IIS directly in order to print out shot records.

Does it cost any money to have my child’s shot record in my state’s IIS?

No, there is no cost to a parent/patient to participate in an IIS.

How can I find out if my child's doctor is participating in the IIS?

Just ask your doctor if they use the state or local IIS. You can also contact the IIS in your area to find out if your doctor participates.
How can I get help paying for my child’s vaccines?

Since 1994, parents have been protecting their children through the VFC Program. This program provides free vaccines to children whose parents need help paying for them.

Is my child eligible for the VFC Program?

Your child is eligible if it is before his or her 19th birthday, and if he or she is one of the following:

► Medicaid-eligible
► Uninsured
► American Indian or Alaska Native
► Underinsured (Underinsured children are only eligible for VFC Vaccines through Federally Qualified Health Centers and Rural Health Clinics.)

What do you mean by “underinsured?”

Underinsured means your child has health insurance, but it won’t cover the vaccine(s) because:

► It doesn’t cover any vaccines.
► It doesn’t cover certain vaccines.
► It covers vaccines, but it has a fixed dollar limit or cap for vaccines. Once that fixed dollar amount has been reached, your child is eligible.

Where can I go to get my child vaccinated?

Ask your doctor if he or she is a VFC Program provider. There are over 40,000 doctors enrolled in the VFC Program nationwide.

How much will I have to pay?

All vaccines are free through the VFC Program, saving you $100 or more on some vaccines. Even though you’re saving a great deal of money by getting free vaccines, there can be other costs to the VFC visit:

► Doctors can charge a fee to give each shot. However, VFC vaccines cannot be denied to an eligible child if the family cannot afford the fee.
► There can be a fee for the office visit.
► There can be fees for non-vaccines services, like an eye exam or a blood test.

My child’s doctor isn’t a VFC provider. Where can I take my child for vaccines?

If your child’s doctor isn’t a VFC provider, you can take your child to one of the following places to get VFC vaccines:

► Public Health Clinic
► Federally Qualified Health Center (FQHC)
► Rural Health Clinic (RHC)

The best place to take your child depends on where you live and how your child is eligible for the VFC Program. Before you go, contact your state’s VFC coordinator and ask where you should take your child for vaccines. You can find your state’s VFC coordinator at this website: www.cdc.gov/vaccines/programs/vfc/contacts-state.htm. Or call 1-800-CDC-INFO (232-4636). Ask for the phone number for your state’s VFC coordinator.

For more information about the VFC Program, you can go to CDC’s VFC webpage at www.cdc.gov/vaccines/programs/vfc/ or call 1-800-CDC-INFO (232-4636) and ask for information about the VFC Program.
### 2015 Recommended Immunizations for Adults: By Age

If you are this age, talk to your healthcare professional about these vaccines:

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Flu Vaccination</th>
<th>Td/Tdap</th>
<th>Shingles</th>
<th>Pneumococcal</th>
<th>Meningococcal</th>
<th>MMR</th>
<th>HPV</th>
<th>Chickenpox</th>
<th>Varicella</th>
<th>Hepatitis A</th>
<th>Hepatitis B</th>
<th>Hib</th>
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<tbody>
<tr>
<td>19 - 21 years</td>
<td>Flu Influenza</td>
<td>Td/Tdap</td>
<td>Shingles Zoster</td>
<td>PCV13</td>
<td>PPSV23</td>
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<td>22 - 26 years</td>
<td>Flu every year</td>
<td>Td booster every 10 years</td>
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<tr>
<td>27 - 49 years</td>
<td>Flu vaccine every year</td>
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</tbody>
</table>

**More Information:**
- There are several flu vaccines available. Talk to your healthcare professional about which flu vaccines are right for you.
- "If you are pregnant, you should get a Tdap vaccine during the 3rd trimester of every pregnancy to help protect your babies from pertussis (whooping cough)."
- "If you were born in 1957 or after, and don’t have a record of being vaccinated or having had measles, mumps and rubella, talk to your healthcare professional about how many doses you may need.
- Recommended for you if you did not get it when you were a child.

**Recommended For You:** This vaccine is recommended for you unless your healthcare professional tells you that you cannot safely receive it or that you do not need it.

**May Be Recommended For You:** This vaccine is recommended for you if you have certain risk factors due to your health, job, or lifestyle that are not listed here. Talk to your healthcare professional to see if you need this vaccine.

If you are traveling outside the United States, you may need additional vaccines. Ask your healthcare professional about which vaccines you may need at least 6 weeks prior to your travel.

For more information, call 1-800-CDC-INFO (1-800-232-4636) or visit [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines).

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U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

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CS251118
Vaccines help keep a pregnant woman and her growing family healthy.

Before pregnancy

Before becoming pregnant, a woman should be up-to-date on routine adult vaccines. This will help protect her and her child. Live vaccines should be given a month or more before pregnancy. Inactivated vaccines can be given before or during pregnancy, if needed.

During pregnancy

Did you know that a mother’s immunity is passed along to her baby during pregnancy? This will protect the baby from some diseases during the first few months of life until the baby can get vaccinated.

- Flu Vaccine
  It is safe, and very important, for a pregnant woman to receive the inactivated flu vaccine. A pregnant woman who gets the flu is at risk for serious complications and hospitalization. To learn more about preventing the flu, visit the CDC website www.cdc.gov/flu.

- Tdap Vaccine
  Women should get adult tetanus, diphtheria and acellular pertussis vaccine (Tdap) during each pregnancy. Ideally, the vaccine should be given between 27 and 36 weeks of pregnancy.

- Travel
  Many vaccine-preventable diseases, rarely seen in the United States, are still common in other parts of the world. A pregnant woman planning international travel should talk to her health professional about vaccines. Information about travel vaccines can be found at CDC’s traveler’s health website at www.cdc.gov/travel.

- Childhood Vaccines
  Pregnancy is a good time to learn about childhood vaccines. Parents-to-be can learn more about childhood vaccines from the CDC parents guide and from the child and adolescent vaccination schedules. This information can be downloaded and printed at www.cdc.gov/vaccines.

After pregnancy

It is safe for a woman to receive routine vaccines right after giving birth, even while she is breastfeeding. A woman who has not received the new vaccine for the prevention of tetanus, diphtheria and pertussis (Tdap) should be vaccinated right after delivery. Vaccinating a new mother against pertussis (whooping cough) reduces the risk to her infant too. Also, a woman who is not immune to measles, mumps and rubella and/or varicella (chicken pox) should be vaccinated before leaving the hospital. If inactivated influenza vaccine was not given during pregnancy, a woman should receive it now because it will protect her infant. LAIV may be an option.

Visit CDC’s website at www.cdc.gov for more information. Or get an answer to your specific question by e-mailing cdcinfo@cdc.gov or calling 800-CDC-INFO (232-4636) · English or Spanish
Outbreaks of whooping cough are happening across the United States. This disease can cause your baby to have coughing fits, gasp for air, and turn blue from lack of oxygen. It can even be deadly. When you get the whooping cough vaccine (also called Tdap) during your third trimester, you’ll pass antibodies to your baby. This will help keep him protected during his first few months of life, when he is most vulnerable to serious disease and complications.

Talk to your doctor or midwife about the whooping cough vaccine.
I’ll get my flu vaccine.

Even if you’re healthy, if you live with or care for someone at increased risk for serious complications from influenza, you should get vaccinated. Groups at high risk include infants and pregnant women.

Babies younger than 6 months can’t be vaccinated against the flu, but they are at high risk for severe complications from the flu.

They rely on you to protect them.

Get vaccinated.

For more information, visit http://www.flu.gov or http://www.cdc.gov/flu
Fight the Flu with Facts

Courtesy of Families Fighting Flu (www.familiesfightingflu.org)

Myth #1: You can get the flu from the flu vaccine.
FALSE: This is impossible. The flu vaccine does not actually carry a live virus; it contains inactivated or weakened organisms. Vaccine manufacturers grow the flu virus in eggs, then cleanse and chemically treat the virus to deactivate it.

Myth #2: The flu is just a bad cold.
FALSE: The flu is a serious disease. It is a highly contagious viral infection of the respiratory tract (nose, throat and lungs). In the United States, about 200,000 people are hospitalized and tens of thousands of people die each year because of the flu. **The flu kills more Americans every year than all other vaccine-preventable diseases combined.**

Myth #3: It is not necessary for children to receive a flu vaccination.
FALSE: Children are two-to-three times more likely to develop influenza than adults because of their less-developed immune systems. More than 20,000 children under the age of 5 are hospitalized due to the flu each year. In addition, the flu kills nearly 100 American children under 5 years of age every year. The Centers for Disease Control and Prevention (CDC) recommends that everyone 6 months and older get vaccinated against the flu every year.

Myth #4: The side effects of the vaccine are worse than the flu itself.
FALSE: Most people who get the flu shot have no reaction. Up to 25 percent may have some redness and slight swelling at the site of injection; the risk of a severe allergic reaction in those who receive a vaccine is less than one in four million.

Myth #5: You must be vaccinated in the fall to be protected against the flu.
FALSE: It is recommended to get vaccinated as soon as the vaccine becomes available in your community. Typically, the flu virus tends to spread from October to May, with most cases occurring in January or February. However, vaccines can be given at any time during the flu season – even getting vaccinated later in the season (December through March) can still help protect you from the flu.

Myth #6: Only older people need the flu vaccine.
FALSE: The CDC recommends that everyone 6 months and older get vaccinated against the flu every year.
**Myth #7: Taking vitamin C or Echinacea will prevent the flu.**
FALSE: There is no conclusive evidence that these treatments are effective against the flu.

**Myth #8: The flu vaccine is 100 percent effective in preventing the flu.**
FALSE: Although the flu vaccine is not 100 percent effective, it’s important that everyone 6 months and older get vaccinated against the flu to help prevent illness and reduce the spread of the virus in the community. The more people who get vaccinated against the flu every year, the lower the risk of catching the disease.

**Myth #9: Getting the flu vaccine every year isn’t necessary.**
FALSE: The vaccine needs to be given every year. Because flu viruses are constantly changing, flu vaccines may be updated from one season to the next to protect against the most recent and most commonly circulating viruses. In addition, a person’s immune protection from the vaccine declines over time; therefore, annual vaccination is needed for optimal protection.

**Myth #10: Healthy people don’t need a flu vaccine.**
FALSE: The CDC recommends that everyone 6 months and older get vaccinated against the flu every year. Infants younger than 6 months old are too young to be vaccinated. Protect them by getting yourself, other children and family members, and close contacts vaccinated. This will help prevent spreading the virus to infants. During the 2010-2011 flu season, roughly half of the kids who died from influenza had healthy medical histories.

**Myth #11: Pregnant women can’t get the flu vaccine.**
FALSE: The CDC recommends vaccination for pregnant women as the safest and most important method for protecting a mother and her unborn child from the flu. Pregnant women are at risk for developing serious complications from the flu, which may include premature delivery and miscarriage, or death. In fact, a study in the *American Journal of Obstetrics & Gynecology* found that babies born to moms who were vaccinated during pregnancy were up to 48 percent less likely to be hospitalized for the flu in the early months of life. The flu vaccine has been given to millions of pregnant women over many years and has not been shown to harm expectant mothers or their children. Flu protection is a critical, life-saving measure that every mother should take seriously each and every year.
There’s so much to do before the big day. Let us help guide you on ways to keep your newborn healthy from start.

Visit www.VaccinateYourBaby.org to learn…

How getting flu and pertussis vaccinations while pregnant protects your newborn.

Why it’s important to follow the CDC’s recommended schedule.

Which vaccines your baby needs and when each is due.

Why your baby needs the Hepatitis B vaccine before leaving the hospital.

How vaccines are continually monitored for safety.

What to do if you can’t afford to pay for vaccines.

Where to go for reliable resources on children’s health.

And much, much more…

This flier is supported through funding provided by the CDC through cooperative agreement 1U38IP000455-1.
Credible Websites for Vaccine Information and Resources

Every Child By Two and its Vaccinate Your Baby Campaign - www.ecbt.org and www.vaccinateyourbaby.org

American Academy of Family Physicians - www.familydoctor.org

American Academy of Pediatrics - www.aap.org/immunization

American College of Obstetricians and Gynecologists - www.immunizationforwomen.org

American Medical Association - www.ama-assn.org/ama/pub/physician-resources/public-health/vaccination-resources.page

Centers for Disease Control and Prevention - www.cdc.gov/vaccines and www.cdc.gov/vaccines/parents (parent-friendly website)

Department of Health and Human Services - www.flu.gov and www.vaccines.gov

Families Fighting Flu - www.familiesfightingflu.org

Family Vaccines Resource Center - www.family-vaccines.org

Immunization Action Coalition - www.immunize.org

Institute for Vaccine Safety at Johns Hopkins Bloomberg School of Public Health - www.vaccinesafety.edu

Meningitis Angels - www.meningitis-angels.org

National Meningitis Association - www.nmaus.org

Parents of Kids with Infectious Diseases - www.pkids.org

Vaccine Education Center at The Children’s Hospital of Philadelphia - www.vaccine.chop.edu