

Your Child's First Vaccines:

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

The vaccines included on this statement are likely to be given at the same time during infancy and early childhood. There are separate Vaccine Information Statements for other vaccines that are also routinely recommended for young children (measles, mumps, rubella, varicella, rotavirus, influenza, and hepatitis A).

Your child is getting these vaccines today:

☐ DTaP ☐ Hib ☐ Hepatitis B ☐ Polio ☐ PCV13

(Provider: Check appropriate boxes.)

1. Why get vaccinated?

Vaccines can prevent disease. Childhood vaccination is essential because it helps provide immunity before children are exposed to potentially life-threatening diseases.

Diphtheria, tetanus, and pertussis (DTaP)

- **Diphtheria (D)** can lead to difficulty breathing, heart failure, paralysis, or death.
- **Tetanus (T)** causes painful stiffening of the muscles. Tetanus can lead to serious health problems, including being unable to open the mouth, having trouble swallowing and breathing, or death.
- **Pertussis (aP)**, also known as “whooping cough,” can cause uncontrollable, violent coughing that makes it hard to breathe, eat, or drink. Pertussis can be extremely serious especially in babies and young children, causing pneumonia, convulsions, brain damage, or death. In teens and adults, it can cause weight loss, loss of bladder control, passing out, and rib fractures from severe coughing.

Hib (*Haemophilus influenzae* type b) disease

Haemophilus influenzae type b can cause many different kinds of infections. These infections usually affect children under 5 years of age but can also affect adults with certain medical conditions. Hib bacteria can cause mild illness, such as ear infections

or bronchitis, or they can cause severe illness, such as infections of the blood. Severe Hib infection, also called “invasive Hib disease,” requires treatment in a hospital and can sometimes result in death.

Hepatitis B

Hepatitis B is a liver disease that can cause mild illness lasting a few weeks, or it can lead to a serious, lifelong illness. Acute hepatitis B infection is a short-term illness that can lead to fever, fatigue, loss of appetite, nausea, vomiting, jaundice (yellow skin or eyes, dark urine, clay-colored bowel movements), and pain in the muscles, joints, and stomach. Chronic hepatitis B 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, and death.

Polio

Polio (or poliomyelitis) is a disabling and life-threatening disease caused by poliovirus, which can infect a person's spinal cord, leading to paralysis. Most people infected with poliovirus have no symptoms, and many recover without complications. Some people will experience sore throat, fever, tiredness, nausea, headache, or stomach pain.



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

A smaller group of people will develop more serious symptoms: paresthesia (feeling of pins and needles in the legs), meningitis (infection of the covering of the spinal cord and/or brain), or paralysis (can't move parts of the body) or weakness in the arms, legs, or both. Paralysis can lead to permanent disability and death.

Pneumococcal disease

Pneumococcal disease refers to any illness caused by pneumococcal bacteria. These bacteria can cause many types of illnesses, including pneumonia, which is an infection of the lungs. Besides pneumonia, pneumococcal bacteria can also cause ear infections, sinus infections, meningitis (infection of the tissue covering the brain and spinal cord), and bacteremia (infection of the blood). Most pneumococcal infections are mild. However, some can result in long-term problems, such as brain damage or hearing loss. Meningitis, bacteremia, and pneumonia caused by pneumococcal disease can be fatal.

2. DTaP, Hib, hepatitis B, polio, and pneumococcal conjugate vaccines

Infants and children usually need:

- 5 doses of **diphtheria, tetanus, and acellular pertussis vaccine (DTaP)**
- 3 or 4 doses of **Hib vaccine**
- 3 doses of **hepatitis B vaccine**
- 4 doses of **polio vaccine**
- 4 doses of **pneumococcal conjugate vaccine (PCV13)**

Some children might need fewer or more than the usual number of doses of some vaccines to be fully protected because of their age at vaccination or other circumstances.

Older children, adolescents, and adults with certain health conditions or other risk factors might also be recommended to receive 1 or more doses of some of these vaccines.

These vaccines may be given as stand-alone vaccines, or as part of a combination vaccine (a type of vaccine that combines more than one vaccine together into one shot).

3. Talk with your health care provider

Tell your vaccination provider if the child getting the vaccine:

For all of these vaccines:

- Has had an **allergic reaction after a previous dose of the vaccine**, or has any **severe, life-threatening allergies**

For DTaP:

- Has had an **allergic reaction after a previous dose of any vaccine that protects against tetanus, diphtheria, or pertussis**
- Has had a **coma, decreased level of consciousness, or prolonged seizures within 7 days after a previous dose of any pertussis vaccine (DTP or DTaP)**
- Has **seizures or another nervous system problem**
- Has ever had **Guillain-Barré Syndrome** (also called “GBS”)
- Has had **severe pain or swelling after a previous dose of any vaccine that protects against tetanus or diphtheria**

For PCV13:

- Has had an **allergic reaction after a previous dose of PCV13, to an earlier pneumococcal conjugate vaccine known as PCV7, or to any vaccine containing diphtheria toxoid** (for example, DTaP)

In some cases, your child's health care provider may decide to postpone vaccination until 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 being vaccinated.

Your child's health care provider can give you more information.

4. Risks of a vaccine reaction

For all of these vaccines:

- Soreness, redness, swelling, warmth, pain, or tenderness where the shot is given can happen after vaccination.

For DTaP vaccine, Hib vaccine, hepatitis B vaccine, and PCV13:

- Fever can happen after vaccination.

For DTaP vaccine:

- Fussiness, feeling tired, loss of appetite, and vomiting sometimes happen 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, vaccination is followed by swelling of the entire arm or leg, especially in older children when they receive their fourth or fifth dose.

For PCV13:

- Loss of appetite, fussiness (irritability), feeling tired, headache, and chills can happen after PCV13 vaccination.
- Young children may be at increased risk for seizures caused by fever after PCV13 if it is administered at the same time as inactivated influenza vaccine. Ask your health care provider for more information.

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 vaccinated person 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 person to the nearest hospital.

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

Adverse reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your health care provider will usually file this report, or you can do it yourself. Visit the VAERS website at www.vaers.hhs.gov or call **1-800-822-7967**. *VAERS is only for reporting reactions, and VAERS staff members do 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. Claims regarding alleged injury or death due to vaccination have a time limit for filing, which may be as short as two years. Visit the VICP website at www.hrsa.gov/vaccinecompensation or call **1-800-338-2382** to learn about the program and about filing a claim.

7. How can I learn more?

- Ask your health care provider.
- Call your local or state health department.
- Visit the website of the Food and Drug Administration (FDA) for vaccine package inserts and additional information at www.fda.gov/vaccines-blood-biologics/vaccines.
- 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.





BRIGHT FUTURES HANDOUT ► PARENT

15 MONTH VISIT

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

✓ TALKING AND FEELING

- Try to give choices. Allow your child to choose between 2 good options, such as a banana or an apple, or 2 favorite books.
- Know that it is normal for your child to be anxious around new people. Be sure to comfort your child.
- Take time for yourself and your partner.
- Get support from other parents.
- Show your child how to use words.
 - Use simple, clear phrases to talk to your child.
 - Use simple words to talk about a book's pictures when reading.
 - Use words to describe your child's feelings.
 - Describe your child's gestures with words.

✓ A GOOD NIGHT'S SLEEP

- Put your child to bed at the same time every night. Early is better.
- Make the hour before bedtime loving and calm.
- Have a simple bedtime routine that includes a book.
- Try to tuck in your child when he is drowsy but still awake.
- Don't give your child a bottle in bed.
- Don't put a TV, computer, tablet, or smartphone in your child's bedroom.
- Avoid giving your child enjoyable attention if he wakes during the night. Use words to reassure and give a blanket or toy to hold for comfort.

✓ TANTRUMS AND DISCIPLINE

- Use distraction to stop tantrums when you can.
- Praise your child when she does what you ask her to do and for what she can accomplish.
- Set limits and use discipline to teach and protect your child, not to punish her.
- Limit the need to say "No!" by making your home and yard safe for play.
- Teach your child not to hit, bite, or hurt other people.
- Be a role model.

✓ HEALTHY TEETH

- Take your child for a first dental visit if you have not done so.
- Brush your child's teeth twice each day with a small smear of fluoridated toothpaste, no more than a grain of rice.
- Wean your child from the bottle.
- Brush your own teeth. Avoid sharing cups and spoons with your child. Don't clean her pacifier in your mouth.

Helpful Resources: Poison Help Line: 800-222-1222

Information About Car Safety Seats: www.safercar.gov/parents | Toll-free Auto Safety Hotline: 888-327-4236

15 MONTH VISIT—PARENT



SAFETY

- Make sure your child's car safety seat is rear facing until he reaches the highest weight or height allowed by the car safety seat's manufacturer. In most cases, this will be well past the second birthday.
- Never put your child in the front seat of a vehicle that has a passenger airbag. The back seat is the safest.
- Everyone should wear a seat belt in the car.
- Keep poisons, medicines, and lawn and cleaning supplies in locked cabinets, out of your child's sight and reach.
- Put the Poison Help number into all phones, including cell phones. Call if you are worried your child has swallowed something harmful. Don't make your child vomit.
- Place gates at the top and bottom of stairs. Install operable window guards on windows at the second story and higher. Keep furniture away from windows.
- Turn pan handles toward the back of the stove.
- Don't leave hot liquids on tables with tablecloths that your child might pull down.
- Have working smoke and carbon monoxide alarms on every floor. Test them every month and change the batteries every year. Make a family escape plan in case of fire in your home.

WHAT TO EXPECT AT YOUR CHILD'S 18 MONTH VISIT

We will talk about

- Handling stranger anxiety, setting limits, and knowing when to start toilet training
- Supporting your child's speech and ability to communicate
- Talking, reading, and using tablets or smartphones with your child
- Eating healthy
- Keeping your child safe at home, outside, and in the car

Consistent with *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents*, 4th Edition

For more information, go to <https://brightfutures.aap.org>.

American Academy of Pediatrics

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The information contained in this handout should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances. Original handout included as part of the *Bright Futures Tool and Resource Kit*, 2nd Edition.

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Dosage Charts

Milliliter is abbreviated as mL; 5mL equals one teaspoon (tsp)

Do not use household teaspoons, which can vary in size.

Aspirin should not be used in children to treat fever or pain.

483 East County Line Rd.
Warminster, PA 18974

Keep all medications away from small children. In the event of an emergency please contact Poison Control: 1 (800) 222-1222

Acetaminophen (Tylenol)

2 MONTHS & OLDER ONLY

		Infant's Concentrated Drops 160 mg/ 5 mL	Children's Suspension Liquid 160 mg/ 5 mL	Children's Soft Chewable Tablets 80 mg each	Junior Strength Chewable Tablets 160 mg each
Weight	Age	Dropperful (Use dropper)	Teaspoon	Tablet	Tablet
6-11 lbs	2-3 Months	1.25 mL			
12-17 lbs	4-11 Months	2.5 mL	½ tsp (2.5mL)		
18-23 lbs	12-23 Months	3.75 mL	¾ tsp (3.75 mL)		
24-35 lbs	2-3 Years	5 mL	1 tsp (5 mL)	2	
36-47 lbs	4-5 Years		1 ½ tsp (7.5 mL)	3	
48-59 lbs	6-8 Years		2 tsp (10 mL)	4	2
60-71 lbs	9-10 Years		2 ½ tsp (12.5 mL)	5	2 ½
72-95 lbs	11 Years		3 tsp (15 mL)	6	3
96 lbs +	12 Years				4

Please note: One dose lasts 4 hours. No more than 5 doses in a 24 hour period. If the child's weight and age do not correspond to the same row on the chart, choose the dosage corresponding to your child's weight.

Ibuprofen (Motrin, Advil)

6 MONTHS & OLDER ONLY

		Infant's Concentrated Drops 50 mg/1.25 mL	Children's Suspension 100 mg/5 mL	Children's Soft Chewable Tablets 50 mg each	Junior Strength Chewable Tablets 100 mg each	Junior Strength Caplets 100 mg
Weight	Age	Dropperful (Use dropper)	Teaspoon	Tablet	Tablet	Caplet
12-17 lbs	6-11 Months	1.25 mL				
18-23 lbs	12-23 Months	1.875 mL				
24-35 lbs	2-3 Years	2.5 mL	1 tsp (5 mL)	2		
36-47 lbs	4-5 Years		1 ½ tsp (7.5 mL)	3		
48-59 lbs	9-10 Years		2 tsp (10 mL)	4	2	2
60-71 lbs	9-10 Years		2 ½ tsp (12.5 mL)	5	2 ½	2 ½
72-95 lbs	11 Years		3 tsp (15 mL)	6	3	3

Please Note: One dose lasts 6-8 hours. Not to be used in children under 6 months of age. No more than 5 doses in a 24 hour period. If the child's weight and age do not correspond to the same row on the chart, choose the dosage corresponding to your child's weight.