Arkansas 2020-2021 Immunization Exemption Application Packet for Childcare or School Students

The Arkansas Board of Health requires that all children attending childcare facilities and public or private schools in the State of Arkansas be immunized against vaccine-preventable diseases. The Arkansas Department of Health is authorized by Act 999 of 2003 to grant individual exemptions from the immunization requirements. This packet contains an application for exemption, which you have requested, or you may complete the online application at https://OnlinImmunizationExemption.ADH.Arkansas.gov/.

An application requesting an exemption must be submitted for each child. All children, except foster children, may apply. An application with a notarized signature of the parent or guardian must be submitted each school year to the Department of Health. Only a 2020-2021 Immunization Exemption Application will be accepted for the 2020-2021 school year. When approved, exemptions will be effective for the start of the Fall session in 2020 and go through the Summer sessions of 2021.

As part of the application, the law requires that the parent/guardian complete an educational activity when requesting an exemption. The required educational activity can be met by reading the enclosed Vaccine Information Statements from the Centers for Disease Control and Prevention. These statements provide information about the required vaccines. On page 6 of this application packet, you are asked to sign that you have received and reviewed the Vaccine Information Statements, that you understand the risks and benefits of the vaccines, and that you still choose to request an exemption. This form must also be signed by a Notary Public.

Please submit your completed application to the Arkansas Department of Health Immunization Section. Be sure to complete each part of the application. Applications that are incomplete will not be accepted and will be returned to you for completion. This delay will increase the time needed for processing your application. We will send you a letter of approval or denial within ten working days of receiving a completed application. If your application is not complete, we will send you a checklist showing the reason(s) we were unable to process your application. You will then need to include the requested information and return the updated application for processing as soon as possible by fax, email, or mail; see page six of the application.

After you have received your approval letter, you are responsible for notifying your child’s daycare or school that your exemption request has been approved. You are responsible for retaining the original letter. A copy of the approval letter is to be placed in your child’s file at the daycare or school. Release of information will be provided only to the custodial parent/guardian who completes this application and according to the notarized signature. If you have questions, please call the Immunization Section toll free at 1-800-574-4040.

Sincerely,

Jennifer Dillaha, MD
Medical Director, Immunizations
Center for Health Protection
If You Choose Not to Vaccinate Your Child, Understand the Risks and Responsibilities.

If you choose to delay some vaccines or reject some vaccines entirely, there can be risks.

Be aware:
- Any vaccine-preventable disease can strike at any time in the U.S. because all of these diseases still circulate either in the U.S. or elsewhere in the world.
- Some of the vaccine-preventable diseases that still circulate in the U.S. include pertussis (whooping cough), varicella (chickenpox), *Haemophilus influenzae* type b (Hib, which is a cause of meningitis), and influenza. These diseases, as well as the other vaccine-preventable diseases, can range from mild to severe and life-threatening. In most cases, there is no way to know beforehand if a child will get a mild or serious case.

When there is a vaccine-preventable disease in your community:
- It may not be too late to get protection by getting vaccinated.
- If there are cases (or, in some circumstances, a single case) of a vaccine-preventable disease in your community, you may be asked to take your child out of school, childcare, or organized activities (for example, playgroups or sports).
- Your school, childcare facility, or other institution will tell you when it is safe for an unvaccinated child to return. Be prepared to keep your child home for several days and up to several weeks.

Why vaccinate?

**Vaccines save lives** and protect against the spread of disease. If you decide not to vaccinate your child, you put your child at risk. Your child could catch a disease that is dangerous or deadly. Getting vaccinated is much better than getting the disease.

**Vaccines work.** They have kept children healthy and have saved millions of lives for more than 50 years. Most childhood vaccines are 90 to 99 percent effective in preventing disease. And if a vaccinated child does get the disease, the symptoms are usually less serious than in a child who has not been vaccinated.

**Vaccines are safe.** All vaccines used in the U.S. must be approved by the Food and Drug Administration (FDA). The FDA will not let a vaccine be given unless it has been proven to be safe and to work well in children. The results are reviewed again by the Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics, and the American Academy of Family Physicians before a vaccine is officially recommended to be given to children. Also, the FDA monitors where and how vaccines are made. The places where vaccines are made must be licensed. They are regularly inspected and each vaccine lot is safety-tested.
What if you don’t immunize your child?

- Your child will be left at risk of catching the disease. Vaccines were developed to protect people from dangerous and often fatal diseases. Vaccines are safe and effective, and the vaccine-preventable diseases are still a threat.

- Your child will be an infectious disease threat to others. Children who are not vaccinated can readily transmit vaccine-preventable diseases to others in their community.
  - Unvaccinated children can pass diseases on to babies who are too young to be fully immunized.
  - Unvaccinated children pose a threat to children and adults who cannot be immunized for medical reasons. This includes people with leukemia and other cancers, immune system problems, and people receiving treatment or medications that suppress their immune system.
  - Unvaccinated children can infect the small percentage of children who cannot reach full protection from a vaccination due to medical reasons.

- Your child may have to be excluded from school or childcare. During disease outbreaks, unvaccinated children may be excluded from school or childcare until the outbreak is over. Excluding children from school or childcare is for their own protection and the protection of others. Outbreaks may last for several days to several weeks. Therefore, exclusion can be a hardship for the child and parent.

Your vaccination decision affects not only the health of your child, but also all of your family, your child’s friends and their families, and your community.

For more information about vaccines, go to:
- Immunization Action Coalition at [www.immunize.org](http://www.immunize.org) and [www.vaccineinformation.org](http://www.vaccineinformation.org).
- Centers for Disease Control and Prevention at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines).
- Vaccine Education Center at the Children’s Hospital of Philadelphia at [www.chop.edu/service/vaccine-education-center/home.html](http://www.chop.edu/service/vaccine-education-center/home.html).
- Vaccinate Your Family at [https://www.vaccinateyourfamily.org/](https://www.vaccinateyourfamily.org/).

*ADH, December 2019*
You may complete the online application at https://OnlineImmunizationExemption.ADH.Arkansas.gov/

Arkansas Immunization Exemption Application
2020-2021 School Year

Please Note: To avoid processing delays, be sure to complete each part.

1. Select ONE of the following reasons for your exemption request:
   □ MEDICAL          □ RELIGIOUS          □ PHILOSOPHICAL
   (Medical - You must attach a physician’s letter stating the medical reason)

2. Child’s FULL Name and Contact Information:

   First ___________________ Middle _______________ Last ___________________

   Mailing Address _______________________________________________________
   City ___________________ County ___________________
   (Include P.O. Box and/or Apartment #)

   State _______ Zip _________ Gender _______ Date of Birth ______-____-_____

   Race: (Select up to 3) □ Alaskan Native or American Indian □ Asian □ Black or African American
   □ Native Hawaiian or Pacific Islander □ White □ Other

   Ethnicity: (Select 1) □ Hispanic or Latino □ Not Hispanic or Latino

3. Childcare or School Information: Select ONE: □ Public or □ Private

   Select ONE: □ Home School □ Childcare □ Preschool □ Elementary □ Middle □ Jr. High □ Sr. High

   Facility/School ________________________ Public School District ________________________
   (Home School - Need school affiliation) (Not required for childcare or private schools)

   Street Address _______________________________________________________________
   City ___________________

   County _________________________ Zip _____________ Grade _______

   FIRST DAY OF ATTENDANCE FOR 2020-2021 SCHOOL YEAR: ______/____/20___

4. Parent/Guardian Contact Information:

   First ___________________ Middle _______________ Last ___________________

   Street/Mailing Address ___________________________________________________
   City ___________________ County ___________________

   State _______ Zip _________ Daytime Phone (____) ______-____ E-mail _______________________

Page 4 of 6
Statement of Refusal to Vaccinate
Select the vaccine(s) that you **DO NOT** want your child to receive.

☐ DTaP (Diphtheria, Tetanus & Pertussis) vaccine

I understand by not receiving the DTaP vaccine, the child listed here is at risk of a sore throat, fever, heart complications, feeding problems, paralysis, whooping cough, respiratory complications, coma, and death.

☐ Hib (*Haemophilus influenzae* Type b) vaccine

I understand by not receiving the Hib vaccine, the child listed here is at risk of skin and throat infections, ear infections, meningitis, pneumonia, blood infections, arthritis, permanent brain damage, and death.

☐ Hepatitis A vaccine

I understand by not receiving the Hepatitis A vaccine, the child listed here is at risk of yellow skin or eyes, “flu-like” illness, abdominal pain, loss of appetite, nausea, joint pain, and/or life-long liver problems, such as scarring of the liver and cancer or the need for a liver transplant, and death.

☐ Hepatitis B vaccine

I understand by not receiving the Hepatitis B vaccine, the child listed here is at risk of yellow skin or eyes, “flu-like” illness, abdominal pain, loss of appetite, nausea, joint pain, and/or life-long liver problems, such as scarring of the liver and cancer or the need for a liver transplant, and death.

☐ MMR (Measles, Mumps & Rubella) vaccine

I understand by not receiving the MMR vaccine, the child listed here is at risk of a rash, fever, cough, diarrhea, muscle aches, ear infections, pneumonia, headaches, seizures, meningitis, brain infections, inflammation of the testicles and ovaries, sterility, arthritis, inflammation of the pancreas, permanent deafness, brain damage, and death. Birth defects if acquired while pregnant include deafness, cataracts, heart defects, mental retardation, and liver and spleen damage in the baby.

☐ Meningococcal (MCV4) vaccine

I understand by not receiving the Meningococcal vaccine, the child listed here is at risk of meningitis, which is a severe infection of the covering of the brain and the spinal cord. The child is also at risk of blood infections, problems with their nervous system, loss of arms or legs, permanent deafness, suffer from strokes or seizures, and death.

☐ Pneumococcal vaccine

I understand by not receiving the Pneumococcal vaccine, the child listed here is at risk of severe disease including meningitis, which is a severe infection of the covering of the brain and the spinal cord. The child is also at risk of blood infections, pneumonia, permanent deafness, brain damage, and death.

☐ Polio vaccine

I understand by not receiving the Polio vaccine, the child listed here is at risk of a fever, sore throat, nausea, headaches, stomachaches, stiffness, paralysis that can lead to permanent disability, and death.

☐ Td (Tetanus, Diphtheria) vaccine

I understand by not receiving the Td vaccine, the child listed here is at risk of seizures, serious neuromuscular disease, heart problems, and death.

☐ Tdap (Tetanus, Diphtheria, Pertussis) vaccine

I understand by not receiving the Tdap vaccine, the child listed here is at risk of pneumonia, whooping cough, seizures, inflammation of the brain, serious neurological complications, and death.

☐ Varicella (Chickenpox) vaccine

I understand by not receiving the Varicella vaccine, the child listed here is at risk of a rash, fever, severe skin infections, scars, pneumonia, seizures, brain infection, and death.
I have decided to decline the required vaccine(s) as indicated above, and I have checked the appropriate box(es) for the vaccine(s) I want to decline.

I understand that if the my child is exposed to a vaccine-preventable disease for which I have chosen an exemption, he or she should expect to be excluded from childcare or school for 21 days or longer as determined by the Arkansas Department of Health. This is for the protection of the exempted child and the protection of others.

I understand that I may reconsider and accept vaccination for my child at any time in the future.

Under penalty of law, I affirm that I received and reviewed the entire application packet, including the Vaccine Information Statements from the Centers for Disease Control and Prevention regarding the risks associated with my child not being vaccinated as stated in this information and that I still request an exemption from the vaccine(s).

Release of information will be provided only to the custodial parent/guardian who completes this application and according to the notarized signature.

Signature ____________________________

Parent/Guardian

Notary Public

State of ____________________________ County of ____________________________

On this ___ day of ________________, 20__, before me personally appeared ____________________________, Parent/Guardian

known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seal.

Signature ____________________________ Notary Public

My Commission Expires: ____________________________

Please Return Application: CHOOSE ONE METHOD ONLY

MAIL to: Arkansas Department of Health
ATTN: Exemptions
4815 West Markham, Mail Slot #48
Little Rock, AR 72205
EMAIL to: Immunization.Section@arkansas.gov
FAX to: (501) 661-2300
Educational Component

Vaccinations are strongly recommended by the Arkansas Department of Health, the American Academy of Pediatrics, the American Academy of Family Physicians, and the Centers for Disease Control and Prevention.

Please read the attached documents.
VACCINE INFORMATION STATEMENT

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

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
1 Why get vaccinated?

Hib vaccine can prevent *Haemophilus influenzae* type b (Hib) 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 bloodstream. Severe Hib infection, also called invasive Hib disease, requires treatment in a hospital and can sometimes result in death.

Before Hib vaccine, Hib disease was the leading cause of bacterial meningitis among children under 5 years old in the United States. Meningitis is an infection of the lining of the brain and spinal cord. It can lead to brain damage and deafness.

Hib infection can also cause:
- pneumonia,
- severe swelling in the throat, making it hard to breathe,
- infections of the blood, joints, bones, and covering of the heart,
- death.

2 Hib vaccine

Hib vaccine is usually given as 3 or 4 doses (depending on brand). Hib vaccine may be given as a stand-alone vaccine, or as part of a combination vaccine (a type of vaccine that combines more than one vaccine together into one shot).

Infants will usually get their first dose of Hib vaccine at 2 months of age, and will usually complete the series at 12-15 months of age.

Children between 12-15 months and 5 years of age who have not previously been completely vaccinated against Hib may need 1 or more doses of Hib vaccine.

Children over 5 years old and adults usually do not receive Hib vaccine, but it might be recommended for older children or adults with asplenia or sickle cell disease, before surgery to remove the spleen, or following a bone marrow transplant. Hib vaccine may also be recommended for people 5 to 18 years old with HIV.

Hib vaccine may be given at the same time as other vaccines.

3 Talk with your health care provider

Tell your vaccine provider if the person getting the vaccine:
- Has had an allergic reaction after a previous dose of Hib vaccine, or has any severe, life-threatening allergies.

In some cases, your health care provider may decide to postpone Hib vaccination to a future visit.

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

Your health care provider can give you more information.
Risks of a vaccine reaction

- Redness, warmth, and swelling where shot is given, and fever can happen after Hib vaccine.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

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

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 do not give medical advice.

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 the VICP website at 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.

How can I learn more?

- Ask your health care 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 CDC’s website at www.cdc.gov/vaccines

Vaccine Information Statement (Interim)
Hib Vaccine
10/30/2019 | 42 U.S.C. § 300aa-26
Hepatitis A Vaccine
What You Need to Know

1 Why get vaccinated?

Hepatitis A is a serious liver disease. It is caused by the hepatitis A virus (HAV). HAV is spread from person to person through contact with the feces (stool) of people who are infected, which can easily happen if someone does not wash his or her hands properly. You can also get hepatitis A from food, water, or objects contaminated with HAV.

Symptoms of hepatitis A can include:
• fever, fatigue, loss of appetite, nausea, vomiting, and/or joint pain
• severe stomach pains and diarrhea (mainly in children), or
• jaundice (yellow skin or eyes, dark urine, clay-colored bowel movements).

These symptoms usually appear 2 to 6 weeks after exposure and usually last less than 2 months, although some people can be ill for as long as 6 months. If you have hepatitis A you may be too ill to work.

Children often do not have symptoms, but most adults do. You can spread HAV without having symptoms.

Hepatitis A can cause liver failure and death, although this is rare and occurs more commonly in persons 50 years of age or older and persons with other liver diseases, such as hepatitis B or C.

Hepatitis A vaccine can prevent hepatitis A. Hepatitis A vaccines were recommended in the United States beginning in 1996. Since then, the number of cases reported each year in the U.S. has dropped from around 31,000 cases to fewer than 1,500 cases.

2 Hepatitis A vaccine

Hepatitis A vaccine is an inactivated (killed) vaccine. You will need 2 doses for long-lasting protection. These doses should be given at least 6 months apart.

Children are routinely vaccinated between their first and second birthdays (12 through 23 months of age). Older children and adolescents can get the vaccine after 23 months. Adults who have not been vaccinated previously and want to be protected against hepatitis A can also get the vaccine.

You should get hepatitis A vaccine if you:
• are traveling to countries where hepatitis A is common,
• are a man who has sex with other men,
• use illegal drugs,
• have a chronic liver disease such as hepatitis B or hepatitis C,
• are being treated with clotting-factor concentrates,
• work with hepatitis A-infected animals or in a hepatitis A research laboratory, or
• expect to have close personal contact with an international adoptee from a country where hepatitis A is common.

Ask your healthcare provider if you want more information about any of these groups.

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

3 Some people should not get this vaccine

Tell the person who is giving you the vaccine:
• If you have any severe, life-threatening allergies. If you ever had a life-threatening allergic reaction after a dose of hepatitis A 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 you are 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 A vaccine do not have any problems with it.

Minor problems following hepatitis A vaccine include:
- soreness or redness where the shot was given
- low-grade fever
- headache
- tiredness

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/

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 A Vaccine

7/20/2016
42 U.S.C. § 300aa-26
Hepatitis B Vaccine: What You Need to Know

1. Why get vaccinated?

Hepatitis B vaccine can prevent 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. Chronically-infected people can spread hepatitis B virus to others, even if they do not feel or look sick themselves.

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 through:

- Birth (if a mother has hepatitis B, her baby can become infected)
- 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

Most people who are vaccinated with hepatitis B vaccine are immune for life.

2. Hepatitis B vaccine

Hepatitis B vaccine is usually given as 2, 3, or 4 shots.

**Infants** should get their first dose of hepatitis B vaccine at birth and will usually complete the series at 6 months of age (sometimes it will take longer than 6 months to complete the series).

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

Hepatitis B vaccine is also recommended for certain **unvaccinated adults**:  
- 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, infection with hepatitis C, or diabetes  
- Anyone who wants to be protected from hepatitis B

Hepatitis B vaccine may be given at the same time as other vaccines.
**3 Talk with your health care provider**

Tell your vaccine provider if the person getting the vaccine:

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

In some cases, your health care provider may decide to postpone hepatitis B vaccination to a future visit.

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

Your health care provider can give you more information.

**4 Risks of a vaccine reaction**

- Soreness where the shot is given or fever can happen after hepatitis B vaccine.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

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 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. 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. 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 CDC's www.cdc.gov/vaccines

**Vaccine Information Statement (Interim) | Hepatitis B Vaccine**

8/15/2019 | 42 U.S.C. § 300aa-26
MMR Vaccine (Measles, Mumps, and Rubella): What You Need to Know

1 Why get vaccinated?

MMR vaccine can prevent measles, mumps, and rubella.

- **MEASLES (M)** can cause fever, cough, runny nose, and red, watery eyes, commonly followed by a rash that covers the whole body. It can lead to seizures (often associated with fever), ear infections, diarrhea, and pneumonia. Rarely, measles can cause brain damage or death.
- **MUMPS (M)** can cause fever, headache, muscle aches, tiredness, loss of appetite, and swollen and tender salivary glands under the ears. It can lead to deafness, swelling of the brain and/or spinal cord covering, painful swelling of the testicles or ovaries, and, very rarely, death.
- **RUBELLA (R)** can cause fever, sore throat, rash, headache, and eye irritation. It can cause arthritis in up to half of teenage and adult women. If a woman gets rubella while she is pregnant, she could have a miscarriage or her baby could be born with serious birth defects.

Most people who are vaccinated with MMR will be protected for life. Vaccines and high rates of vaccination have made these diseases much less common in the United States.

2 MMR vaccine

Children need 2 doses of MMR vaccine, usually:
- First dose at 12 through 15 months of age
- Second dose at 4 through 6 years of age

Infants who will be traveling outside the United States when they are between 6 and 11 months of age should get a dose of MMR vaccine before travel. The child should still get 2 doses at the recommended ages for long-lasting protection.

Older children, adolescents, and adults also need 1 or 2 doses of MMR vaccine if they are not already immune to measles, mumps, and rubella. Your health care provider can help you determine how many doses you need.

A third dose of MMR might be recommended in certain mumps outbreak situations.

MMR vaccine may be given at the same time as other vaccines. Children 12 months through 12 years of age might receive MMR vaccine together with varicella vaccine in a single shot, known as MMRV. Your health care provider can give you more information.

3 Talk with your health care provider

Tell your vaccine provider if the person getting the vaccine:
- Has had an allergic reaction after a previous dose of MMR or MMRV vaccine, or has any severe, life-threatening allergies.
- Is pregnant, or thinks she might be pregnant.
- Has a weakened immune system, or has a parent, brother, or sister with a history of hereditary or congenital immune system problems.
- Has ever had a condition that makes him or her bruise or bleed easily.
- Has recently had a blood transfusion or received other blood products.
- Has tuberculosis.
- Has gotten any other vaccines in the past 4 weeks.

In some cases, your health care provider may decide to postpone MMR vaccination to a future visit.

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

Your health care provider can give you more information.
4 Risks of a vaccine reaction

- Soreness, redness, or rash where the shot is given and rash all over the body can happen after MMR vaccine.
- Fever or swelling of the glands in the cheeks or neck sometimes occur after MMR vaccine.
- More serious reactions happen rarely. These can include seizures (often associated with fever), temporary pain and stiffness in the joints (mostly in teenage or adult women), pneumonia, swelling of the brain and/or spinal cord covering, or temporary low platelet count which can cause unusual bleeding or bruising.
- In people with serious immune system problems, this vaccine may cause an infection which may be life-threatening. People with serious immune system problems should not get MMR vaccine.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

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 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. 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. 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 CDC’s www.cdc.gov/vaccines

Vaccine Information Statement (Interim)
MMR Vaccine

8/15/2019 | 42 U.S.C. § 300aa-26
Meningococcal ACWY Vaccine:
What You Need to Know

1 Why get vaccinated?

Meningococcal ACWY vaccine can help protect against meningococcal disease caused by serogroups A, C, W, and Y. A different meningococcal vaccine is available that can help protect against serogroup B.

Meningococcal disease can cause meningitis (infection of the lining of the brain and spinal cord) and infections of the blood. Even when it is treated, meningococcal disease kills 10 to 15 infected people out of 100. And of those who survive, about 10 to 20 out of every 100 will suffer disabilities such as hearing loss, brain damage, kidney damage, loss of limbs, nervous system problems, or severe scars from skin grafts.

Anyone can get meningococcal disease but certain people are at increased risk, including:
- Infants younger than one year old
- Adolescents and young adults 16 through 23 years old
- People with certain medical conditions that affect the immune system
- Microbiologists who routinely work with isolates of N. meningitidis, the bacteria that cause meningococcal disease
- People at risk because of an outbreak in their community

2 Meningococcal ACWY vaccine

Adolescents need 2 doses of a meningococcal ACWY vaccine:
- First dose: 11 or 12 year of age
- Second (booster) dose: 16 years of age

In addition to routine vaccination for adolescents, meningococcal ACWY vaccine is also recommended for certain groups of people:
- People at risk because of a serogroup A, C, W, or Y meningococcal disease outbreak
- People with HIV
- Anyone whose spleen is damaged or has been removed, including people with sickle cell disease
- Anyone with a rare immune system condition called “persistent complement component deficiency”
- Anyone taking a type of drug called a complement inhibitor, such as eculizumab (also called Soliris*) or ravulizumab (also called Ultomirvis*)
- Microbiologists who routinely work with isolates of N. meningitidis
- Anyone traveling to, or living in, a part of the world where meningococcal disease is common, such as parts of Africa
- College freshmen living in residence halls
- U.S. military recruits

3 Talk with your health care provider

Tell your vaccine provider if the person getting the vaccine:
- Has had an allergic reaction after a previous dose of meningococcal ACWY vaccine, or has any severe, life-threatening allergies.

In some cases, your health care provider may decide to postpone meningococcal ACWY vaccination to a future visit.

Not much is known about the risks of this vaccine for a pregnant woman or breastfeeding mother. However, pregnancy or breastfeeding are not reasons to avoid meningococcal ACWY vaccination. A pregnant or breastfeeding woman should be vaccinated if otherwise indicated.
People with minor illnesses, such as a cold, may be vaccinated. People who are moderately or severely ill should usually wait until they recover before getting meningococcal ACWY vaccine.

Your health care provider can give you more information.

### Risks of a vaccine reaction

- Redness or soreness where the shot is given can happen after meningococcal ACWY vaccine.
- A small percentage of people who receive meningococcal ACWY vaccine experience muscle or joint pains.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

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

### 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](http://www.vaers.hhs.gov) or call 1-800-822-7967. VAERS is only for reporting reactions, and VAERS staff do not give medical advice.

### 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 the VICP website at [www.hrsa.gov/vaccinecompensation](http://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.

### 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 CDC's [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)
Pneumococcal Conjugate Vaccine (PCV13): What You Need to Know

1 Why get vaccinated?

Pneumococcal conjugate vaccine (PCV13) can prevent 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. Pneumococcal bacteria are one of the most common causes of pneumonia.

Besides pneumonia, pneumococcal bacteria can also cause:
- Ear infections
- Sinus infections
- Meningitis (infection of the tissue covering the brain and spinal cord)
- Bacteremia (bloodstream infection)

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

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 PCV13

PCV13 protects against 13 types of bacteria that cause pneumococcal disease.

Infants and young children usually need 4 doses of pneumococcal conjugate vaccine, at 2, 4, 6, and 12–15 months of age. In some cases, a child might need fewer than 4 doses to complete PCV13 vaccination.

A dose of PCV13 vaccine is also recommended for anyone 2 years or older with certain medical conditions if they did not already receive PCV13.

This vaccine may be given to adults 65 years or older based on discussions between the patient and health care provider.

3 Talk with your health care provider

Tell your vaccine provider if the person getting the vaccine:
- 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), or has any severe, life-threatening allergies.
- In some cases, your health care provider may decide to postpone PCV13 vaccination to a future visit.

People with minor illnesses, such as a cold, may be vaccinated. People who are moderately or severely ill should usually wait until they recover before getting PCV13.

Your health care provider can give you more information.
4 Risks of a vaccine reaction

- Redness, swelling, pain, or tenderness where the shot is given, and fever, loss of appetite, fussiness (irritability), feeling tired, headache, and chills can happen after PCV13.

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.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

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 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. 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. There is a time limit to file a claim for compensation.

7 How can I learn more?

- Ask your health care 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 CDC's website at www.cdc.gov/vaccines
Polio Vaccine: What You Need to Know

1. Why get vaccinated?

Polio vaccine can prevent 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.

A smaller group of people will develop more serious symptoms that affect the brain and spinal cord:
- 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 is the most severe symptom associated with polio because it can lead to permanent disability and death.

Improvements in limb paralysis can occur, but in some people new muscle pain and weakness may develop 15 to 40 years later. This is called post-polio syndrome.

Polio has been eliminated from the United States, but it still occurs in other parts of the world. The best way to protect yourself and keep the United States polio-free is to maintain high immunity (protection) in the population against polio through vaccination.

2. Polio vaccine

Children should usually get 4 doses of polio vaccine, at 2 months, 4 months, 6–18 months, and 4–6 years of age.

Most adults do not need polio vaccine because they were already vaccinated against polio as children. 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 poliovirus, and
- health care workers treating patients who could have polio.

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

Polio vaccine may be given at the same time as other vaccines.

3. Talk with your health care provider

Tell your vaccine provider if the person getting the vaccine:
- Has had an allergic reaction after a previous dose of polio vaccine, or has any severe, life-threatening allergies.

In some cases, your health care provider may decide to postpone polio vaccination to a future visit.
People with minor illnesses, such as a cold, may be vaccinated. People who are moderately or severely ill should usually wait until they recover before getting polio vaccine.

Your health care provider can give you more information.

4 Risks of a vaccine reaction

- A sore spot with redness, swelling, or pain where the shot is given can happen after polio vaccine.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

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 do not give medical advice.

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 the VICP website at 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 health care 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 CDC’s website at www.cdc.gov/vaccines
VACCINE INFORMATION STATEMENT

Td Vaccine
What You Need to Know

1 Why get vaccinated?

Tetanus and diphtheria are very serious diseases. They are rare in the United States today, but people who do become infected often have severe complications. Td vaccine is used to protect adolescents and adults from both of these diseases.

Both tetanus and diphtheria are infections caused by bacteria. Diphtheria spreads from person to person through coughing or sneezing. Tetanus-causing bacteria enter the body through cuts, scratches, or wounds.

TETANUS (Lockjaw) causes painful muscle tightening and stiffness, usually all over the body.

- It can lead to tightening of muscles in the head and neck so you can’t open your mouth, swallow, or sometimes even breathe. Tetanus kills about 1 out of every 10 people who are infected even after receiving the best medical care.

DIPHTHERIA can cause a thick coating to form in the back of the throat.

- It can lead to breathing problems, paralysis, heart failure, and death.

Before vaccines, as many as 200,000 cases of diphtheria and hundreds of cases of tetanus were reported in the United States each year. Since vaccination began, reports of cases for both diseases have dropped by about 99%.

2 Td vaccine

Td vaccine can protect adolescents and adults from tetanus and diphtheria. Td is usually given as a booster dose every 10 years but it can also be given earlier after a severe and dirty wound or burn.

Another vaccine, called Tdap, which protects against pertussis in addition to tetanus and diphtheria, is sometimes recommended instead of Td vaccine.

Your doctor or the person giving you the vaccine can give you more information.

Td may safely be given at the same time as other vaccines.

3 Some people should not get this vaccine

- A person who has ever had a life-threatening allergic reaction after a previous dose of any tetanus or diphtheria containing vaccine, OR has a severe allergy to any part of this vaccine, should not get Td vaccine. Tell the person giving the vaccine about any severe allergies.

- Talk to your doctor if you:
  - had severe pain or swelling after any vaccine containing diphtheria or tetanus,
  - ever had a condition called Guillain Barré Syndrome (GBS),
  - aren’t feeling well on the day the shot is scheduled.

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. Serious reactions are also possible but are rare.

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

Mild Problems following Td vaccine: (Did not interfere with activities)

- Pain where the shot was given (about 8 people in 10)
- Redness or swelling where the shot was given (about 1 person in 4)
- Mild fever (rare)
- Headache (about 1 person in 4)
- Tiredness (about 1 person in 4)

Moderate Problems following Td vaccine: (Interfered with activities, but did not require medical attention)

- Fever over 102°F (rare)

Severe Problems following Td vaccine: (Unable to perform usual activities; required medical attention)

- Swelling, severe pain, bleeding and/or redness in the arm where the shot was given (rare).
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 people 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 fewer than 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/

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 doctor. 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)
  - Visit CDC’s website at www.cdc.gov/vaccines

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. These would usually 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 the person 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.

VAERS does not give medical advice.
VACCINE INFORMATION STATEMENT

Tdap Vaccine
What You Need to Know

(Tetanus, Diphtheria and Pertussis)

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

1 Why get vaccinated?

Tetanus, diphtheria and pertussis are very serious diseases. Tdap vaccine can protect us from these diseases. And, Tdap vaccine given to pregnant women can protect newborn babies against pertussis.

TETANUS (Lockjaw) is rare in the United States today. It causes painful muscle tightening and stiffness, usually all over the body.
- It can lead to tightening of muscles in the head and neck so you can’t open your mouth, swallow, or sometimes even breathe. Tetanus kills about 1 out of 10 people who are infected even after receiving the best medical care.

DIPHTHERIA is also rare in the United States today. It can cause a thick coating to form in the back of the throat.
- It can lead to breathing problems, heart failure, paralysis, and death.

PERTUSSIS (Whooping Cough) causes severe coughing spells, which can cause difficulty breathing, vomiting and disturbed sleep.
- It can also lead to weight loss, incontinence, and rib fractures. Up to 2 in 100 adolescents and 5 in 100 adults with pertussis are hospitalized or have complications, which could include pneumonia or death.

These diseases are caused by bacteria. Diphtheria and pertussis are spread from person to person through secretions from coughing or sneezing. Tetanus enters the body through cuts, scratches, or wounds.

Before vaccines, as many as 200,000 cases of diphtheria, 200,000 cases of pertussis, and hundreds of cases of tetanus, were reported in the United States each year. Since vaccination began, reports of cases for tetanus and diphtheria have dropped by about 99% and for pertussis by about 80%.

2 Tdap vaccine

Tdap vaccine can protect adolescents and adults from tetanus, diphtheria, and pertussis. One dose of Tdap is routinely given at age 11 or 12. People who did not get Tdap at that age should get it as soon as possible.

Tdap is especially important for healthcare professionals and anyone having close contact with a baby younger than 12 months.

Pregnant women should get a dose of Tdap during every pregnancy, to protect the newborn from pertussis. Infants are most at risk for severe, life-threatening complications from pertussis.

Another vaccine, called Td, protects against tetanus and diphtheria, but not pertussis. A Td booster should be given every 10 years. Tdap may be given as one of these boosters if you have never gotten Tdap before. Tdap may also be given after a severe cut or burn to prevent tetanus infection.

Your doctor or the person giving you the vaccine can give you more information.

Tdap may safely be given at the same time as other vaccines.

3 Some people should not get this vaccine

- A person who has ever had a life-threatening allergic reaction after a previous dose of any diphtheria, tetanus or pertussis containing vaccine, OR has a severe allergy to any part of this vaccine, should not get Tdap vaccine. Tell the person giving the vaccine about any severe allergies.

- Anyone who had coma or long repeated seizures within 7 days after a childhood dose of DTP or DTaP, or a previous dose of Tdap, should not get Tdap, unless a cause other than the vaccine was found. They can still get Td.

- Talk to your doctor if you:
  - have seizures or another nervous system problem,
  - had severe pain or swelling after any vaccine containing diphtheria, tetanus or pertussis,
  - ever had a condition called Guillain-Barré Syndrome (GBS),
  - aren’t feeling well on the day the shot is scheduled.
4 Risks

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

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

**Mild problems following Tdap**  
(Does not interfere with activities)

- Pain where the shot was given (about 3 in 4 adolescents or 2 in 3 adults)
- Redness or swelling where the shot was given (about 1 person in 5)
- Mild fever of at least 100.4°F (up to about 1 in 25 adolescents or 1 in 100 adults)
- Headache (about 3 or 4 people in 10)
- Tiredness (about 1 person in 3 or 4)
- Nausea, vomiting, diarrhea, stomach ache (up to 1 in 4 adolescents or 1 in 10 adults)
- Chills, sore joints (about 1 person in 10)
- Body aches (about 1 person in 3 or 4)
- Rash, swollen glands (uncommon)

**Moderate problems following Tdap**  
(Interfered with activities, but did not require medical attention)

- Pain where the shot was given (up to 1 in 5 or 6)
- Redness or swelling where the shot was given (up to about 1 in 16 adolescents or 1 in 12 adults)
- Fever over 102°F (about 1 in 100 adolescents or 1 in 250 adults)
- Headache (about 1 in 7 adolescents or 1 in 10 adults)
- Nausea, vomiting, diarrhea, stomach ache (up to 1 or 3 people in 100)
- Swelling of the entire arm where the shot was given (up to about 1 in 500).

**Severe problems following Tdap**  
(Unable to perform usual activities: required medical attention)

- Swelling, severe pain, bleeding and redness in the arm where the shot was given (rare).

**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 people 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 fewer than 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/](http://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 usually 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 the person to the nearest hospital. Otherwise, call your doctor.
- Afterwards, 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](http://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](http://www.hrsa.gov/vaccinecompensation). There is a time limit to file a claim for compensation.

7 How can I learn more?

- Ask your doctor. 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](http://www.cdc.gov/vaccines)

**Vaccine Information Statement**

**Tdap Vaccine**

2/24/2015

42 U.S.C. § 300aa-26
Varicella (Chickenpox) Vaccine: What You Need to Know

1 Why get vaccinated?

Varicella vaccine can prevent chickenpox.

Chickenpox can cause an itchy rash that usually lasts about a week. It can also cause fever, tiredness, loss of appetite, and headache. It can lead to skin infections, pneumonia, inflammation of the blood vessels, and swelling of the brain and/or spinal cord covering, and infections of the bloodstream, bone, or joints. Some people who get chickenpox get a painful rash called shingles (also known as herpes zoster) years later.

Chickenpox is usually mild but it can be serious in infants under 12 months of age, adolescents, adults, pregnant women, and people with a weakened immune system. Some people get so sick that they need to be hospitalized. It doesn't happen often, but people can die from chickenpox.

Most people who are vaccinated with 2 doses of varicella vaccine will be protected for life.

2 Varicella vaccine

Children need 2 doses of varicella vaccine, usually:
- First dose: 12 through 15 months of age
- Second dose: 4 through 6 years of age

Older children, adolescents, and adults also need 2 doses of varicella vaccine if they are not already immune to chickenpox.

Varicella vaccine may be given at the same time as other vaccines. Also, a child between 12 months and 12 years of age might receive varicella vaccine together with MMR (measles, mumps, and rubella) vaccine in a single shot, known as MMRV. Your health care provider can give you more information.

3 Talk with your health care provider

Tell your vaccine provider if the person getting the vaccine:
- Has had an allergic reaction after a previous dose of varicella vaccine, or has any severe, life-threatening allergies.
- Is pregnant, or thinks she might be pregnant.
- Has a weakened immune system, or has a parent, brother, or sister with a history of hereditary or congenital immune system problems.
- Is taking salicylates (such as aspirin).
- Has recently had a blood transfusion or received other blood products.
- Has tuberculosis.
- Has gotten any other vaccines in the past 4 weeks.

In some cases, your health care provider may decide to postpone varicella vaccination to a future visit.

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

Your health care provider can give you more information.

4 Risks of a vaccine reaction

- Sore arm from the injection, fever, or redness or rash where the shot is given can happen after varicella vaccine.
- More serious reactions happen very rarely. These can include pneumonia, infection of the brain and/or spinal cord covering, or seizures that are often associated with fever.
- In people with serious immune system problems, this vaccine may cause an infection which may
be life-threatening. People with serious immune system problems should not get varicella vaccine.

It is possible for a vaccinated person to develop a rash. If this happens, the varicella vaccine virus could be spread to an unprotected person. Anyone who gets a rash should stay away from people with a weakened immune system and infants until the rash goes away. Talk with your health care provider to learn more.

Some people who are vaccinated against chickenpox get shingles (herpes zoster) years later. This is much less common after vaccination than after chickenpox disease.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

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 do not give medical advice.

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7 How can I learn more?

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- Call your local or state health department.
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  - Call 1-800-232-4636 (1-800-CDC-INFO) or
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Vaccine Information Statement (Interim)  Varicella Vaccine

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