

IMMUNIZATION RESOURCES

FOR PARENTS& PARENTS-TO-BE 2024

Dear Parent or Parent-to-Be,

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

Vaccines save lives. They protect against serious diseases like COVID-19, measles, flu, whooping cough, and chickenpox. Vaccinating children against certain diseases is one important way to help them stay healthy.

WIC is dedicated to partnering with other services to support your family's whole health, including by promoting immunizations. WIC staff can help you keep your child up-to-date on their vaccines -- all you need to do is track your child's electronic vaccination records in your state's immunization information system (IIS). If your child is behind on vaccinations, WIC staff will suggest a place you can go to get your child the vaccines they need.

Most health insurance plans cover the cost of vaccines, but you may want to check with your insurance provider before going to the doctor. If your child does not have health insurance, is Medicaid-eligible, or is underinsured, they may be able to receive free vaccines at their doctor's office or a health center through the federal Vaccines for Children (VFC) program. For more information on VFC and how to pay for your family's vaccines, visit <u>vaccinateyourfamily.org/paying-forvaccines</u>.

Adults, especially pregnant people, need vaccines too. By getting yourself vaccinated while pregnant you are helping to protect BOTH you and your baby from serious diseases like flu, whooping cough, respiratory syncytial virus (RSV), and COVID-19.

For more information and for answers to questions you may have about vaccines for your family, please visit <u>vaccinateyourfamily.org.</u>

This booklet was created by Vaccinate Your Family and is supported through funding provided by the Centers for Disease Control and Prevention (CDC).

Your child needs vaccines as they grow!

2024 Recommended Immunizations for Birth Through 6 Years Old

Want to learn more?

Scan this QR code to find out which vaccines your child might need. Or visit www.cdc.gov/vaccines/tool/child.html



VACCINE OR PREVENTIVE ANTIBODY	BIRTH	1 молтн	2 MONTHS	4 MONTHS	6 MONTHS	7 MONTHS	8 MONTHS	12 MONTHS	15 молтнз	18 MONTHS	19 MONTHS	20-23 MONTHS	2-3 YEARS	4-6 YEARS
RSV antibody		Depend	s on mother'	s RSV vaccin	e status			Depends of	on child's hea	alth status				
Hepatitis B	Dose 1	Dos	se 2				Dos	se 3						
Rotavirus			Dose 1	Dose 2	Dose 3									
DTaP			Dose 1	Dose 2	Dose 3				Dos	se 4				Dose 5
Hib			Dose 1	Dose 2	Dose 3			Dos	se 4					
Pneumococcal			Dose 1	Dose 2	Dose 3			Dos	se 4					
Polio			Dose 1	Dose 2			Dos	se 3						Dose 4
COVID-19								At least 1 d	lose of the cu	urrent COVID	-19 vaccine			
Influenza/Flu								Every y	rear. Two dos	es for some c	hildren			
MMR								Dos	se 1					Dose 2
Chickenpox								Dos	se 1					Dose 2
Hepatitis A									2 doses s	eparated by	6 months			

KEY

ALL children should be immunized at this age.

SOME children should get this dose of vaccine or preventive antibody at this age

Talk to your child's health care provider for more guidance if:

1. Your child has any medical condition that puts them at higher risk for infection.

2. Your child is traveling outside the United States.

3. Your child misses a vaccine recommended for their age.



FOR MORE INFORMATION Call toll-free: 1-800-CDC-INFO (1-800-232-4636) Or visit: www.cdc.gov/vaccines/parents





What diseases do these vaccines protect against?

VACCINE-PREVENTABLE DISEASE	DISEASE COMPLICATIONS
RSV (Respiratory syncytial virus) Contagious viral infection of the nose, throat, and sometimes lungs; spread through air and direct contact	Infection of the lungs (pneumonia) and small airways of the lungs; especially dangerous for infants and young children
Hepatitis B Contagious viral infection of the liver; spread through contact with infected body fluids such as blood or semen	Chronic liver infection, liver failure, liver cancer, death.
Rotavirus Contagious viral infection of the gut; spread through the mouth from hands and food contaminated with stool	Severe diarrhea, dehydration, death
Diphtheria* Contagious bacterial infection of the nose, throat, and sometimes lungs; spread through air and direct contact	Swelling of the heart muscle, heart failure, coma, paralysis, death
Pertussis (Whooping Cough)* Contagious bacterial infection of the lungs and airway; spread through air and direct contact	Infection of the lungs (pneumonia), death; especially dangerous for babies
Tetanus (Lockjaw)* Bacterial infection of brain and nerves caused by spores found in soil and dust everywhere; spores enter the body through wounds or broken skin	Seizures, broken bones, difficulty breathing, death
Hib (Haemophilus influenzae type b) Contagious bacterial infection of the lungs, brain and spinal cord, or bloodstream; spread through air and direct contact	Depends on the part of the body infected, but can include brain damage, hearing loss, loss of arm or leg, death
Pneumococcal Bacterial infections of ears, sinuses, lungs, or bloodstream; spread through direct contact with respiratory droplets like saliva or mucus	Depends on the part of the body infected, but can include infection of the lungs (pneumonia), blood poisoning, infection of the lining of the brain and spinal cord, death
Polio Contagious viral infection of nerves and brain; spread through the mouth from stool on contaminated hands, food or liquid, and by air and direct contact	Paralysis, death
COVID-19 Contagious viral infection of the nose, throat, or lungs; may feel like a cold or flu. Spread through air and direct contact	Infection of the lungs (pneumonia); blood clots; liver, heart or kidney damage; long COVID; death
Influenza (Flu) Contagious viral infection of the nose, throat, and sometimes lungs; spread through air and direct contact	Infection of the lungs (pneumonia), sinus and ear infections, worsening of underlying heart or lung conditions, death
Measles (Rubeola)[†] Contagious viral infection that causes high fever, cough, red eyes, runny nose, and rash; spread through air and direct contact	Brain swelling, infection of the lungs (pneumonia), death
Mumps[†] Contagious viral infection that causes fever, tiredness, swollen cheeks, and tender swollen jaw; spread through air and direct contact	Brain swelling, painful and swollen testicles or ovaries, deafness, death
Rubella (German Measles)[†] Contagious viral infection that causes low-grade fever, sore throat, and rash; spread through air and direct contact	Very dangerous in pregnant people; can cause miscarriage or stillbirth, premature delivery, severe birth defects
Chickenpox (Varicella) Contagious viral infection that causes fever, headache, and an itchy, blistering rash; spread through air and direct contact	Infected sores, brain swelling, infection of the lungs (pneumonia), death
Hepatitis A Contagious viral infection of the liver; spread by contaminated food or drink or close contact with an infected person	Liver failure, death

Older children and teens need vaccines too!

2024 Recommended Immunizations for Children 7-18 Years Old

Want to learn more?

Scan this QR code to find out which vaccines your child might need. Or visit www.cdc.gov/vaccines/tool/teen.html



RECOMMENDED VACCINES	7 YEARS	8 YEARS	9 YEARS	10 YEARS	11 years	12 YEARS	13 YEARS	14 years	15 YEARS	16 years	17 YEARS	18 Years
нру												
Tdap ¹												
Meningococcal ACWY												
Meningococcal B												
Influenza/Flu	Every year. for some	Two doses children					Every	/ year				
COVID-19					At least 1	dose of the cu	ırrent COVID-1	9 vaccine				
RSV								lf pregnant duri	ing RSV season			
Мрох												
Dengue			ONLY if li	ving in a place	where dengue	is common ANI) has laboratory	y test confirmin	ig past dengue	infection		

¹ One dose of Tdap is recommended during each pregnancy

KEY





ALL children in age group can get the vaccine

- SOME children in age group should get the vaccine
- Parents/caregivers should talk to their health care provider to decide if this vaccine is right for their child

Talk to your child's health care provider for more guidance if:

1. Your child has any medical condition that puts them at higher risk for infection or is pregnant.

- 2. Your child is traveling outside the United States.
- 3. Your child misses any vaccine recommended for their age or for babies and young children.



FOR MORE INFORMATION Call toll-free: 1-800-CDC-INFO (1-800-232-4636) Or visit: www.cdc.gov/vaccines/parents





What diseases do these vaccines protect against?

VACCINE-PREVENTABLE DISEASE	DISEASE COMPLICATIONS	NUMBER OF VACCINE DOSES
HPV (Human papillomavirus) Contagious viral infection spread by close skin-to-skin touching, including during sex	Genital warts and many types of cancers later in life, including cancers of the cervix, vagina, penis, anus, and throat	2 or 3 doses
Tetanus (Lockjaw)* Infection caused by bacterial spores found in soil and dust everywhere; spores enter the body through wounds or broken skin	Seizures, broken bones, difficulty breathing, death	1 dose at age 11-12 years Additional doses if missed childhood doses 1 dose for dirty wounds
Diphtheria* Contagious bacterial infection of the nose, throat, and sometimes lungs; spread through air and direct contact	Swelling of the heart muscle, heart failure, coma, paralysis, death	1 dose at age 11-12 years Additional doses if missed childhood doses
Pertussis (Whooping Cough)* Contagious bacterial infection of the lungs and airway; spread through air and direct contact	Infection of the lungs (pneumonia), death; especially dangerous for babies	1 dose at age 11-12 years Additional doses if missed childhood doses 1 dose every pregnancy
Meningococcal** Contagious bacterial infection of the lining of the brain and spinal cord or the bloodstream; spread through air and direct contact	Loss of arm or leg, deafness, seizures, death	2 doses. Additional doses may be needed depending on medical condition or vaccine used.
Influenza (Flu) Contagious viral infection of the nose, throat, and sometimes lungs; spread through air and direct contact	Infection of the lungs (pneumonia), sinus and ear infections, worsening of underlying heart or lung conditions, death	1 dose each year 2 doses in some children aged 6months through 8 years
COVID-19 Contagious viral infection of the nose, throat, or lungs; may feel like a cold or flu. Spread through air and direct contact	Infection of the lungs (pneumonia); blood clots; liver, heart or kidney damage; long COVID; death	1 or more doses of the current COVID-19 vaccine depending on health status. For more information: www.cdc.gov/covidschedule
RSV (Respiratory syncytial virus) Contagious viral infection of the nose, throat, and sometimes lungs spread through air and direct contact	Infection of the lungs (pneumonia) and small airways of the lungs; especially dangerous for infants and young children	1 dose at 32 through 36 weeks of pregnancy during September through January in most of the continental United States
Mpox Contagious viral infection spread through close, often skin-to-skin contact, including sex; causes a painful rash, fever, headache, tiredness, cough, runny nose, sore throat, swollen lymph nodes	Infected sores, brain swelling, infection of the lungs (pneumonia), eye infection, blindness, death	2 doses
Dengue Viral infection spread by bite from infected mosquito; causes fever, headache, pain behind the eyes, rash, joint pain, body ache, nausea, loss of appetite, feeling tired, abdominal pain	Severe bleeding, seizures, shock, damage to the liver, heart, and lungs, death	3 doses

***Tdap** protects against tetanus, diphtheria, and pertussis

**Healthy adolescents: Meningococcal ACWY vaccine (2 doses); Meningococcal B vaccine (2 doses if needed).

Adapted from the Centers for Disease Control and Prevention, https://vaccinateyourfamily.org/wp-content/uploads/2018/07/milestones-iztracker.pdf

Healthy Steps: 2024 Immunization & Milestone Tracker (0-6 Years Old) Child's Name

		Birth	1 Month	2 Months	4 Months	6 Months	7-8 Months
-	Hepatitis B	О НерВ				О НерВ	
	Rotavirus			ORV	ORV	ORV	
uniz	Diphtheria, Tetanus, and Pertussis			O DTaP	O DTaP	DTaP	
zatio	Haemophilus influenzae type B			О нів	Онів	Онів	
Ĩ,	Pneumococcal			OPCV	OPCV	OPCV	
	Inactivated Poliovirus						
	Influenza (Flu)					O Influenza, first dos O Second dose	se ²
	COVID-19					COVID-19, 1 or mo	re updated doses ³
	Respiratory Syncytial Virus (RSV)	ORSV4, (Infants yo and Janua	unger than 8 months du ry)	ring their first RSV sea	son between September	, ,	
Milestones'	Milestones should be reached by the indicated age. If your child was born prematurely, discuss age- appropriate milestones with your child's doctor.	ORecognize caregiver's voice OTurns head toward breast or bottle OCommunicates through body language, fussing or crying, alert and engaged Startles to loud sounds	O Starts to smile O Raises head when on tummy O Calms down when rocked, cradled, or sung to O Pays attention to faces	 Begins to smile at people Makes sounds other than crying Begins to follow things with eyes Holds head up Opens hands briefly 	O Babbles with expression O Likes to play with people O Reaches for toy with one hand O Brings hands to mouth O Responds to affection O Holds head steady, unsupported	 Knows familiar faces Responds to own name Brings things to mouth Rolls over in both directions Strings vowels together when babbling ("ah", "eh", "oh") 	 Move objects from one hand to another or directly to their mouths Beginning to scoot, rock back and forth, or even crawl across the room May start teething
Growth	During each well-child visit, record the date, length, weight, and percentile data to monitor your child's growth and progress.	Weight / Percentile Length / Percentile Head Circumference	Weight / Percentile Length / Percentile Head Circumference	Weight / Percentile Length / Percentile Head Circumference	Weight / Percentile Length / Percentile Head Circumference	Weight / Percentile Length / Percentile Head Circumference	Weight / Percentile Length / Percentile Head Circumference
	Shaded boxes indicate that vaccines can be administered in the displayed age range	Visit Date	Visit Date	Visit Date	Visit Date	Visit Date	Visit Date

Date

VACCINATE

YOUR FAMILY

¹The second dose of HepB may be given either at the 1 month or 2-month visit.

² Two doses given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting a flu vaccine for the first time and for some other children in this age group.

³ The number of doses depends on vaccination status and brand of vaccine. For more information, visit <u>https://www.cdc.ppv/vaccines/imz-schedules/index.html</u>

⁴ RSV preventative monoclonal antibody is available for baby if you did not receive the RSV maternal vaccine during pregnancy. The RSV maternal vaccine is given once in a lifetime.

⁵ First dose between 12 through 23 months old and second dose at least 6 months after the first dose. Older children and adolescents 2 through 18 years old who were not previously vaccinated should be vaccinated * Milestones adapted from Caring for your baby and young child: Birth to age 5, Fifth Edition, edited by Steven Shelov and Tanya Remer Altmann © 1991, 1993, 1998, 2004, 2009 by the American Academy of Pediatrics and Bright. Futures: Guidelines for health supervision of infants, children, and adolescents, Third Edition, edited by Joseph Hagan, Jr., Judith S. Shaw, and Paula M. Duncan, 2008, Elk Grove Village, IL: American Academy of Pediatrics. This is not a comprehensive list of milestones from 0-6 years. To see all developmental milestones, visit <u>www.cdc.gov/milestones</u>.



Adapted from the Centers for Disease Control and Prevention, https://vaccinateyourfamily.org/wp-content/uploads/2018/07/milestones-iztracker.pdf

Healthy Steps: 2024 Immunization & Milestone Tracker (0-6 Years Old) Child's Name

fonths B (Final dose B (Final dose enza, first do nd dose (if nee t cella epA ⁵ ID-19, 1 or ma (8-19 months en mom or	15 Months administered between 6 O DTaP ose ² eded) ore updated doses ³ for high-risk infants during t	18 Months and 18 months)	19-23 Months	2-3 Years	4-6 Years DTaP DTaP IPV Age4 Age5 Age6 Second dose (if needed) Varicella
B (Final dose enza, first do nd dose (if nee t cella epA ⁵ ID-19, 1 or mo (8-19 months en mom or	administered between 6 O DTaP Ose ² eded) ore updated doses ³ for high-risk infants during t	and 18 months)		Age 2 Age 3 Pirst dose ² Second dose (if neede	DTaP DTaP DTaP DTaP DIPV Age 4 Age 5 Age 6 Second dose (if needed) MMR Varicella
enza, first do nd dose (if neo t cella epA ⁵ ID-19, 1 or mo (8-19 months en mom or	O DTaP	their second RSV season)		Age 2 Age 3 O First dose ² O Second dose (if neede	DTaP DTaP DTaP DTaP DTaP Definition of the second dose Compared to the second dosecond dosecond dosecond dosecond dose Compar
enza, first do nd dose (if neo t cella epA ⁵ ID-19, 1 or mo (8-19 months en mom or	ose ² eded) ore updated doses ³ for high-risk infants during t	their second RSV season)		Ase 2 Aue 3 First dose ² Second dose (if neede	Age 4 Age 5 Age 6 Age 4 Age 5 Age 6 First dose ² Second dose (if needed) O MMR O Varicella
enza, first do nd dose (if neo t cella epA ⁵ ID-19, 1 or mi (8-19 months en mom or	ose ² eded) ore updated doses ³ for high-risk infants during t	their second RSV season)		Age 2 Age 3 First dose ² Second dose (if neede	Age# Age 5 Age 6 Age# Age 5 Age 6 First dose ² Second dose (if needed) MMR Varicella
enza, first do nd dose (if neo t cella epA ⁵ ID-19, 1 or mi (8-19 months en mom or	ose ² eded) ore updated doses ³ for high-risk infants during t	their second RSV season)		Age2 Age3 First dose ² Second dose (if neede	O IPV Age 4 Age 5 Age 6 O Pirst dose ² Second dose (if needed) MMR Varicella
enza, first do nd dose (if neo t cella epA ⁵ ID-19, 1 or mi (8-19 months en mom or	ose ² eded) ore updated doses ³ for high-risk infants during t	their second RSV season)		Age 2 Age 3 Pirst dose ² Second dose (if neede	Age 4 Age 5 Age 6 First dose ² Second dose (if needed) Varicella
t epA ⁵ ID-19, 1 or m (8-19 months en mom or	for high-risk infants during t	their second RSV season)			O MMR Varicella
cella epA ⁵ ID-19, 1 or m (8-19 months en mom or	for high-risk infants during t	their second RSV season)			○ Varicella
epA ⁵ ID-19, 1 or m (8-19 months en mom or	for high-risk infants during t	their second RSV season)			
ID-19, 1 or m (8-19 months en mom or	ore updated doses ³ for high-risk infants during t	their second RSV season)			
(8-19 months	for high-risk infants during t	their second RSV season)			
en mom or	O Imitates what you're	2223-222 SE WAL			
es ama" and estures (for , waves "bye nd alone right picture when named	 doing O Drinks from a cup O Draws or scribbles on their own O Walks on their own O Starts saying a few words 	O Points to show things O Says several single words O Points to one body part O May walk up steps and run	 Plays mostly besides other kids Follow two-step commands Throws ball overhand Plays make-believe games 	 Can name most familiar things Shows affection for friends and family Turns book pages one-by-one Kicks a ball 	 Speaks clearly Tells stories Can write some numbers or letters Hops and may be able to skip Enjoys playing with other kids
Percentile Percentile umference	Weight / Percentile Length / Percentile Head Circumference	Weight / Percentile Length / Percentile Head Circumference	Weight / Percentile Length / Percentile Head Circumference	Weight	Weight Height
	stures (for waves "bye dalone ight picture /hen named Percentile ercentile umference	Iter own Iter own Iter	stures (for waves "bye their own O Walks on their own O Starts saying a few words part O May walk up steps and run alone ight picture then named Weight / Percentile Weight / Percentile Percentile Weight / Percentile Weight / Percentile ercentile Length / Percentile Length / Percentile umference Head Circumference Head Circumference	stures (for waves "bye their own O Walks on their own O Starts saying a few words part O May walk up steps and run O Throws ball overhand. Plays make-believe games Percentile Weight / Percentile Weight / Percentile Weight / Percentile Percentile Weight / Percentile Weight / Percentile Weight / Percentile Imference Head Circumference Head Circumference Head Circumference Date Visit Date Visit Date Visit Date	stures (for waves "bye their own O Walks on their own O Starts saying a few words part O May walk up steps and run O Throws ball overhand O Plays make-believe games O Turns book pages one- by-one O Kicks a ball Percentile Weight / Percentile Percentile Length / Percentile Length / Percentile Length / Percentile Weight Height Imference Head Circumference Head Circumference Head Circumference Visit Date Visit Date Visit Date

²See first page ³See first page ⁴See first page ⁵See first page *See first page

This is not a comprehensive list of milestones from 0-6 years. To see all developmental milestones, visit www.cdc.gov/milestones.

If your child has any medical conditions that put him at risk for infections or is traveling outside the United States, talk to your child's doctor about additional vaccines that they may need.

VACCINATE

YOUR FAMILY

RESPIRATORY ILLNESSES IMPACT KIDS, TOO!





Over 234,000 children under 18 have been hospitalized due to COVID-19 since September 2020¹



RSV leads to around 2.1 million outpatient visits in children under five yearly²





199 influenza-associated pediatric deaths have been reported during the 2023-2024 flu season³

While many children who become ill from a respiratory illness have mild symptoms or no symptoms at all, children can – and some do – get severely ill.

In rare cases, they might die.

VACCINES OFFER THE BEST PROTECTION AGAINST RESPIRATORY IIINESSES

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.



INFANT IMMUNIZATION FAQS*

It's perfectly normal to have questions about your child's vaccines. Find answers to common concerns here, including information on vaccine safety, the recommended schedule, and how vaccines protect your child from 16 diseases by age two.

Q: ARE VACCINES SAFE?

A: Yes, vaccines are very safe. The United States has a well-established vaccine safety system that ensures vaccines are as safe as possible. Today, the country has the safest vaccine supply in its history. Each year, millions of children safely receive vaccines. The most common side effects are generally mild, such as pain or swelling at the injection site.

Q: WHAT ARE THE SIDE EFFECTS OF VACCINES? HOW DO I TREAT THEM?

A: Like any medication, vaccines may cause some side effects. Most of these are **minor and temporary, such as soreness at the injection site, fussiness, or a low-grade fever**, and typically resolve within a couple of days. You can treat these symptoms by applying a cool, wet washcloth to the sore area to alleviate discomfort. Serious reactions are extremely rare. If your child experiences any reactions that concern you, contact your healthcare provider.

WHAT ARE THE RISKS AND BENEFITS OF VACCINES?

A: Vaccines protect against infectious diseases that once caused severe harm to infants, children, and adults. Without vaccines, your child is at risk of serious illness, disability, or even death from diseases like measles and whooping cough. The main risks of vaccination are typically mild side effects, such as redness and swelling at the injection site, which usually resolve in a few days. Serious side effects, like severe allergic reactions, are very rare, and healthcare providers are trained to handle them. **For nearly all children, the benefits of vaccination far outweigh the risks.** Exceptions include children with severe chronic medical conditions, weakened immune systems, or previous severe allergic reactions to vaccines.

Q:

CAN VACCINES OVERLOAD MY BABY'S IMMUNE SYSTEM?

A: Vaccines do not overwhelm the immune system. Every day, a healthy baby's immune system fights off thousands of germs. Vaccines contain antigens, which are small parts of germs that help the body build antibodies to fight diseases. The germs in vaccines are weakened or killed, so they can't cause illness. In mRNA vaccines like the COVID-19 vaccines, messenger RNA (mRNA) instructs your cells to produce a harmless piece of the spike protein found on the virus's surface, triggering an immune response that prepares your body to fight the actual virus. Even when babies get several vaccines in one day, they are exposed to only a tiny fraction of the antigens they encounter daily in their environment. **Vaccines provide your child with the protection they need to fight off serious diseases.**

Q: WHY ARE SO MANY DOSES NEEDED FOR EACH VACCINE?

A: Giving your child every recommended dose of each vaccine ensures they have the best possible protection against diseases. Some vaccines require multiple doses to build strong immunity or to boost immunity over time. Additional doses might be necessary if the first dose didn't provide full protection or to protect against changing germs like the flu. Each dose is crucial because it helps protect your child from infectious diseases that can be especially dangerous for infants and young children.

*Adapted from the Centers for Disease Control and Prevention: www.cdc.gov/vaccines-children/about/

Q: WHY DO VACCINES START SO EARLY?

A: The recommended vaccination schedule protects infants and children by providing immunity early in life, before they are exposed to dangerous diseases. Young children are more vulnerable to these diseases, and the consequences can be severe, even life-threatening. This is why it is crucial to immunize them at a young age.

CAN I DELAY SOME VACCINES OR FOLLOW A NON-STANDARD SCHEDULE?

A: There are no known benefits for children who follow delayed vaccination schedules. Infants and young children who receive vaccines on a spread-out schedule are at greater risk of developing diseases during the delay. Some vaccine-preventable diseases are still common in the United States, and children may be exposed to these diseases while they are unprotected, putting them at risk for serious illness, hospitalization, or even death.

Q: HAVEN'T WE GOTTEN RID OF MOST OF THESE DISEASES IN THIS COUNTRY?

A: Some vaccine-preventable diseases, like pertussis (whooping cough) and chickenpox, remain common in the United States, while others have become rare thanks to vaccines. **However, if we stop vaccinating, the few cases currently in the U.S. could quickly escalate into tens or hundreds of thousands.** Although many serious vaccine-preventable diseases are uncommon in the U.S., they remain common in other parts of the world. Even if your family does not travel abroad, you could still come into contact with international travelers in your community. Children who are not fully vaccinated and are exposed to these diseases can become seriously ill and spread the infection to others.

Q: CAN'T I JUST WAIT UNTIL MY CHILD GOES TO SCHOOL TO CATCH UP ON IMMUNIZATIONS?

A: Before starting school, young children can be exposed to vaccine-preventable diseases from family members, while traveling, in child care, or even at the grocery store. Children under age five are particularly vulnerable because their immune systems are still developing. **Protect your baby now and don't wait until it's too late.**

WHY DOES MY CHILD NEED A CHICKENPOX SHOT? ISN'T IT A MILD DISEASE?

A: Your child needs the chickenpox vaccine because chickenpox can be a serious disease. While many children experience mild symptoms, some can develop infected blisters or even pneumonia. It's impossible to predict how severe your child's case will be. Before the vaccine, chickenpox resulted in about 50 child deaths and 1 in 500 hospitalizations annually.

Q: CAN MY CHILD GET VACCINATED WHILE THEY'RE SICK?

A: Talk with your child's healthcare provider, but children can typically be vaccinated even with a mild illness like a cold, earache, mild fever, or diarrhea. If the doctor approves, your child can still receive their vaccinations.

: WHAT ARE THE INGREDIENTS IN VACCINES AND WHAT DO THEY DO?

A: Vaccines contain ingredients that help your body build immunity. They also include small amounts of other ingredients that ensure the vaccine is safe and effective.

*Adapted from the Centers for Disease Control and Prevention: https://www.cdc.gov/vaccines-children/about/

Q: DON'T INFANTS HAVE NATURAL IMMUNITY, AND ISN'T IT BETTER THAN VACCINE IMMUNITY?

A: Babies get some temporary protection from their mothers during the last few weeks of pregnancy, but only against diseases the mom is already immune to. Breastfeeding can also give babies short-term protection from minor infections like colds. **However, these antibodies don't last long, which leaves babies vulnerable to diseases.**

Natural immunity happens when a child is exposed to a disease and gets infected, and the risks can be much higher. For example, a natural chickenpox infection can lead to pneumonia, while the vaccine might only cause a sore arm for a few days.

DO I HAVE TO VACCINATE MY BABY ON SCHEDULE IF I'M BREASTFEEDING THEM?

A: Yes, even breastfed babies need vaccines at the recommended ages. Babies are born with immune systems that aren't fully developed, so they are at greater risk for infections.

Breast milk provides some protection as your baby's immune system develops. For example, breastfed babies have a lower risk of ear infections, respiratory tract infections, and diarrhea. But breast milk doesn't protect against all diseases. Vaccines are the best way to protect your baby from many illnesses. Your baby needs vaccines for long-term protection. **Follow the CDC's recommended vaccine schedule to make sure your baby gets the protection they need**.

WHAT'S THE RISK OF DELAYING MY BABY'S VACCINES IF I PLAN TO GET THEM ALL EVENTUALLY?

A: Young children have the highest risk of getting very sick from diseases, which can lead to hospitalization or even death. Delaying or spreading out vaccine doses leaves your child unprotected when they need protection the most. For example, diseases like Hib or pneumococcus usually happen in the first 2 years of a baby's life. Some diseases, like Hepatitis B and whooping cough (pertussis), are more dangerous when babies get them at a young age. Following the CDC's recommended vaccine schedule helps protect your child when they are especially vulnerable.

Q: I GOT WHOOPING COUGH, COVID-19, AND FLU VACCINES DURING PREGNANCY. WHY DOES MY BABY NEED THEM TOO?

A: The antibodies you passed to your baby before birth provide some early protection against whooping cough, COVID-19, and flu, but this protection is only temporary. It's important for your baby to get these vaccines on time so they can build their own long-lasting protection against these serious diseases.

IS IT NECESSARY TO USE BOTH THE MATERNAL RSV VACCINE AND PREVENTATIVE MONOCLONAL ANTIBODIES TO PROTECT MY INFANT FROM RESPIRATORY SYNCYTIAL VIRUS?

A: No, most infants don't need both the maternal RSV vaccine and RSV monoclonal antibodies. The CDC advises getting the maternal RSV vaccine between 32 through 36 weeks of pregnancy, typically from September to January, to pass antibodies to the baby. Alternatively, infants can receive a single dose of RSV monoclonal antibody (nirsevimab) before or during their first RSV season. Both methods offer short-term protection by providing antibodies to help safeguard infants during their first RSV season when they are most at risk. High-risk children aged 8-19 months entering their second RSV season may also receive nirsevimab.

*Adapted from the Centers for Disease Control and Prevention: https://www.cdc.gov/vaccines-children/about/

Learn more about vaccines for your baby at vaccinateyourfamily.org.



Flu can pose serious health risks for pregnant people and newborns.

Getting a flu shot during pregnancy is a simple way to help protect yourself and your baby from the flu.

Protect yourself and your baby by getting whooping cough vaccines during the 3rd trimester of <u>every</u> pregnancy!

Pregnant and people postpregnancy are at higher risk of serious COVID-19 illness than those who are not pregnant.

Getting sick with COVID-19 during pregnancy may also put your baby at increased risk of stillbirth and preterm birth.

Boost your baby's defenses by getting the RSV vaccine between 32 through 36 weeks of pregnancy (September to January) or the monoclonal antibodies right after birth! Flu shots are safe for you and your baby during any trimester of your pregnancy.

Whooping cough can be deadly for infants.

Vaccinating during pregnancy gives your baby antibodies that protect them until they can get their own vaccine at 2 months.

For the best protection from COVID-19, pregnant, recently-pregnant & breastfeeding people should get a COVID-19 vaccine ASAP!

Infants under 1 are especially vulnerable to severe RSV.

A maternal RSV vaccine during pregnancy or preventative monoclonal antibodies given to infants protect against respiratory syncytial virus (RSV).

Surround Your Baby with Protection

Ask friends, family, and caregivers who plan to visit your baby to be up-to-date on all of their vaccinations at least two weeks before meeting your newborn.

Learn more about vaccines during pregnancy at vaccinateyourfamily.org.

RSV in Infants and Young Children

Respiratory syncytial virus, or RSV, is a common virus that affects the lungs. RSV season starts in the fall and peaks in the winter in most regions of the U.S.

Protect your young child from RSV.

There are two options to protect babies from severe RSV. Most babies only need one, not both.

RSV vaccine given during pregnancy:

- Protection passed to baby during pregnancy
- Recommended when 32-36 weeks pregnant
- Usually given during September-January

RSV antibody given to the baby:

- Directly provides protection to baby
- Recommended for babies younger than 8 months
- Usually given during October-March

A dose of RSV antibody is also recommended for the following children between the ages of 8 and 19 months entering their second RSV season:

- Children who have chronic lung disease from being born prematurely
- Children who are severely immunocompromised
- Children with cystic fibrosis who have severe disease
- American Indian and Alaska Native children

Talk to your healthcare provider to determine which option is best for you and your baby.



RSV is the LEADING CAUSE of infant hospitalization in the U.S.



www.cdc.gov/rsv

VACCINATE YOUR FAMILY

Keeping Track of Your Child's Vaccines: Q & A for Parents

What are Immunization Information Systems?

Immunization Information Systems (IIS), also known as immunization registries, are electronic systems that have information on the vaccines that were given to your child. Each state has its own IIS. **There is NO cost for having records in IIS.**

What are the benefits of having my child's vaccine record saved in an IIS?

- Helps your child's doctors and/or other vaccine providers keep track of the immunizations due for your child.
- Helps your doctor send you vaccine reminders for your child.
- Helps to make sure that your child doesn't miss any shots OR get too many shots.
- Allows you to quickly get a copy of your child's immunization record from the doctor.
- Makes sure your child has all of the vaccines needed to start daycare, school and/or camp, and for international travel.

What information is in my state's IIS?

The vaccine records in each state's IIS is kept confidential, and only authorized users are able to access the information. The exact information stored in the IIS depends on which state (or city) you live in, but most contain:

- Patient's name (first, middle, and last)
- Patient's birth state/country
- Types of immunizations given

- Patient's birth date
- Mother's name
- Dates the immunizations were given

- Patient's gender
- Who do I contact to see if my child's immunization record is in my state's IIS or if I want a copy of my child's immunization record?
- Contact your doctor's office or other vaccine provider to ask if your child's immunization record is in the IIS and request a copy.
- Contact the IIS in your state or in the state where your child got their last immunizations to see if they have records in the IIS. To find contact information for your state's IIS, visit https://www.cdc.gov/iis/contacts-locate-records/.
 A few states allow the public to directly access the IIS in order to print out their child's vaccine records.

HOW TO PAY FOR VACCINES

No one should skip vaccines because of their **cost**.





Use <u>Vaccinate Your Family's</u> <u>online tool</u> to help you find out how to pay for your family's vaccines.

Enter the person's health insurance status: private insurance, public insurance, or no insurance

4	0	0		Q	Espa	iñol	Shot of	fPrevent	ion Blog		DC	DNAT	re			_
				11			6		-				,			
F.	10	W		VII		ay		r M	y F	a	m	III	/S			
V	a		II	at	101	15 :										
	En Es	pañ	ol													
-	_	-		_						_	_	_	_	_	-	
D	ean	ant	• •	oma	o with	No	Health	Insu	ance	(1)r	nins	ure	d)	-		
Pr	egn	iant	w	oma	n with	n No	Health	Insur	ance ((Ur	nins	ure	d)			
Pre	egn egnan egnan	t wor	men prot	oma are rec act bot	n with ommence h mom a	n No led to: ind bal	Health get a Tdap by from se	Insur vaccine rrious illr	ance (and a flu	(Ur sha	nins ət dur	ing er	d) very			
Pre Pre pro	egn egnan egnan	t wor cy to e pre	men prot	oma are rec act bot at and a	n with ommence h mom a don't have	ind bal	Health get a Tdap by from se Ith insuran	vaccine rrious illr	ance (and a flu ness. should fi	(Ur sho	nins ot dur out if	ing er	d) very are el	ligible	-	
Pre pro	egn egnan egnan egnan	t wor cy to e pre	men prot	oma are rec act bot	n with ommeno h mom a ion't hav	ed to: and bal	Health get a Tdap by from se Ith insurar	vaccine vaccine rrious illr nce, you	ance (and a flu ness. should fi	(Ur sho	nins ot dur out if	ing er	d) very are el	ligible	-	
Pre pro	egn egnan egnan	t wor cy to e pre	t W prot	oma are rec ect bot	n with ommence h mom a Son't hav	ind bal	Health get a Tdap by from se Ith insurar	vaccine rrious illr nce, you	rance (and a flu ness. should fi	(Ur i sho	nins ot dur out if	ing er	d) very are el	ligible	-	
Pre pro	egnan egnan egnan	t wor cy to e pre	t W men prot	oma are rec act bot at and a	n with ommence h mom a son't har	n No led to; ind bal	Health get a Tdap by from se Ith insura	vaccine rrious illr nce, you	ance (and a flu ness. should fi	(Ur sho	nins ot dur	sure ring en	d) very are el	ligible	-	

Enter the person's age

Check out the Paying for Vaccines Tool and helpful vaccine information on our website at

vaccinateyourfamily.org



Tips for a Less Stressful Shot Visit



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. 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.

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.

Remember to schedule your next visit! Staying current with your child's immunizations provides the best protection against disease.

Take a moment to read the Vaccine Information Sheet your health care professional gives you during your visit. This sheet has helpful information and describes possible side effects your child may experience.







800-CDC-INFO (800-232-4636) · www.cdc.gov/vaccines -



Credible Organizations & Websites for Vaccine Information

Vaccinate Your Family (VYF) vaccinateyourfamily.org **American Academy of Family Physicians (AAFP)** aafp.org & familydoctor.org American Academy of Pediatrics (AAP) aap.org & healthychildren.org **American College of Nurse-Midwives** midwife.org **American College of Obstetricians & Gynecologists (ACOG)** acog.org **American Society for Meningitis Prevention (ASMP)** meningitisprevention.org **Centers for Disease Control and Prevention (CDC)** cdc.gov/vaccines cdc.gov/covid Cervivor cervivor.org **Good Health WINS** goodhealthwins.org **HPV Vaccination Roundtable** hpvroundtable.org

Immunize.org immunize.org & vaccineinformation.ora **Institute for Vaccine Safety at** Johns Hopkins -**Bloomberg School of Public Health** vaccinesafety.edu **March of Dimes** marchofdimes.org **National Foundation for Infectious Diseases (NFID)** nfid.org **Society for Maternal-Fetal Medicine** smfm.org/covid-19 **U.S. Department of Health and Human** Services (HHS) hhs.gov/programs/prevention-andwellness/vaccines-andimmunizations/index.html **Vaccine Education Center at The Children's Hospital of Philadelphia** (CHOP) chop.edu/centers-programs/vaccineeducation-center chop.edu/centers-programs/vaccineeducation-center/vaccinedetails/covid-19-vaccine Voices for Vaccines (VFV) voicesforvaccines.org



Check Out Our Website!

Find vaccine resources for the whole family!



Watch our YouTube series, <u>"Vaccines</u> <u>Explained,"</u> to learn about vaccine safety and how vaccines move throughout the body!



Check out our <u>Child and Teen</u> <u>Vaccine-Preventable Disease eBook</u> for more information on the diseases vaccines can prevent.



Check out our <u>Adult Vaccine-</u> <u>Preventable Disease eBook</u> for more information on the diseases vaccines can prevent.

Visit Today! vaccinateyourfamily.org



References

^{1.} American Academy of Pediatrics. (2024, July 1). AAP Analyzes Pediatric COVID-19 Hospitalizations From 2020-'24. American Academy of Pediatrics. https://publications.aap.org/aapnews/news/29182/AAP-analyzes-pediatric-COVID-19-hospitalizations

^{2.} National Foundation for Infectious Diseases. (2024, January). Respiratory Syncytial Virus (RSV). https://www.nfid.org/infectiousdisease/rsv/

^{3.} Centers for Disease Control and Infection. (n.d.). Influenza-Associated Pediatric Mortality. Gis.cdc.gov. Retrieved September 17, 2024, from https://gis.cdc.gov/GRASP/Fluview/PedFluDeath.html

