



ELEVEN YEARS

Name _____ Date _____

Weight _____ Height _____ Body Mass Index _____

Which vaccines are recommended today?

1.Meningococcal ACWY (2nd dose due on or after 16th birthday)

Meningococcal ACWY vaccine can help protect against meningococcal disease caused by serogroups A, C, W, Y. 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. Of those who survive, 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.

Possible side effects: Redness or soreness where the shot is given. A small percentage of people will experience muscle or joint pains.

2.HPV (2nd dose due 6-12 months after 1st dose)

HPV (Human papillomavirus) is a vaccine that protects against:

- Cervical, vaginal, and vulvar cancers in women
- Penile cancer in men
- Anal cancers in both men and women
- Cancer of the back of the throat
- Genital warts

Possible side effects: Soreness, redness, or swelling where the shot is given. Fever or headache can also happen.

3.Tdap

Tdap vaccine can prevent tetanus, diphtheria, and pertussis.

Tetanus (T) causes painful stiffening of the muscles and can lead to serious health problems including being unable to open the mouth, having trouble swallowing and breathing, or death.

Diphtheria (d) can lead to difficulty breathing, heart failure, paralysis, or death.

Pertussis (aP), also known as “whooping cough,” can cause uncontrollable, violent coughing which makes it hard to breathe, eat, or drink. Pertussis can be extremely dangerous in babies and young children, causing pneumonia, convulsions, brain damage, or death. In teens and adults, it can cause weight loss, loss of bladder control, passing out, and rib fractures from severe coughing.

Possible side effects: pain, redness, or swelling where the shot was given, mild fever, headache, feeling tired, nausea, vomiting, diarrhea, or stomachache

NOTE: People, especially adolescents, sometimes faint after medical procedures including vaccination. Therefore, we recommend that adolescent patients remain seated or lying down for 15 minutes after receiving vaccines. Please tell your provider if you feel dizzy, have vision changes, or ringing in the ears. As with any medicine, there is a very small chance of a vaccine causing a severe allergic reaction.

See back of packet for CDC Vaccine Info Sheets.

Parent packet; updated 11/30/20



ADOLESCENT CONFIDENTIALITY

As our patients enter adolescence, it is important that they start to learn to be independent and take responsibility for their own health. Although parents will still be involved in their child's healthcare, teenagers may have health concerns that they do not want to discuss with their friends or family.

Studies have shown that teenagers do not frequently seek out health advice from providers because they fear their discussion will not remain private. In order to support healthy mental, emotional, and developmental growth of our adolescent patients, the providers at Longwood Pediatrics have a policy to maintain patient confidentiality during adolescent visits, starting around age 13.

To do this, the structure of adolescent visits is different from that of younger patients:

- Each adolescent visit will begin with the parent and teenager in the room together—this gives the parent a chance to ask questions and share important information about their child's health.
- Starting around age 13, after meeting together, the parent will then be asked to leave the room. The time alone with the doctor, or nurse practitioner, gives the teenager a chance to ask questions and discuss issues that are considered private.
- The information discussed by the teenager and doctor, or nurse practitioner, is considered confidential and will not be shared with anyone.
 - If important medical issues arise, we will encourage the teenager to discuss them together with his/her doctor, or nurse practitioner, and parents; however, information will not be discussed without the patient's permission.
 - Providers will only discuss a confidential issue with a parent if it is determined that the teenager poses a threat to him/herself, or others.
- We routinely perform confidential testing on all of our adolescent patients, as recommended by the American Academy of Pediatrics and Centers for Disease Control and Prevention. Parents may see this testing on insurance bills; however, due to adolescent confidentiality laws in Massachusetts, we cannot share the results.
- The teenager may then choose to have a parent, nurse, or just the doctor present during the physical exam.

We greatly value and respect our adolescent patients and their families. In order to provide comprehensive, quality care, we also take questions from our teenagers by phone; to facilitate this, we file the cell phone numbers of our adolescent patients. Please let us know if you have any questions.

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BRIGHT FUTURES HANDOUT ► PARENT

11 THROUGH 14 YEAR VISITS

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

✓ HOW YOUR FAMILY IS DOING

- Encourage your child to be part of family decisions. Give your child the chance to make more of her own decisions as she grows older.
- Encourage your child to think through problems with your support.
- Help your child find activities she is really interested in, besides schoolwork.
- Help your child find and try activities that help others.
- Help your child deal with conflict.
- Help your child figure out nonviolent ways to handle anger or fear.
- If you are worried about your living or food situation, talk with us. Community agencies and programs such as SNAP can also provide information and assistance.

✓ YOUR CHILD'S FEELINGS

- Find ways to spend time with your child.
- If you are concerned that your child is sad, depressed, nervous, irritable, hopeless, or angry, let us know.
- Talk with your child about how his body is changing during puberty.
- If you have questions about your child's sexual development, you can always talk with us.

✓ YOUR GROWING AND CHANGING CHILD

- Help your child get to the dentist twice a year.
- Give your child a fluoride supplement if the dentist recommends it.
- Encourage your child to brush her teeth twice a day and floss once a day.
- Praise your child when she does something well, not just when she looks good.
- Support a healthy body weight and help your child be a healthy eater.
 - Provide healthy foods.
 - Eat together as a family.
 - Be a role model.
- Help your child get enough calcium with low-fat or fat-free milk, low-fat yogurt, and cheese.
- Encourage your child to get at least 1 hour of physical activity every day. Make sure she uses helmets and other safety gear.
- Consider making a family media use plan. Make rules for media use and balance your child's time for physical activities and other activities.
- Check in with your child's teacher about grades. Attend back-to-school events, parent-teacher conferences, and other school activities if possible.
- Talk with your child as she takes over responsibility for schoolwork.
- Help your child with organizing time, if she needs it.
- Encourage daily reading.

✓ HEALTHY BEHAVIOR CHOICES

- Help your child find fun, safe things to do.
- Make sure your child knows how you feel about alcohol and drug use.
- Know your child's friends and their parents. Be aware of where your child is and what he is doing at all times.
- Lock your liquor in a cabinet.
- Store prescription medications in a locked cabinet.
- Talk with your child about relationships, sex, and values.
- If you are uncomfortable talking about puberty or sexual pressures with your child, please ask us or others you trust for reliable information that can help.
- Use clear and consistent rules and discipline with your child.
- Be a role model.

Helpful Resource: Family Media Use Plan: www.healthychildren.org/MediaUsePlan

11 THROUGH 14 YEAR VISITS—PARENT



SAFETY

- Make sure everyone always wears a lap and shoulder seat belt in the car.
- Provide a properly fitting helmet and safety gear for biking, skating, in-line skating, skiing, snowmobiling, and horseback riding.
- Use a hat, sun protection clothing, and sunscreen with SPF of 15 or higher on her exposed skin. Limit time outside when the sun is strongest (11:00 am–3:00 pm).
- Don't allow your child to ride ATVs.
- Make sure your child knows how to get help if she feels unsafe.
- If it is necessary to keep a gun in your home, store it unloaded and locked with the ammunition locked separately from the gun.

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

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

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



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

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BRIGHT FUTURES HANDOUT ► PATIENT 11 THROUGH 14 YEAR VISITS

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

✓ HOW YOU ARE DOING

- Enjoy spending time with your family. Look for ways to help out at home.
- Follow your family's rules.
- Try to be responsible for your schoolwork.
- If you need help getting organized, ask your parents or teachers.
- Try to read every day.
- Find activities you are really interested in, such as sports or theater.
- Find activities that help others.
- Figure out ways to deal with stress in ways that work for you.
- Don't smoke, vape, use drugs, or drink alcohol. Talk with us if you are worried about alcohol or drug use in your family.
- Always talk through problems and never use violence.
- If you get angry with someone, try to walk away.

✓ HEALTHY BEHAVIOR CHOICES

- Find fun, safe things to do.
- Talk with your parents about alcohol and drug use.
- Say "No!" to drugs, alcohol, cigarettes and e-cigarettes, and sex. Saying "No!" is OK.
- Don't share your prescription medicines; don't use other people's medicines.
- Choose friends who support your decision not to use tobacco, alcohol, or drugs. Support friends who choose not to use.
- Healthy dating relationships are built on respect, concern, and doing things both of you like to do.
- Talk with your parents about relationships, sex, and values.
- Talk with your parents or another adult you trust about puberty and sexual pressures. Have a plan for how you will handle risky situations.

✓ YOUR GROWING AND CHANGING BODY

- Brush your teeth twice a day and floss once a day.
- Visit the dentist twice a year.
- Wear a mouth guard when playing sports.
- Be a healthy eater. It helps you do well in school and sports.
 - Have vegetables, fruits, lean protein, and whole grains at meals and snacks.
 - Limit fatty, sugary, salty foods that are low in nutrients, such as candy, chips, and ice cream.
 - Eat when you're hungry. Stop when you feel satisfied.
 - Eat with your family often.
 - Eat breakfast.
- Choose water instead of soda or sports drinks.
- Aim for at least 1 hour of physical activity every day.
- Get enough sleep.

✓ YOUR FEELINGS

- Be proud of yourself when you do something good.
- It's OK to have up-and-down moods, but if you feel sad most of the time, let us know so we can help you.
- It's important for you to have accurate information about sexuality, your physical development, and your sexual feelings toward the opposite or same sex. Ask us if you have any questions.

11 THROUGH 14 YEAR VISITS—PATIENT



STAYING SAFE

- Always wear your lap and shoulder seat belt.
- Wear protective gear, including helmets, for playing sports, biking, skating, skiing, and skateboarding.
- Always wear a life jacket when you do water sports.
- Always use sunscreen and a hat when you're outside. Try not to be outside for too long between 11:00 am and 3:00 pm, when it's easy to get a sunburn.
- Don't ride ATVs.
- Don't ride in a car with someone who has used alcohol or drugs. Call your parents or another trusted adult if you are feeling unsafe.
- Fighting and carrying weapons can be dangerous. Talk with your parents, teachers, or doctor about how to avoid these situations.

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

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

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Technology and Youth: Protecting your Child from Electronic Aggression

Tip Sheet

Technology and youth seem destined for each other. They are both young, fast paced, and ever changing. In the last 20 years there has been an explosion in new technology. This new technology has been eagerly embraced by young people and has led to expanding knowledge, social networks, and vocabulary that includes instant messaging (“IMing”), blogging, and text messaging.

Electronic Aggression is any type of harassment or bullying that occurs through e-mail, a chat room, instant messaging, a website (including blogs), or text messaging.

New technology has many potential benefits for youth. With the help of new technology, young people can interact with others across the United States and throughout the world on a regular basis. Social networking sites like Facebook and MySpace also allow youth to develop new relationships with others, some of whom they have never even met in person. New technology also provides opportunities to make rewarding social connections for those youth who have difficulty developing friendships in traditional social settings or because of limited contact with same-aged peers. In addition, regular Internet access allows teens and pre-teens to quickly increase their knowledge on a wide variety of topics.

However, the recent explosion in technology does not come without possible risks. Youth can use electronic media to embarrass, harass, or threaten their peers. Increasing numbers of adolescents are becoming victims of this new form of violence—electronic aggression. Research suggests that 9% to 35% of young people report being victims of this type of violence. Like traditional forms of youth violence, electronic aggression is associated with emotional distress and conduct problems at school.

Examples of Electronic Aggression

- Disclosing someone else’s personal information in a public area (e.g., website) in order to cause embarrassment.
- Posting rumors or lies about someone in a public area (e.g., discussion board).
- Distributing embarrassing pictures of someone by posting them in a public area (e.g., website) or sending them via e-mail.
- Assuming another person’s electronic identity to post or send messages about others with the intent of causing the other person harm.
- Sending mean, embarrassing, or threatening text messages, instant messages, or e-mails.



Tips for Parents and Caregivers

Talk to your child.

Parents and caregivers often ask children where they are going and who they are going with when they leave the house. You should ask these same questions when your child goes on the Internet. Because children are reluctant to disclose victimization for fear of having their Internet and cellular phone privileges revoked; develop solutions to prevent or address victimization that do not punish the child.

Develop rules.

Together with your child, develop rules about acceptable and safe behaviors for all electronic media. Make plans for what they should do if they become a victim of electronic aggression or know someone who is being victimized. The rules should focus on ways to maximize the benefits of technology and decrease its risks.

Explore the Internet.

Visit the websites your child frequents, and assess the pros and cons. Remember, most websites and on-line activities are beneficial. They help young people learn new information, interact with others, and connect with people who have similar interests.



Talk with other parents and caregivers.

Talk to other parents and caregivers about how they have discussed technology use with their children. Ask about the rules they have developed and how they stay informed about their child's technology use.

Connect with the school.

Parents and caregivers are encouraged to work with their child's school and school district to develop a class for parents and caregivers that educates them about school policies on electronic aggression, recent incidents in the community involving electronic aggression, and resources available to parents and caregivers who have concerns. Work with the school and other partners to develop a collaborative approach to preventing electronic aggression.

Educate yourself.

Stay informed about the new devices and websites your child is using. Technology changes rapidly, and many developers offer information to keep people aware of advances. Continually talk with your child about "where they are going" and explore the technology yourself.

Technology is not going away, and forbidding young people to access electronic media may not be a good long-term solution. Together, parents and children can come up with ways to maximize the benefits of technology and decrease its risks.

For more information, please contact:

Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion • Division of Adolescent and School Health
National Center for Injury Prevention and Control • Division of Violence Prevention
• Adolescent Health Goal Team

1-800-CDC-INFO • www.cdc.gov • cdcinfo@cdc.gov

HPV (Human Papillomavirus) Vaccine: *What You Need to Know*

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

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

1 Why get vaccinated?

HPV (Human papillomavirus) vaccine can prevent infection with some types of human papillomavirus.

HPV infections can cause certain types of cancers including:

- cervical, vaginal and vulvar cancers in women,
- penile cancer in men, and
- anal cancers in both men and women.

HPV vaccine prevents infection from the HPV types that cause over 90% of these cancers.

HPV is spread through intimate skin-to-skin or sexual contact. HPV infections are so common that nearly all men and women will get at least one type of HPV at some time in their lives.

Most HPV infections go away by themselves within 2 years. But sometimes HPV infections will last longer and can cause cancers later in life.

2 HPV vaccine

HPV vaccine is routinely recommended for adolescents at 11 or 12 years of age to ensure they are protected before they are exposed to the virus. HPV vaccine may be given beginning at age 9 years, and as late as age 45 years.

Most people older than 26 years will not benefit from HPV vaccination. Talk with your health care provider if you want more information.

Most children who get the first dose before 15 years of age need 2 doses of HPV vaccine. Anyone who gets the first dose on or after 15 years of age, and younger people with certain immunocompromising conditions, need 3 doses. Your health care provider can give you more information.

HPV 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 HPV vaccine**, or has any **severe, life-threatening allergies**.
- Is **pregnant**.

In some cases, your health care provider may decide to postpone HPV 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 HPV vaccine.

Your health care provider can give you more information.

4 Risks of a vaccine reaction

- Soreness, redness, or swelling where the shot is given can happen after HPV vaccine.
- Fever or headache can happen after HPV 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 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



Meningococcal ACWY Vaccine:

What You Need to Know

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

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

1 Why get vaccinated?

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 Ultomiris®)
- 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.

4 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.

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)
**Meningococcal ACWY
Vaccines**



Office use only

8/15/2019 | 42 U.S.C. § 300aa-26

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

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

1 Why get vaccinated?

Tdap vaccine can prevent **tetanus, diphtheria, and pertussis**.

Diphtheria and pertussis spread from person to person. Tetanus enters the body through cuts or wounds.

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

2 Tdap vaccine

Tdap is only for children 7 years and older, adolescents, and adults.

Adolescents should receive a single dose of Tdap, preferably at age 11 or 12 years.

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.

Adults who have never received Tdap should get a dose of Tdap.

Also, **adults should receive a booster dose every 10 years**, or earlier in the case of a severe and dirty wound or burn. Booster doses can be either Tdap or Td (a different vaccine that protects against tetanus and diphtheria but not pertussis).

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

In some cases, your health care provider may decide to postpone Tdap 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 Tdap vaccine.

Your health care provider can give you more information.



4 Risks of a vaccine reaction

- Pain, redness, or swelling where the shot was given, mild fever, headache, feeling tired, and nausea, vomiting, diarrhea, or stomachache sometimes happen after Tdap 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.

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



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