



Twelve-Month Visit

Happy Birthday! Your child is 1 year old – what an exciting milestone! The following are some tips to help you through early toddlerhood.

Feeding and Nutrition

- Get ready! Most 1-year olds love being in control and they will eat what they want, when they want and how much they want. **Do not make eating a battle.** Children this age are very good at knowing when they are hungry and when they are full; it is your job to offer healthy, safe choices and let them do the rest.
- **HOW MUCH?** At one year, most children are eating 3 meals and 2-3 planned healthy snacks a day. If you haven't already, pull the high chair to the table so your child can take part in family meals.
- **WHICH FOODS?** At this age, your child should be able to eat almost all the foods that you eat. Cut food into bite-sized pieces and avoid food that may be a choking risk such as peanuts, popcorn, hot dogs, whole grapes, raisins, chunks of peanut butter (spread thinly on a cracker or bread is OK) or hard foods that can be bitten off such as carrots, celery or raw apple. Always supervise your child while eating and consider taking an infant CPR class if you haven't already (see website section).



- **FINGER FEEDING:** Your child will want to use his fingers to squish, mash and feel his food – let him. Cover the floor and try not to worry about the mess!
- **MILK/DRINKS:** In general, offer foods before drinks at mealtime. A big change at this age is the introduction of whole cow's milk instead of formula. Offer the milk in a cup instead of a bottle and **don't give more than 16-20 ounces of milk a day.** Too much milk in the diet can cause anemia (low red blood cell count) and make a child too full to eat enough solid foods. Discuss with your doctor how much cow's milk to give if you are still breastfeeding. Juice provides no nutritional benefit and should be limited to no more than 4 ounces a day. Offer water in between meals instead.
- **BYE-BYE BOTTLES!** Twelve months is a good time to stop offering the bottle (now should be much easier than if you wait longer when your child will be more attached to it emotionally). We know that children who use bottles after 12 months have a higher rate of cavities, ear infections, anemia and speech delay.

Oral Health Tips

- Brush your toddler's teeth twice a day using water on a soft baby toothbrush or wipe teeth with a washcloth. Let her brush first then you do it again. Make it fun.
- To prevent tooth decay, never let your baby fall asleep with a bottle. You should brush your baby's teeth **AFTER** the last food/drink of the night.
- Discuss with your doctor if your baby needs extra fluoride and when to see a dentist.



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Safety Tips

1. The American Academy of Pediatrics now advises keeping children in a rear-facing seat until age 2, or until they reach the highest weight AND height allowed by the maker of their seat. This is the safest position in the event of an accident.
2. Limit direct sun exposure. Use a large hat and sunscreen SPF 45 or higher.
3. NEVER leave your child out of your sight - even for a second - near water, tubs (no matter how shallow), buckets, pools, dogs, lawnmowers, driveways and streets.
4. **Childproof your home:**
 - ✓ Keep medicines, cleaning supplies, small or sharp objects, plastic bags and wrappers, balloons and small batteries out of your baby's reach. Inspect toys for loose small parts.
 - ✓ Use safety gates, cabinet locks and socket plugs. Install guards on all windows above the 1st floor.
 - ✓ Tie window blind cords and drapes up and out of reach.
 - ✓ Secure TVs and bookcases to the wall and place guards on sharp edged furniture.
 - ✓ Install smoke and carbon monoxide detectors and change batteries every year.
 - ✓ Keep guns locked away and ammunition in a different place.

continued >

Twelve-Month Visit continued...



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Sleeping

- At this age, your child should sleep through the night (9-12 hours) and take 1-2 naps for an average of 11-14 hours of total sleep per day.
- Your child's crib mattress should be at the lowest setting to prevent falls.
- Bedtime routines should be consistent and enjoyable. Allow your child to take a comfort item/small blanket (not the bottle!) to bed each night.
- Your child may resist going to bed or call out for you in the middle of the night as "separation anxiety" increases. Avoid behavior that will reward her for this (such as bringing her to your bed, feeding her or turning on the light) since this can make it harder to return to the crib.
- Contact your doctor if you have questions about sleep.

Development

- Babies vary greatly in development. At this age, many babies will:
 - 1) Start to understand more of what you are saying, "jabber" and have a few meaningful words (usually mama, dada and at least one other).
 - 2) Pull to stand, "cruise" (move around furniture standing up, holding on) and may take a few steps.
 - 3) Wave "bye-bye", play pat-a-cake or peek-a-boo.
 - 4) Point to objects to get another person's attention and look for dropped or hidden objects.
- Try these tips to help with development:
 - 1) Read with your toddler every day (no TV!) and encourage her to use words, sounds and gestures to communicate even if you think you know what she wants.
 - 2) Join your child in play and offer toys that represent objects in her world such as a toy phone or play kitchen with pretend food.
 - 3) Create low, safe places where your child can crawl, cruise or stand.
 - 4) Talk to your doctor if you have any concerns about your baby's development.

Immunizations (*vaccine schedule may vary slightly by practice)



Today or at 15 months:

- MMR (measles, mumps and rubella)
- Varicella (chicken pox)
- Hepatitis A
- DTaP
- HIB
- Pneumococcal

-Your child will have a blood test to screen for lead poisoning and anemia (low blood count) if not already done at 9 months. He may also be screened for Tuberculosis.

-The influenza vaccine is recommended during flu season.

Early Discipline

- At this age, you can still often change what your child is doing by distraction or offering something else like a favorite toy. Spanking or hitting is not advised and won't help.
- Be firm and consistent.
- Temper tantrums start around this age – ignore them and don't give in!
- Save "NO!" for when your child is going to get hurt or hurt others. Instead you might say "that is not ok."

Websites

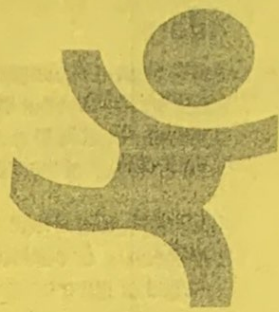
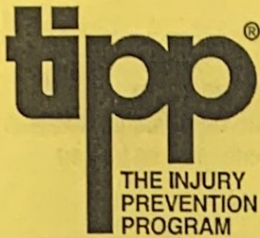
- AAP Healthy Children | <http://www.healthychildren.org> (Health topics and news updates from the American Academy of Pediatrics)
- AAP Immunization Info | <http://www.aap.org/immunization> (Research-based information about childhood vaccines)
- One Tough Job | <http://www.onetoughjob.org> (Information on development and a variety of parenting topics created by the MA Children's Trust Fund)
- CPR | http://www.bostoncentral.com/healthcare/cpr_safety.php (lists Boston area infant CPR and safety classes)

Important Numbers

- Poison Control
1-800-222-1222
- Parental Stress Line
1-800-632-8188
- HAVEN Domestic Violence Help Line
1-617-724-0054
- Smoking Quit Line (free):
1-800-TRY TO STOP
- Your doctor's office

Your child's next routine visit is recommended at 15 months old.

1 to 2 Years



1 TO 2 YEARS

Safety for Your Child

Did you know that injuries are the leading cause of death of children younger than 4 years in the United States? Most of these injuries can be prevented.

Often, injuries happen because parents are not aware of what their children can do. At this age your child can *walk, run, climb, jump*, and *explore* everything. Because of all the new things he or she can do, this stage is a very dangerous time in your child's life. It is your responsibility to protect your child from injury. Your child cannot understand danger or remember "no" while exploring.

Firearm Hazards

Children in homes where guns are present are in more danger of being shot by themselves, their friends, or family members than of being injured by an intruder. It is best to keep all guns out of the home. **Handguns are especially dangerous.** If you choose to keep a gun, keep it unloaded and in a locked place separate from the ammunition. Ask if the homes where your child visits or is cared for have guns and how they are stored.



Poisonings

Children continue to explore their world by putting everything in their mouths, even if it doesn't taste good. Your child can *open doors and drawers, take things apart*, and *open bottles* easily now, so you must use safety caps on all medicines and toxic household products. **Keep the safety caps on** at all times or find nontoxic substitutes to use. Contact your Poison Center for more information.



Your child is now able to get into and on top of everything. Be sure to keep all household products and medicines completely out of sight and reach. Never store lye drain cleaners in your home. Keep all products in their original containers.

If your child does put something poisonous into his or her mouth, call your Poison Center or doctor immediately. Attach your Poison Center number to your phone. Keep syrup of ipecac on hand. Use it to make your child vomit only if told to do so by the Poison Center or your doctor.

Falls

To prevent serious falls, lock the doors to any dangerous areas. **Use gates on stairways** and **install operable window guards** above the first floor. **Remove sharp-edged furniture** from the room your child plays and sleeps in. At this age your child will walk well and start to climb, jump, and run as well. A chair left next to a kitchen counter, table, or window allows your child to climb to dangerously high places. Remember, your child does not understand what is dangerous.



If your child has a serious fall or does not act normally after a fall, call your doctor.

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Burns

The kitchen is a dangerous place for your child during meal preparation. Hot liquids, grease, and hot foods spilled on your child will cause serious burns. A **safer place for your child** while you are cooking, eating, or unable to give him your full attention is the **playpen, high chair, or crib**. It's best to keep your child out of the kitchen while cooking.

Children who are learning to walk will grab anything to steady themselves, including hot oven doors, wall heaters, or outdoor grills. Keep your child out of rooms where there are hot objects that may be touched or put a barrier around them.

Your child will *reach* for your hot food or cup of coffee, so don't leave them within your child's reach. **NEVER carry your child and hot liquids at the same time.** You can't handle both.

If your child does get burned, immediately put cold water on the burned area. Then cover the burn loosely with a bandage or clean cloth. Call your doctor for all burns. To protect your child from tap water scalds, reduce the maximum temperature of your hot water heater to 120°F.

Test the batteries on your smoke alarm every month to be sure that they work. Change the batteries every year on a date you'll remember, such as daylight savings time.

Drowning

At this age your child loves to play in water. **NEVER leave your child alone in or near a bathtub, pail of water, wading or swimming pool, or any other water, even for a moment.** Empty all buckets after each use. Keep the bathroom doors closed. Your child can drown in less than 2 inches of water. Knowing how to swim does NOT mean your child is safe near or in water. Stay within an arm's length of your child around water.

If you have a swimming pool, fence it on all 4 sides with a fence at least 4 feet high, and be sure the gates are self-latching. Most children drown when they wander out of the house and fall into a pool that is not fenced off from the house. You cannot watch your child every minute while he or she is in the house. It only takes a moment for your child to get out of your house and fall into your pool.

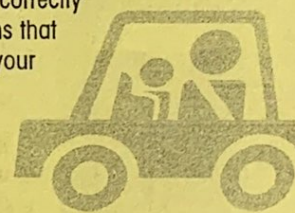
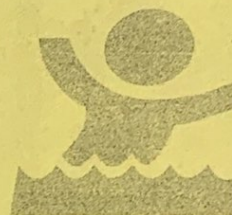
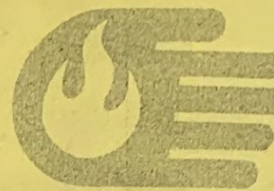
And Remember Car Safety

Car crashes are a great danger to your child's life and health. The crushing forces to your child's brain and body in an accident or sudden stop, even at low speeds, can cause severe injuries or death. **To prevent these injuries USE a car safety seat EVERY TIME** your child rides in the car. Be sure that the safety seat is installed correctly and that your car seat is the right kind for your child's age and weight. Read and follow the instructions that come with the car safety seat and the instructions for using car safety seats in the owners' manual of your car. **The safest place for all infants and children to ride is in the back seat.**

Do not leave your child alone in the car. Keep vehicles and their trunks locked. There are dangers involved with leaving children in a car; death from excess heat may occur very quickly in warm weather in a closed car.

Always walk behind your car to be sure your child is not there before you back out of your driveway. You may not see your child behind your car in the rear view mirror.

Remember, the biggest threat to your child's life and health is an injury.



VACCINE INFORMATION STATEMENT

MMR Vaccine (Measles, Mumps, and Rubella): *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?

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.



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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



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8/15/2019 | 42 U.S.C. § 300aa-26

Varicella (Chickenpox) 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?

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



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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.*

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)
Varicella Vaccine



Office use only

Hepatitis A 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?

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.



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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/

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 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 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

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