

Two Month Visit

Congratulations, your baby is two months old! This is an exciting time as your baby starts to become more interactive.



Feeding and Nutrition

- Babies at this age are still feeding every 2-4 hours. Your baby might sleep in longer stretches (3-5 hrs) at night and feed more during the day.
- Only give your baby breast milk or formula. Do not give your baby other foods (including water) until 4-6 months. Never give your baby honey.
- If your baby is breastfed or getting fewer than 32 ounces of formula a day, give him vitamin D (400 IU) once a day.

- Do not microwave formula or breast milk. Thaw frozen breast milk in the fridge or in a cup of hot water. Use it within 24 hours.
- The Academy of Pediatrics recommends fresh breast milk can be stored:
 - At room temperature (66-72°F/18.8-22.2°C) for 4-6 hours
 - In a the back of the fridge (39°F or lower) for up to 4 days
 - In the back of a freezer that has a separate door from the fridge for up to 9 months

Ise it within 24 hours.

Do

 Secure your baby's car seat in the back seat facing the back window.

Safety Tips

- Keep your home water heater set lower than 120°F/49°C.
- Keep plastic bags, balloons and sharp or small objects and toys away from your baby. If it fits inside a toilet paper roll, your baby can choke on it.
- Have smoke and carbon monoxide detectors on every floor of your home. Change the batteries once a year.

Sleeping

- Put your baby down for sleep when she is still awake, but drowsy. Do not wake her up to feed at night.
- To reduce the risk of Sudden Infant Death Syndrome (SIDS), follow these safety recommendations:
 - Back is best. Always place your baby on his back for sleep in a crib that meets Consumer Products Safety Commission (CPSC) standards. (www.cpsc.gov)
 - Bed sharing is not recommended. There is not enough current research on bedside or in-bed sleepers to know if they are safe.
 - The mattress should be firm (doesn't bend when the baby is lying on it). Never place your baby on a couch for sleep.
 - Keep the crib as empty as possible. Do not use crib bumper pads, blankets, pillows or soft toys in the crib.
 - Swaddling is fine at this age. Make sure knees can bend and that the blanket is not too tight over the chest. Stop swaddling when your baby looks like she is trying to roll over. Wearable blankets are fine to use.
 - Offer your baby a pacifier. It is okay if she will not take it.

Do Not

- Do not leave your baby alone in bathwater, in the car, on the bed, on the couch or on the changing table. Leaving him alone for even a few seconds can be dangerous.
- Do not drink hot liquids around your baby.
- Do not let anyone smoke around your baby. Keep your home and car smoke-free.

Sun Safety

- Protect your baby from the sun. Avoid direct sun exposure from 10am-4pm when the sun is strongest.
- Dress your baby in light, long-sleeved clothing and a brimmed hat.
- Sunscreen is okay for babies at this age. Test it first on a small patch of skin.

Pooping

 Your baby may start pooping less at this age. Going several days without pooping is normal as long as the poop is soft when it comes out.

Two Month Visit continued...

MassGeneral Hospital for Children

Development

- Every baby develops differently. At this age, your baby might:
 - Coo and smile in response to your voice or touch
 - Begin to follow an object moved in front of him past the middle of his face
 - o Hold his head up and lift his upper chest when lying on his belly



- Talk and sing aloud to your baby. Take turns allowing him to 'talk back' responsively. Start reading books to your baby. Screen time (TV, videos, phones) is not recommended for children under 18 months.
- Hang or hold different objects in front of him to bat and reach for. Give him small safe objects to hold (rattles, squeak toys, etc).
- Practice tummy time on a firm surface several times a day. Talk and make eye contact with your baby.



(vaccine schedule may vary slightly by practice)

Today: 3 shots and 1 oral vaccine

- -DtaP / Polio / Hepatitis B (often combined)
- -Pneumoccocal
- -HIB
- -Rotavirus (oral)

Next Visit (at 4 months old):

- Vaccines the same as 2-month visit

Fever and fussiness are a common reaction to vaccines. Discuss with your doctor acetaminophen (Tylenol®) dosing with your doctor.

Other Helpful Hints

- Use a rectal thermometer if your baby looks sick or feels warm. Call your doctor if your baby has a rectal temperature of 100.4°F/38°C or higher. Only use acetaminophen (Tylenol®) if your doctors tell you to. Ibuprofen (Motrin®) is not safe until 6 months.
- Babies often get colds at this age. There are no cold medications for stuffy nose that are safe for babies. Rinse your baby's nose with saline (sodium chloride [0.9%]) drops.
- Washing your hands with soap and water is the most effective thing you can do to prevent the spread of colds and other infections.

Websites

- AAP Healthy Children | http://www.healthychildren.org (Health topics and news updates from the American Academy of Pediatrics)
- AAP Immunization Info | www.aap.org/immunization (Research-based information about childhood vaccines)
- Talk, Read and Play | www.talkreadplay.org
 (Advice to support families with children ages birth to 5.)

Your child's next routine visit is recommended at 4 months-old.

Important Numbers

- Poison Control (MA)
 1-800-682-9211
- Parental Stress Line
 1-800-632-8188
- Mass General Domestic Violence Help Line (24 hours) 1-617-724-0054
- Smoking Quit Line (free):
 1-800-TRY TO STOP
- · Your Doctor's Office

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VACCINE INFORMATION STATEMENT

Your Child's First Vaccines

What You Need to Know

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

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

The vaccines covered on this statement are those most likely to be given during the same visits during infancy and early childhood. Other vaccines (including measles, mumps, and rubella; varicella; rotavirus; influenza; and hepatitis A) are also routinely recommended during the first five years of life.

Your child wi	ll get these vac	ccines today:			
☐ DTaP	☐ Hib	☐ Hepatitis B	☐ Polio	☐ PCV13	
(Provider: Check	appropriate boxes	:.)			

1 Why get vaccinated?

Vaccine-preventable diseases are much less common than they used to be, thanks to vaccination. But they have not gone away. Outbreaks of some of these diseases still occur across the United States. When fewer babies get vaccinated, more babies get sick.

7 childhood diseases that can be prevented by vaccines:

- 1. Diphtheria (the 'D' in DTaP vaccine)
- Signs and symptoms include a thick coating in the back of the throat that can make it hard to breathe.
- Diphtheria can lead to breathing problems, paralysis and heart failure.
 - About 15,000 people died each year in the U.S. from diphtheria before there was a vaccine.
- 2. Tetanus (the 'T' in DTaP vaccine; also known as Lockjaw)
- Signs and symptoms include painful tightening of the muscles, usually all over the body.
- Tetanus can lead to stiffness of the jaw that can make it difficult to open the mouth or swallow.
 - Tetanus kills about 1 person out of every 10 who get it.
- 3. Pertussis (the 'P' in DTaP vaccine, also known as Whooping Cough)
- Signs and symptoms include violent coughing spells that can make it hard for a baby to eat, drink, or breathe. These spells can last for several weeks.
- Pertussis can lead to pneumonia, seizures, brain damage, or death. Pertussis can be very dangerous in infants.
 - Most pertussis deaths are in babies younger than 3 months of age.

4. Hib (Haemophilus influenzae type b)

- Signs and symptoms can include fever, headache, stiff neck, cough, and shortness of breath. There might not be any signs or symptoms in mild cases.
- Hib can lead to meningitis (infection of the brain and spinal cord coverings); pneumonia; infections of the ears, sinuses, blood, joints, bones, and covering of the heart; brain damage; severe swelling of the throat, making it hard to breathe; and deafness.
 - Children younger than 5 years of age are at greatest risk for Hib disease.

5. Hepatitis B

- Signs and symptoms include tiredness, diarrhea and vomiting, jaundice (yellow skin or eyes), and pain in muscles, joints and stomach. But usually there are no signs or symptoms at all.
- Hepatitis B can lead to liver damage, and liver cancer. Some people develop chronic (long term) hepatitis B infection. These people might not look or feel sick, but they can infect others.
 - Hepatitis B can cause liver damage and cancer in 1 child out of 4 who are chronically infected.

6. Polic

- Signs and symptoms can include flu-like illness, or there may be no signs or symptoms at all.
- Polio can lead to permanent paralysis (can't move an arm or leg, or sometimes can't breathe) and death.
 - In the 1950s, polio paralyzed more than 15,000 people every year in the U.S.



7. Pneumococcal Disease

- Signs and symptoms include fever, chills, cough, and chest pain. In infants, symptoms can also include meningitis, seizures, and sometimes rash.
- Pneumococcal disease can lead to meningitis (infection of the brain and spinal cord coverings); infections of the ears, sinuses and blood; pneumonia; deafness; and brain damage.
 - About 1 out of 15 children who get pneumococcal meningitis will die from the infection.

Children usually catch these diseases from other children or adults, who might not even know they are infected. A mother infected with hepatitis B can infect her baby at birth. Tetanus enters the body through a cut or wound; it is not spread from person to person.

Vaccines that protect your baby from these seven diseases:

Vaccine	Number of doses	Recommended ages	Other information	
DTaP (Diphtheria, Tetanus, Pertussis)	5	2 months, 4 months, 6 months, 15-18 months, 4-6 years	Some children get a vaccine called DT (Diphtheria & Tetanus) instead of DTaP.	
Hepatitis B	3	Birth, 1-2 months, 6-18 months	-11 ·	
Polio	4	2 months, 4 months, 6-18 months, 4-6 years	An additional dose of polio vaccine may be recommended for travel to certain countries.	
Hib (Haemophilus influenzae type b)	3 or 4	2 months, 4 months, (6 months), 12-15 months	There are several Hib vaccines. With one of them the 6-month dose is not needed.	
Pneumococcal (PCV13)	4	2 months, 4 months, 6 months, 12-15 months	Older children with certain health conditions also need this vaccine.	

Your healthcare provider might offer some of these vaccines as **combination vaccines** — several vaccines given in the same shot. Combination vaccines are as safe and effective as the individual vaccines, and can mean fewer shots for your baby.

Some children should not get certain vaccines

Most children can safely get all of these vaccines. But there are some exceptions:

- A child who has a mild cold or other illness on the day vaccinations are scheduled may be vaccinated. A child who is moderately or severely ill on the day of vaccinations might be asked to come back for them at a later date.
- Any child who had a life-threatening allergic reaction after getting a vaccine should not get another dose of that vaccine. Tell the person giving the vaccines if your child has ever had a severe reaction after any vaccination.
- A child who has a severe (life-threatening) allergy to a substance should not get a vaccine that contains that substance. Tell the person giving your child the vaccines if your child has any severe allergies that you are aware of.

Talk to your doctor before your child gets:

- **DTaP vaccine**, if your child ever had any of these reactions after a previous dose of DTaP:
- A brain or nervous system disease within 7 days,
- Non-stop crying for 3 hours or more,
- A seizure or collapse,
- A fever of over 105°F.
- PCV13 vaccine, if your child ever had a severe reaction after a dose of DTaP (or other vaccine containing diphtheria toxoid), or after a dose of PCV7, an earlier pneumococcal vaccine.

3 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. Most vaccine reactions are not serious: tenderness, redness, or swelling where the shot was given; or a mild fever. These happen soon after the shot is given and go away within a day or two. They happen with up to about half of vaccinations, depending on the vaccine.

Serious reactions are also possible but are rare.

Polio, Hepatitis B and Hib Vaccines have been associated only with mild reactions.

DTaP and Pneumococcal vaccines have also been associated with other problems:

DTaP Vaccine

- Mild Problems: Fussiness (up to 1 child in 3); tiredness or loss of appetite (up to 1 child in 10); vomiting (up to 1 child in 50); swelling of the entire arm or leg for 1-7 days (up to 1 child in 30)—usually after the 4th or 5th dose.
- Moderate Problems: Seizure (1 child in 14,000); non-stop crying for 3 hours or longer (up to 1 child in 1,000); fever over 105°F (1 child in 16,000).
- Serious problems: Long term seizures, coma, lowered consciousness, and permanent brain damage have been reported following DTaP vaccination. These reports are extremely rare.

Pneumococcal Vaccine

- Mild Problems: Drowsiness or temporary loss of appetite (about 1 child in 2 or 3); fussiness (about 8 children in 10).
- Moderate Problems: Fever over 102.2°F (about 1 child in 20).

After any vaccine:

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/

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What if there is a serious reaction?

What should I look for?

 Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.

Signs of a severe allergic reaction can include hives, swelling of the face and throat, and difficulty breathing. In infants, signs of an allergic reaction might also include fever, sleepiness, and disinterest in eating. In older children signs might include a fast heartbeat, dizziness, and weakness. These would usually start a few minutes to a few hours after the vaccination.

What should I do?

 If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 or get the person to the nearest hospital. Otherwise, call your doctor.

Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor 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.

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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.

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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)
 - Visit CDC's website at www.cdc.gov/vaccines or www.cdc.gov/hepatitis

Vaccine Information Statement Multi Pediatric Vaccines

11/05/2015

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VACCINE INFORMATION STATEMENT

Rotavirus Vaccine: What You Need to Know

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

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1 Why get vaccinated?

Rotavirus vaccine can prevent rotavirus disease.

Rotavirus causes diarrhea, mostly in babies and young children. The diarrhea can be severe, and lead to dehydration. Vomiting and fever are also common in babies with rotavirus.

2 Rotavirus vaccine

Rotavirus vaccine is administered by putting drops in the child's mouth. Babies should get 2 or 3 doses of rotavirus vaccine, depending on the brand of vaccine used.

- The first dose must be administered before 15 weeks of age.
- The last dose must be administered by 8 months of age.

Almost all babies who get rotavirus vaccine will be protected from severe rotavirus diarrhea.

Another virus called porcine circovirus (or parts of it) can be found in rotavirus vaccine. This virus does not infect people, and there is no known safety risk. For more information, see http://wayback.archive-it.org/7993/20170406124518/https:/www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm212140.htm.

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

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 rotavirus vaccine, or has any severe, lifethreatening allergies.
- Has a weakened immune system.

- Has severe combined immunodeficiency (SCID).
- Has had a type of bowel blockage called intussusception.

In some cases, your child's health care provider may decide to postpone rotavirus vaccination to a future visit.

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

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

4 Risks of a vaccine reaction

 Irritability or mild, temporary diarrhea or vomiting can happen after rotavirus vaccine.

Intussusception is a type of bowel blockage that is treated in a hospital and could require surgery. It happens naturally in some infants every year in the United States, and usually there is no known reason for it. There is also a small risk of intussusception from rotavirus vaccination, usually within a week after the first or second vaccine dose. This additional risk is estimated to range from about 1 in 20,000 US infants to 1 in 100,000 US infants who get rotavirus vaccine. Your health care provider can give you more information.

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



What if there is a serious problem?

For intussusception, look for signs of stomach pain along with severe crying. Early on, these episodes could last just a few minutes and come and go several times in an hour. Babies might pull their legs up to their chest. Your baby might also vomit several times or have blood in the stool, or could appear weak or very irritable. These signs would usually happen during the first week after the first or second dose of rotavirus vaccine, but look for them any time after vaccination. If you think your baby has intussusception, contact a health care provider right away. If you can't reach your health care provider, take your baby to a hospital. Tell them when your baby got rotavirus vaccine.

An allergic reaction could occur after the vaccinated person leaves the clinic. If you see signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness), call 9-1-1 and get the person to the nearest hospital.

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

Adverse reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your health care provider will usually file this report, or you can do it yourself. Visit the VAERS website at www.vaers.hhs.gov or call 1-800-822-7967. VAERS is only for reporting reactions, and VAERS staff do not give medical advice.

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Vaccine Information Statement (Interim)
Rotavirus Vaccine

