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## DESCRIPTIONS OF IMMUNIZATIONS

### **Diphtheria, tetanus, and pertussis (DTaP) Vaccine**

Whooping cough is a very dangerous disease, especially for infants. The risk of suffering and death caused by whooping cough is far greater than the possible side effects of the vaccine. A child who has not been immunized against pertussis has a chance of 1 in 3000 of getting whooping cough. In contrast, a child who got the vaccine has a chance of 1 in 2 million of having neurological damage with the vaccine. The risk of children getting pertussis increases if fewer children are immunized.

### **Measles, mumps, and rubella (MMR) vaccine**

Recent outbreaks of measles in high schools and colleges have made it necessary for children to have 2 MMR vaccines. They should have the first shot when they are 12 to 15 months old and the second when they are 4 to 6 years old. These diseases are nearly gone from the U.S. However, they will come back if children are not fully vaccinated. If your child has not received 2 MMR vaccines after the age of 12 months, call the office during office hours.

### **Haemophilus influenzae type b (Hib) vaccine**

Haemophilus influenzae is a type of bacteria that causes several life-threatening diseases in young children (such as meningitis, epiglottitis, and pneumonia). Before the vaccine was available, over 10,000 children in the U.S. developed haemophilus meningitis each year. About 500 of them died and 3800 became mentally retarded, blind, or deaf, or got cerebral palsy as a result of the disease. Because of the vaccine, haemophilus influenzae type B is now uncommon in the U.S. The Hib vaccine does not protect against flu and meningitis caused by viruses.

### **Hepatitis B vaccine (Hep B)**

Vaccination against hepatitis B prevents this type of hepatitis and the severe liver damage that can occur 20 or 30 years after a person is first infected. More than 5000 adults die each year in the U.S. from hepatitis-related liver cancer or cirrhosis. The younger the age when the infection occurs, the greater the risk of serious problems.

If you have an older child who was not vaccinated against hepatitis B as an infant, ask your doctor whether he or she should have the shots. Your child needs a total of 3 hepatitis B shots.

### **Polio vaccine**

The polio vaccine protects children from this now rare but crippling disease. The inactivated polio vaccine (IPV) is now recommended for all polio doses.

### **Chickenpox (Varicella) vaccine**

The chickenpox vaccine is usually given between the ages of 12 and 18 months, but it can be given to older children if they have not had the vaccine or the disease yet. Children age 13 or older should get 2 doses at least 4 weeks apart.

This vaccine is 70% to 90% effective in preventing chickenpox. If vaccinated children get chickenpox, they have a much milder form of the disease. By being vaccinated, you can reduce the chance of missed work and school, skin infections, medical costs, and getting shingles later in life.

### **Pneumococcal (PCV7) vaccine**

Pneumococcal infections are serious bacterial infections that may cause pneumonia, bloodstream infections, and meningitis. The PCV7 vaccine protects against the 7 types of pneumococcal bacteria that cause most of these serious diseases. The vaccine also prevents a small percentage of ear infections caused by pneumococci. Routine use of PCV7 is now recommended for infants and toddlers. Some children (up to age 5) who have a serious illness may benefit from the vaccine.

## Other Vaccines

### Hepatitis A vaccine

The hepatitis A vaccine is recommended for children and adolescents in selected states and regions, and for certain people at high risk. Talk to your health care provider or local public health department for more information.

### Influenza vaccine

Healthy children age 6 to 23 months are encouraged to get the influenza vaccine if possible because they are at a greater risk of getting severely ill or needing to go to the hospital because of the flu. The influenza vaccine is also recommended each year for children ages 6 months and older if they have certain medical risk factors. The vaccine can also be given to anyone wanting immunity. Talk to your health care provider for more information.

### Meningococcal vaccine

Because meningococcal disease is more common in college students, this vaccine should be offered to college freshman before starting school and should also be available at the student health center.

## Reasons Not To Vaccinate

If any of the following conditions apply to your child, talk to your doctor before getting your child vaccinated.

1. **Your child had an allergic reaction to a previous vaccination.**
2. **Your child has seizures or serious neurologic disease.** The pertussis vaccine (DTaP) should not be given if a child has seizures or serious neurologic disease. Your child can still have the tetanus and diphtheria (Td) vaccine without the pertussis vaccine.
3. **Your child has poor immunity.** Children with weak immune systems should not get live virus vaccines (for example, chickenpox, MMR, or OPV). Because live virus vaccines live and divide within the person vaccinated, they can cause the actual disease if the immune system is very weak.
4. **Your child has egg allergies.** Children who have a severe allergy to eggs should not receive the influenza vaccine. However, children who are allergic to eggs can receive all routine immunizations. Although the measles and mumps vaccines are grown in chick cells, the egg proteins are removed from these vaccines and the vaccines can be given without having your child skin-tested for an egg allergy.

## Unwarranted Reasons Not to Vaccinate

Many children in the U.S. have not received all of the recommended immunizations. Unnecessary precautions have led parents to postpone or cancel scheduled immunizations. The following list of conditions that are NOT routine reasons for postponing or canceling immunization. That is, a child can still be immunized even if one or more of the following conditions is true:

- The child had soreness, redness, or swelling at the injection site after a previous DTaP shot.
- The child had a fever of less than 105°F (40.5°C) after a previous DTaP shot.
- The child has a mild illness such as a cold, cough, or diarrhea without a fever.
- The child is recovering from a mild illness such as a cold, cough, or diarrhea.
- The child has recently been exposed to an infectious disease.
- The child is taking antibiotics.
- The child was premature.
- The child's mother is pregnant.
- The child is breast-feeding.
- The child has allergies (unless it is an egg allergy).
- The child's family has a history of convulsions or sudden infant death syndrome (SIDS).