

# Your 2 Month Old



Normal Development –  
what to expect over the next 2 months

## Daily Activities

- Crying gradually becomes less frequent
- Displays more emotions – distress, excitement, happiness
- May begin to sleep through the night
- Smiles, coos – more when talked to
- Quiets down when held or talked to

## Vision and Hearing

- Focuses better - eyes should not move in opposite directions
- Moves head from side to side to look at a person
- Likes brightly colored objects
- Knows the difference between angry and friendly voices

## Motor skills

- Lifts chest for a second when lying on tummy
- Holds head steady when held or seated with support
- Baby finds their own hands and fingers

## Feeding:

- Breast milk or formula gives babies all the nutrition they need for the first 4 months of life.
- Cereal in the bottle is not routinely recommended at this age.
- Parents often wonder if their infant is eating enough. Review the growth chart with your doctor.
- **If your baby is growing and is satisfied after eating, they have had enough.** Follow your baby's cues that they are hungry or full. Your baby may not be on a set schedule at this age.

## Sleeping:

- Some babies may be sleeping a long stretch at night whereas others are still waking every 3-4 hours to eat. Naps during the day can vary greatly in length and number.
- You can help your baby learn good sleep habits by **putting your baby in the crib when drowsy but still awake**. Then when she wakes in the night she is familiar with falling asleep again without your arms around her.
- In the next few months, try allowing him to fuss a bit and get himself back to sleep before jumping out of bed to feed him at the first sound.

## Some Helpful and Trusted Websites:

- [Healthychildren.org](http://Healthychildren.org) (American Academy of Pediatrics)
- [Genesispediatrics.com](http://Genesispediatrics.com) for our Genesis Advice Packet (GAP)
- [vec.chop.edu/service/vaccine-education-center/home.html](http://vec.chop.edu/service/vaccine-education-center/home.html) (Children's Hospital of Philadelphia for vaccine information)

## The Highlights!

- **Place your baby on their back to sleep**
- **Nothing in the crib** – no blankets, stuffed animals, pillows, no soft bumpers
- Continue tummy time every day
- **Stop swaddling** with arms in for sleep
- Breastfeeding every 2-3 hours  
OR formula about 3-6 oz every 3-4 hours
- Vitamin D 400 IU daily until 6 months of age, until 12 months for breastfed babies
- Alternate arms when bottle feeding (to avoid a flat spot on baby's head)
- A fever is no longer an emergency: call if it continues or if not looking well
- Check your GAP (Genesis Advice Packet) regarding 1st steps for fever



Next Visit:  
See you in 2 months  
for the 4 month visit!

## Choosing the Right Child Care

### Step 1: Interview caregivers

Call and ask about:

1. Cost and financial assistance
2. How many children do they care for
3. Number of adult staff
4. Meals and food they provide

Visit and look for:

1. A good relationship between staff and children
2. Happy, active children
3. Clean, safe center/home

Ask them:

1. Are parents allowed to visit their child during the day?
2. How do they discipline young children in their care?
3. How do they handle emergencies and illnesses?

### Step 2: Check references

Talk with other parents who use the center and ask: is the caregiver always reliable? Is their child happy there?

Does the caregiver seem to respect their values and culture?

Would they recommend the caregiver?



#### For Parents:

**Don't smoke!** Smoking around your baby, smoking in the car that they ride in or holding your baby with the smell of smoke on your clothes is not healthy for your baby. This exposes them to toxins and can lead to **breathing problems, increase the risk of SIDS and ear infections.**

#### New York States Smoker's Quitline

Free and Confidential

Tobacco-Free Coaching

Free Nicotine Replacement options

1-866-NY-QUITS (1-866-697-8487)

or [www.nysmokefree.com](http://www.nysmokefree.com)



## Safety First!

### Car Injuries

Make sure that your child is in the correct car seat (see car seat handout). Car seats must be rear facing in the back seat until at least 2 years of age.

Is the car seat installed correctly? To have this checked call your local fire department.

#### Rolling:

Make sure you are always holding onto your baby – don't leave them on a high surface alone!

Fasten your baby in their swing, car seat, and bouncy chairs as babies can wiggle a lot and get out!

**Burns:** Never carry your baby and hot liquids or food at the same time.

### Consider taking an infant CPR class

**Sleeping:** Put your baby on their back to sleep. Never put your baby on a water bed, bean bag, pillow or anything soft enough to cover their face.

**Siblings:** Always watch siblings closely when they are with your new baby. Teach and show them how to be gentle.

#### Bath time safety:

Remember – Don't put your child in the bathtub while the water is running. Check the water with your hand. Move it back and forth in the water to look for hot spots. Then put your child in the tub. Always stay with your child while they are in the water. It only takes seconds for babies to drown or burn themselves. Reduce the hot water temperature in your home to 120F.



# Frequently Asked Questions...

## 1. My baby's head looks flat!

### You may notice:

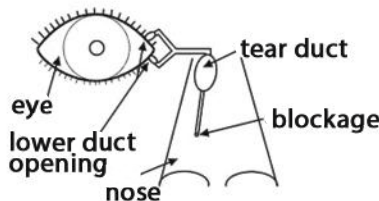
- Baby prefers to look to the same side or head is tilted (ear towards shoulder) most of the time.
- This causes the back or the side of the head to have a flattened spot.

### Prevention:

- **Alternate sides that the head is facing when eating or sleeping.**
- Make sure baby's head is positioned straight when seated.
- Provide tummy time each day when your baby is awake.
- The best success with treatment is quick action.

### When to call:

- If the flattened spot or looking to only one side lasts longer than a few days.



## 2. Why is my baby's eye watering?

**Cause:** Tears are not able to empty through the tear duct in the corner of your baby's eye because the tear duct is blocked. This may cause a small amount of eye discharge that doesn't go away. The blockage usually opens by itself within 9-12 months of age.

**Treatment:** Apply gentle pressure with your clean finger near the inner corner of your baby's eye next to the nose. Do this 5 times per session and about 3 sessions per day.

### When to call:

- If white of the eye is red or swollen
- Lots of thick discharge/pus

### But I have another question!

For non-urgent questions contact us through the patient portal at [genesispediatrics.com](http://genesispediatrics.com)

## 3. What is this weird rash?

**Baby Acne:** Many babies have small red bumps on their face and sometimes on their upper chest and upper back. No treatment is helpful or needed. Use fragrance free soaps and lotions to avoid making it worse. Usually it goes away by 4 months of age.

**Cradle cap:** Greasy crusts on scalp, sometimes on face and ears. Treat with baby oil to soften the crusts and then comb with a soft baby brush. Wash oil off afterwards.

**Diaper rash:** The best cure is prevention! Keep the diaper area as dry as possible by changing diapers often at night and during the day. You can use any zinc oxide or petroleum based diaper ointment to protect the skin with each diaper change.

### When to call:

- If red bumpy rash for more than 3 days or if your baby seems fussy or uncomfortable

### Other skincare notes...

**Sunscreen:** Keep young infants out of the sun in a shady place. After your baby is 6 months old use sunscreen of 30 SPF or greater. Using sunscreen until age 18 prevents lifetime skin cancer risk by as much as 78%.

## 4. Immunizations:

- Today is when we will give your baby several vaccines to protect against serious illnesses.
- After the shots, some babies may be fussy, may have a fever for 1-2 days, or just be worn out.
- Tylenol (acetaminophen) may be given for fever or discomfort. Please see GAP (Genesis Advice Packet) for dosing.
- Call if you have concerns after the shots.

## **What to Expect in the Next Year...**

### **From 2-4 Months**

#### **Daily Activities**

- Crying gradually becomes less frequent
- May begin to sleep through the night
- Smiles, coos – more when talked to

#### **Vision and Hearing**

- Focuses better
- Moves head from side to side to look at a person
- Likes brightly colored objects

#### **Motor skills**

- Lifts chest for a second when lying on tummy
- Holds head steady when held or seated with support
- Baby finds their own hand and fingers

### **From 4-6 months**

#### **Daily Activities**

- Is active and playful
- Puts everything into mouth
- Laughs and giggles when playing and seeing people
- Loves attention

#### **Hearing and Vision**

- Turns head when someone talks
- Focuses clearly

#### **Motor Skills**

- Rolls from side to side
- Holds up chest when lying on tummy
- Loves kicking their legs

### **From 6-9 Months**

#### **Daily Activities**

- Loves playing with balls, squeaky toys
- Sleeps through the night
- Loves "peek-a-boo", "patty-cake"

#### **Language**

- Babbles and squeals
- Loves to jabber

#### **Emotions**

- May show mood changes
- Especially strong attachment to mother
- May show fear of strangers

#### **Motor skills**

- Rests on elbows when on tummy
- Begins to sit alone
- Holds objects in thumb and finger

### **From 9-12 Months**

#### **Daily Activities**

- Continues to enjoy banging, waving and throwing toys
- Explores food with fingers
- Deeply looks at toys and objects

#### **Language**

- Imitates speech sounds
- Repeats sounds over and over
- May say "mama" or "dada" but not specifically call for parents

#### **Emotions**

- Continues to resist doing what is not their choice
- Imitates parents behaviors
- May cry when parent leaves the room

#### **Motor Skills**

- Goes from sitting to a lying position by themselves
- May pull self to a standing position and walk with help
- Stands holding onto furniture

### **From 12-15 Months**

#### **Daily Activities**

- Follows simple directions
- Opens cabinets, pulls tablecloths, bangs cubes held in hands
- Likes to feed self
- Waves bye bye, plays peekaboo
- May get bumps and bruises as they explore

#### **Language**

- Understands a few simple words
- Says a few words "mama", "dada", "ball", "dog"

#### **Emotions**

- Shows more negative emotion and may resist naps, certain foods, throws occasional tantrums
- Continues to prefer people to toys
- Shows some stranger anxiety

#### **Motor skills**

- Stands alone
- May walk with help or may walk by themselves



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

Many vaccine information statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis)

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite [www.immunize.org/vis](http://www.immunize.org/vis)

## 1. Why get vaccinated?

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

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

- **DIPHTHERIA (D)** can lead to difficulty breathing, heart failure, paralysis, or death.
- **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.
- **PERTUSSIS (aP)**, also known as “whooping cough,” can cause uncontrollable, violent coughing that makes it hard to breathe, eat, or drink. Pertussis can be extremely serious especially 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. DTaP vaccine

DTaP is only for children younger than 7 years old. Different vaccines against tetanus, diphtheria, and pertussis (Tdap and Td) are available for older children, adolescents, and adults.

It is recommended that children receive 5 doses of DTaP, usually at the following ages:

- 2 months
- 4 months
- 6 months
- 15–18 months
- 4–6 years

DTaP may be given as a stand-alone vaccine, or as part of a combination vaccine (a type of vaccine that combines more than one vaccine together into one shot).

DTaP may be given at the same time as other vaccines.

## 3. Talk with your health care provider

Tell your vaccination 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 or DTaP)**
- 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 child’s health care provider may decide to postpone DTaP vaccination until a future visit.

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

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



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## 4. Risks of a vaccine reaction

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- Soreness or swelling where the shot was given, fever, fussiness, feeling tired, loss of appetite, and vomiting sometimes happen after DTaP vaccination.
- More serious reactions, such as seizures, non-stop crying for 3 hours or more, or high fever (over 105°F) after DTaP vaccination happen much less often. Rarely, vaccination is followed by swelling of the entire arm or leg, especially in older children when they receive their fourth or fifth dose.

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

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## 5. What if there is a serious problem?

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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](http://www.vaers.hhs.gov) or call **1-800-822-7967**. *VAERS is only for reporting reactions, and VAERS staff members do not give medical advice.*

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## 6. The National Vaccine Injury Compensation Program

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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. Claims regarding alleged injury or death due to vaccination have a time limit for filing, which may be as short as two years. Visit the VICP website at [www.hrsa.gov/vaccinecompensation](http://www.hrsa.gov/vaccinecompensation) or call **1-800-338-2382** to learn about the program and about filing a claim.

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## 7. How can I learn more?

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- Ask your health care provider.
- Call your local or state health department.
- Visit the website of the Food and Drug Administration (FDA) for vaccine package inserts and additional information at [www.fda.gov/vaccines-blood-biologics/vaccines](http://www.fda.gov/vaccines-blood-biologics/vaccines).
- 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](http://www.cdc.gov/vaccines).



# *Haemophilus influenzae* type b (Hib) Vaccine: What You Need to Know

Many vaccine information statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis)

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite [www.immunize.org/vis](http://www.immunize.org/vis)

## 1. Why get vaccinated?

Hib vaccine can prevent *Haemophilus influenzae* type b (Hib) disease.

*Haemophilus influenzae* type b can cause many different kinds of infections. These infections usually affect children under 5 years of age but can also affect adults with certain medical conditions. Hib bacteria can cause mild illness, such as ear infections or bronchitis, or they can cause severe illness, such as infections of the blood. Severe Hib infection, also called “invasive Hib disease,” requires treatment in a hospital and can sometimes result in death.

Before Hib vaccine, Hib disease was the leading cause of bacterial meningitis among children under 5 years old in the United States. Meningitis is an infection of the lining of the brain and spinal cord. It can lead to brain damage and deafness.

Hib infection can also cause:

- Pneumonia
- Severe swelling in the throat, making it hard to breathe
- Infections of the blood, joints, bones, and covering of the heart
- Death

## 2. Hib vaccine

Hib vaccine is usually given in 3 or 4 doses (depending on brand).

**Infants** will usually get their first dose of Hib vaccine at 2 months of age and will usually complete the series at 12–15 months of age.

**Children between 12 months and 5 years of age** who have not previously been completely vaccinated against Hib may need 1 or more doses of Hib vaccine.

**Children over 5 years old and adults** usually do not receive Hib vaccine, but it might be recommended for older children or adults whose spleen is damaged or has been removed, including people with sickle cell disease, before surgery to remove the spleen, or following a bone marrow transplant. Hib vaccine may also be recommended for people 5 through 18 years old with HIV.

Hib vaccine may be given as a stand-alone vaccine, or as part of a combination vaccine (a type of vaccine that combines more than one vaccine together into one shot).

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

## 3. Talk with your health care provider

Tell your vaccination provider if the person getting the vaccine:

- Has had an **allergic reaction after a previous dose of Hib vaccine**, or has any **severe, life-threatening allergies**

In some cases, your health care provider may decide to postpone Hib vaccination until 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 Hib vaccine.

Your health care provider can give you more information.



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## 4. Risks of a vaccine reaction

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- Redness, warmth, and swelling where the shot is given and fever can happen after Hib vaccination.

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.

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## 5. What if there is a serious problem?

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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](http://www.vaers.hhs.gov) or call **1-800-822-7967**. *VAERS is only for reporting reactions, and VAERS staff members do not give medical advice.*

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## 6. The National Vaccine Injury Compensation Program

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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. Claims regarding alleged injury or death due to vaccination have a time limit for filing, which may be as short as two years. Visit the VICP website at [www.hrsa.gov/vaccinecompensation](http://www.hrsa.gov/vaccinecompensation) or call **1-800-338-2382** to learn about the program and about filing a claim.

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## 7. How can I learn more?

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- Ask your health care provider.
- Call your local or state health department.
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- Contact the Centers for Disease Control and Prevention (CDC):
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# Polio 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](http://www.immunize.org/vis)

### 1. Why get vaccinated?

**Polio vaccine** can prevent **polio**.

Polio (or poliomyelitis) is a disabling and life-threatening disease caused by poliovirus, which can infect a person's spinal cord, leading to paralysis.

Most people infected with poliovirus have no symptoms, and many recover without complications. Some people will experience sore throat, fever, tiredness, nausea, headache, or stomach pain.

A smaller group of people will develop more serious symptoms that affect the brain and spinal cord:

- Paresthesia (feeling of pins and needles in the legs),
- Meningitis (infection of the covering of the spinal cord and/or brain), or
- Paralysis (can't move parts of the body) or weakness in the arms, legs, or both.

Paralysis is the most severe symptom associated with polio because it can lead to permanent disability and death.

Improvements in limb paralysis can occur, but in some people new muscle pain and weakness may develop 15 to 40 years later. This is called "post-polio syndrome."

Polio has been eliminated from the United States, but it still occurs in other parts of the world. The best way to protect yourself and keep the United States polio-free is to maintain high immunity (protection) in the population against polio through vaccination.

### 2. Polio vaccine

**Children** should usually get 4 doses of polio vaccine at ages 2 months, 4 months, 6–18 months, and 4–6 years.

Most **adults** do not need polio vaccine because they were already vaccinated against polio as children. Some adults are at higher risk and should consider polio vaccination, including:

- People traveling to certain parts of the world
- Laboratory workers who might handle poliovirus
- Health care workers treating patients who could have polio
- Unvaccinated people whose children will be receiving oral poliovirus vaccine (for example, international adoptees or refugees)

Polio vaccine may be given as a stand-alone vaccine, or as part of a combination vaccine (a type of vaccine that combines more than one vaccine together into one shot).

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



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### 3. Talk with your health care provider

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Tell your vaccination provider if the person getting the vaccine:

- Has had an **allergic reaction after a previous dose of polio vaccine**, or has any **severe, life-threatening allergies**

In some cases, your health care provider may decide to postpone polio vaccination until 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 polio vaccine.

Not much is known about the risks of this vaccine for pregnant or breastfeeding people. However, polio vaccine can be given if a pregnant person is at increased risk for infection and requires immediate protection.

Your health care provider can give you more information.

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### 4. Risks of a vaccine reaction

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- A sore spot with redness, swelling, or pain where the shot is given can happen after polio vaccination.

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.

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### 5. What if there is a serious problem?

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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](http://www.vaers.hhs.gov) or call **1-800-822-7967**. *VAERS is only for reporting reactions, and VAERS staff members do not give medical advice.*

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- Call your local or state health department.
- Visit the website of the Food and Drug Administration (FDA) for vaccine package inserts and additional information at [www.fda.gov/vaccines-blood-biologics/vaccines](http://www.fda.gov/vaccines-blood-biologics/vaccines).
- 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](http://www.cdc.gov/vaccines).



# Pneumococcal Conjugate Vaccine (PCV13): *What You Need to Know*

Many vaccine information statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis)

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite [www.immunize.org/vis](http://www.immunize.org/vis)

## 1. Why get vaccinated?

Pneumococcal conjugate vaccine (PCV13) can prevent **pneumococcal disease**.

**Pneumococcal disease** refers to any illness caused by pneumococcal bacteria. These bacteria can cause many types of illnesses, including pneumonia, which is an infection of the lungs. Pneumococcal bacteria are one of the most common causes of pneumonia.

Besides pneumonia, pneumococcal bacteria can also cause:

- Ear infections
- Sinus infections
- Meningitis (infection of the tissue covering the brain and spinal cord)
- Bacteremia (infection of the blood)

Anyone can get pneumococcal disease, but children under 2 years old, people with certain medical conditions, adults 65 years or older, and cigarette smokers are at the highest risk.

Most pneumococcal infections are mild. However, some can result in long-term problems, such as brain damage or hearing loss. Meningitis, bacteremia, and pneumonia caused by pneumococcal disease can be fatal.

## 2. PCV13

PCV13 protects against 13 types of bacteria that cause pneumococcal disease.

**Infants and young children** usually need 4 doses of pneumococcal conjugate vaccine, at ages 2, 4, 6, and 12–15 months. **Older children (through age 59 months)** may be vaccinated if they did not receive the recommended doses.

A dose of PCV13 is also recommended for **adults and children 6 years or older** with certain medical conditions if they did not already receive PCV13.

This vaccine may be given to healthy **adults 65 years or older** who did not already receive PCV13, based on discussions between the patient and health care provider.

## 3. Talk with your health care provider

Tell your vaccination provider if the person getting the vaccine:

- Has had an **allergic reaction after a previous dose of PCV13, to an earlier pneumococcal conjugate vaccine known as PCV7, or to any vaccine containing diphtheria toxoid** (for example, DTaP), or has any **severe, life-threatening allergies**

In some cases, your health care provider may decide to postpone PCV13 vaccination until 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 PCV13.

Your health care provider can give you more information.



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## 4. Risks of a vaccine reaction

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- Redness, swelling, pain, or tenderness where the shot is given, and fever, loss of appetite, fussiness (irritability), feeling tired, headache, and chills can happen after PCV13 vaccination.

Young children may be at increased risk for seizures caused by fever after PCV13 if it is administered at the same time as inactivated influenza vaccine. Ask your health care provider for more information.

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.

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## 5. What if there is a serious problem?

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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](http://www.vaers.hhs.gov) or call **1-800-822-7967**. *VAERS is only for reporting reactions, and VAERS staff members do not give medical advice.*

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## 6. The National Vaccine Injury Compensation Program

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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. Claims regarding alleged injury or death due to vaccination have a time limit for filing, which may be as short as two years. Visit the VICP website at [www.hrsa.gov/vaccinecompensation](http://www.hrsa.gov/vaccinecompensation) or call **1-800-338-2382** to learn about the program and about filing a claim.

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## 7. How can I learn more?

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- Ask your health care provider.
- Call your local or state health department.
- Visit the website of the Food and Drug Administration (FDA) for vaccine package inserts and additional information at [www.fda.gov/vaccines-blood-biologics/vaccines](http://www.fda.gov/vaccines-blood-biologics/vaccines).
- 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](http://www.cdc.gov/vaccines).



# Rotavirus Vaccine:

## *What You Need to Know*

Many Vaccine Information Statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis)

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite [www.immunize.org/vis](http://www.immunize.org/vis)

### 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.

### 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 rotavirus vaccine**, or has any severe, life-threatening 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.



U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

## 5 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.

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## 7 How can I learn more?

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- Call your local or state health department.
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