

Cape Girardeau County Public Health Center

1121 Linden, P.O. Box 1839
Cape Girardeau, MO 63702 – 1839
www.capecountyhealth.com
Phone (573) 335-7846 Fax (573) 335-5909

Dear parents,

The Cape Girardeau County Public Health Center will be at your school on August 8, 2023 to administer the following vaccines for students entering the 12th grade:

- Meningococcal (MCV4)- required
- Meningitis B- required to be fully protected from meningitis
- Gardasil- highly recommended to students to protect against HPV infections that can cause cancer later in life.

Please check your students records to see if the student has had their meningococcal vaccine. The date and vaccine name must be indicated on the record (Menveo, Menactra, MCV4). You may contact your health care provider to obtain the brand name of the meningitis vaccine, if not indicated on your record.

Senior students are due for 2nd dose of Meningococcal vaccine, there must be 4 years since the first dose. Meningococcal B vaccine is required to be fully protected from meningitis. It is a 2-dose series, 1 month apart. HPV vaccine is a 3-dose series, over 6 months.

Please visit www.capecountyhealth.com or scan the QR code below to register your child.

Please upload your child's Medicaid or insurance card on the registration link. Depending on your insurance coverage you may receive a statement from the vaccine provider Vaxcare. (ie: if you have not met your deductible or you have a co-payment) Please feel free to contact us at 573-335-7846 if you have any questions about a statement.

Sincerely, Lisa Slusher, RN Immunization Nurse Coordinator





Cape Girardeau County Public Health Center

1121 Linden, P.O. Box 1839
Cape Girardeau, MO 63702 – 1839
www.capecountyhealth.com
Phone (573) 335-7846 Fax (573) 335-5909

Payment Options:					
	Cash				
	Check				
Γ	Insurance (see below)				
	Uninsured				

If Student, School							
	Date of birth						
Address							
City		State	Zip Co	ode			
Phone# Male \square	Female \Box If	child is fema	ale: Not Pregnar	nt 🗆 Pregnant 🗆			
Select all that apply: Hispanic/Latino	☐ Non-Hispani	c/Latino 🗆					
African-American ☐ Amer	. Indian/Alaska l	Vative	□ Car	ucasian 🗆			
Asian Native	e Hawaiian/Paci	fic Islander		_			
Do you have the following?							
Do you have the following? Medicaid Managed Care: Name of C	omnany						
Member ID Number							
•							
Private Insurance: Name of Company		Cassa Norm	-1- ou				
Member ID Number		Group Null	ider				
Policy owner's name Policy owner's date of birth							
*** FORM MUST BE COMPLETED							
INSURANCE CARD FOR YOU OR Y	OUR CHILD I	O RECEIVA	E VACCINE. **	<u></u>			
Immunization History?							
Has your child ever had a reaction to ar If YES, please explain the reaction:	y immunization	/shots?	Yes □				
Does the individual receiving the vacci	ne have any of th	ne following	: Asthma, Whee	ezing, Use			
Nebulizer treatments, Diabetes (or othe							
kidneys, liver, nerves, or blood?			Yes □	No □			
Does the individual receiving the vacci	ne take asnirin e	verv day or :	asnirin-containi	ng therany?			
Does the marriadar receiving the vaccin	ne take aspirin e	vory day or o	-	No □			
Does the individual receiving the vaccine have a weakened immune system (for example from HIV, Cancer, or medications such as steroids or those used to treat cancer, lupus, immune disorders, organ transplant)? Yes No							
Has the individual receiving the vaccine	e ever had Guilli	an-Barre syn	•				
paralysis)?			Yes □	No □			
Is the individual receiving the vaccine a	lllergic to eggs, j	proteins, gel	atin, gentamicin Yes □				
Has the individual receiving the vaccine the past 30 days?	e received any or	ther vaccines	s or anti-viral m Yes □				

Consent for Immunizations

The purpose of this consent form is to allow individuals/parents/guardians/emancipated minors/students over the age of 18 to:

- (1) give informed consent for you or your child to participate in and receive age-appropriate immunizations provided by the Cape Girardeau County Public Health Center (CGCPHC) with or without the presence of a parent/guardian;
- (2) give permission to release you or your child's protected health information ("PHI") to CGCPHC staff involved in the operation of school immunization clinics and I understand that this immunization will be recorded in the Missouri State Immunization Information System (Show Me Vax) for the purposes of sharing immunization information with other health care providers and tracking immunization inventory only. I understand that I may elect not to have my information entered into Show Me Vax by selecting the following check box: \Box I do not want information entered.
- (3) authorize the medical staff and personnel to release my or my minor child's medical information to the insurance company for the purpose of determining and receiving benefits for medical billing. I understand that CGCPHC will submit my insurance claims and that I will be responsible for any deductible, co-payments, co-insurance or client fees at the times the services are rendered.

The Individual/Parent/Guardian understands that he/she has the opportunity to ask and have any questions answered about the risks, benefits, and alternatives of the immunization by contacting CGCPHC at (573)335-7846 and that CGCPHC recommends the Individual/Parent/Guardian do so prior to signing this Consent Form if he/she has any questions about the immunizations. The Individual/Parent/Guardian acknowledges and understands that by signing this Consent Form, he or she is consenting to the immunization(s) directly below. I understand that in the rare occurrence of anaphylaxis that emergency treatment will be provided. I further acknowledge that I have read or had explained to me the information contained in the Vaccine Information Statement (VIS) and understand the risks and benefits of the vaccine. I have had a chance to ask questions which have been answered to my satisfaction and I understand the benefits and risks of the immunizations.

contained in the Vaccine Information Statement (VIS) and understand the risks and benefits of the vaccine. I have had a chance to ask questions which have been answered to my satisfaction and I understand the benefits and risks of the immunizations.								
I authorize you to give the following vaccines to my child or myself:								
 □ Meningitis MCV4 Required □ Meningitis B Required to be fully protected from meningitis □ Gardasil (HPV) Highly recommended to students to protect against HPV infections that can cause cancer later in life □ Tdap (Tetanus, Diphtheria and Pertussis) Required □ Flu Vaccine Recommended 								
Parent/Guardian Signature								
Print Name								
Area below for office use only								
	Brand	Lot Number	Exp Date	Location				
MCV4/Meningitis B (114 & 163) Gardasil HPV (165) TdaP (115) Influenza (150, 185, 197) Nurse Signature								
Demographics I	nsurance/Eligibility	Consent Scanned Enco	ounter Sent to ESB ES	B Checked Hub				

Meningococcal ACWY Vaccine: What You Need to Know

Many vaccine information statements are available in Spanish and other languages. See www.immunize.org/vis

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

1. Why get vaccinated?

Meningococcal ACWY vaccine can help protect against meningococcal disease caused by serogroups A, C, W, and Y. A different meningococcal vaccine is available that can help protect against serogroup B.

Meningococcal disease can cause meningitis (infection of the lining of the brain and spinal cord) and infections of the blood. Even when it is treated, meningococcal disease kills 10 to 15 infected people out of 100. And of those who survive, about 10 to 20 out of every 100 will suffer disabilities such as hearing loss, brain damage, kidney damage, loss of limbs, nervous system problems, or severe scars from skin grafts.

Meningococcal disease is rare and has declined in the United States since the 1990s. However, it is a severe disease with a significant risk of death or lasting disabilities in people who get it.

Anyone can get meningococcal disease. Certain people are at increased risk, including:

- Infants younger than one year old
- Adolescents and young adults 16 through 23 years old
- People with certain medical conditions that affect the immune system
- Microbiologists who routinely work with isolates of *N. meningitidis*, the bacteria that cause meningococcal disease
- People at risk because of an outbreak in their community

2. Meningococcal ACWY vaccine

Adolescents need 2 doses of a meningococcal ACWY vaccine:

- First dose: 11 or 12 year of age
- Second (booster) dose: 16 years of age

In addition to routine vaccination for adolescents, meningococcal ACWY vaccine is also recommended for **certain groups of people**:

- People at risk because of a serogroup A, C, W, or Y meningococcal disease outbreak
- People with HIV
- Anyone whose spleen is damaged or has been removed, including people with sickle cell disease
- Anyone with a rare immune system condition called "complement component deficiency"
- Anyone taking a type of drug called a "complement inhibitor," such as eculizumab (also called "Soliris") or ravulizumab (also called "Ultomiris")
- Microbiologists who routinely work with isolates of *N. meningitidis*
- Anyone traveling to or living in a part of the world where meningococcal disease is common, such as parts of Africa
- College freshmen living in residence halls who have not been completely vaccinated with meningococcal ACWY vaccine
- U.S. military recruits

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 meningococcal ACWY vaccine, or has any severe, life-threatening allergies

In some cases, your health care provider may decide to postpone meningococcal ACWY vaccination until a future visit.

There is limited information on the risks of this vaccine for pregnant or breastfeeding people, but no safety concerns have been identified. A pregnant or breastfeeding person should be vaccinated if indicated.

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

Your health care provider can give you more information.

4. Risks of a vaccine reaction

- Redness or soreness where the shot is given can happen after meningococcal ACWY vaccination.
- A small percentage of people who receive meningococcal ACWY vaccine experience muscle pain, headache, or tiredness.

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.

CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTER

1121 LINDEN ST

CAPE GIRARDEAU, MO 63701

PHONE: (573)335-7846 FAX: (573)335-5909

WWW. CAPECOUNTYHEALTH.COM

Vaccine Information Statement

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 members 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. 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 or call 1-800-338-2382 to learn about the program and about filing a claim.

7. How can I learn more?

- 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.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call 1-800-232-4636 (1-800-CDC-INFO) or
 - Visit CDC's website at <u>www.cdc.gov/vaccines</u>.



USE

ONLY

Meningococcal B Vaccine:

What You Need to Know

Many vaccine information statements are available in Spanish and other languages. See www.immunize.org/vis

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

1. Why get vaccinated?

Meningococcal B vaccine can help protect against **meningococcal disease** caused by serogroup B. A different meningococcal vaccine is available that can help protect against serogroups A, C, W, and Y.

Meningococcal disease can cause meningitis (infection of the lining of the brain and spinal cord) and infections of the blood. Even when it is treated, meningococcal disease kills 10 to 15 infected people out of 100. And of those who survive, about 10 to 20 out of every 100 will suffer disabilities such as hearing loss, brain damage, kidney damage, loss of limbs, nervous system problems, or severe scars from skin grafts.

Meningococcal disease is rare and has declined in the United States since the 1990s. However, it is a severe disease with a significant risk of death or lasting disabilities in people who get it.

Anyone can get meningococcal disease. Certain people are at increased risk, including:

- Infants younger than one year old
- Adolescents and young adults 16 through 23 years old
- People with certain medical conditions that affect the immune system
- Microbiologists who routinely work with isolates of *N. meningitidis*, the bacteria that cause meningococcal disease
- People at risk because of an outbreak in their community

2. Meningococcal B vaccine

For best protection, more than 1 dose of a meningococcal B vaccine is needed. There are two meningococcal B vaccines available. The same vaccine must be used for all doses.

Meningococcal B vaccines are recommended for people 10 years or older who are at increased risk for serogroup B meningococcal disease, including:

- People at risk because of a serogroup B meningococcal disease outbreak
- Anyone whose spleen is damaged or has been removed, including people with sickle cell disease
- Anyone with a rare immune system condition called "complement component deficiency"
- Anyone taking a type of drug called a "complement inhibitor," such as eculizumab (also called "Soliris") or ravulizumab (also called "Ultomiris")
- Microbiologists who routinely work with isolates of N. meningitidis

These vaccines may also be given to anyone 16 through 23 years old to provide short-term protection against most strains of serogroup B meningococcal disease, based on discussions between the patient and health care provider. The preferred age for vaccination is 16 through 18 years.

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 meningococcal B vaccine, or has any severe, life-threatening allergies
- Is pregnant or breastfeeding

In some cases, your health care provider may decide to postpone meningococcal B vaccination until a future visit.

Meningococcal B vaccination should be postponed for pregnant people unless the person is at increased risk and, after consultation with their health care provider, the benefits of vaccination are considered to outweigh the potential risks.

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

Your health care provider can give you more information.

4. Risks of a vaccine reaction

 Soreness, redness, or swelling where the shot is given, tiredness, headache, muscle or joint pain, fever, or nausea can happen after meningococcal B vaccination. Some of these reactions occur in more than half of the people who receive the 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.

CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTER 1121 LINDEN ST

CAPE GIRARDEAU, MO 63701

PHONE: (573)335-7846 FAX: (573)335-5909

WWW. CAPECOUNTYHEALTH.COM

Vaccine Information Statement

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 members 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. 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 or call 1-800-338-2382 to learn about the program and about filing a claim.

7. How can I learn more?

- 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.
- 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.



USE

ONLY

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

Many vaccine information statements are available in Spanish and other languages. See www.immunize.org/vis

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

1. Why get vaccinated?

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

HPV infections can cause certain types of cancers, including:

- cervical, vaginal, and vulvar cancers in women
- penile cancer in men
- anal cancers in both men and women
- cancers of tonsils, base of tongue, and back of throat (oropharyngeal cancer) in both men and women

HPV infections can also cause anogenital warts.

HPV vaccine can prevent over 90% of cancers caused by HPV.

HPV is spread through intimate skin-to-skin or sexual contact. HPV infections are so common that nearly all people will get at least one type of HPV at some time in their lives. Most HPV infections go away on their own within 2 years. But sometimes HPV infections will last longer and can cause cancers later in life.

2. HPV vaccine

HPV vaccine is routinely recommended for adolescents at 11 or 12 years of age to ensure they are protected before they are exposed to the virus. HPV vaccine may be given beginning at age 9 years and vaccination is recommended for everyone through 26 years of age.

HPV vaccine may be given to adults 27 through 45 years of age, based on discussions between the patient and health care provider.

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

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

3. Talk with your health care provider

Tell your vaccination provider if the person getting the vaccine:

- Has had an allergic reaction after a previous dose of HPV vaccine, or has any severe, lifethreatening allergies
- Is pregnant—HPV vaccine is not recommended until after pregnancy

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

Your health care provider can give you more information.

4. Risks of a vaccine reaction

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

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 members 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. 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 or call 1-800-338-2382 to learn about the program and about filing a claim.

7. How can I learn more?

- 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.
- Contact the Centers for Disease Control and Prevention (CDC):
 - -Call 1-800-232-4636 (1-800-CDC-INFO) or
 - Visit CDC's website at <u>www.cdc.gov/vaccines</u>.

CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTER 1121 LINDEN ST CAPE GIRARDEAU, MO 63701

PHONE: (573)335-7846 FAX: (573)335-5909

WWW. CAPECOUNTYHEALTH.COM



Tdap (Tetanus, Diphtheria, Pertussis) 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?

Tdap vaccine can prevent tetanus, diphtheria, and pertussis.

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

- TETANUS (T) causes painful stiffening of the muscles. Tetanus can lead to serious health problems, including being unable to open the mouth, having trouble swallowing and breathing, or death.
- **DIPHTHERIA** (**D**) can lead to difficulty breathing, heart failure, paralysis, or death.
- PERTUSSIS (aP), also known as "whooping cough," can cause uncontrollable, violent coughing 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. Tdap vaccine

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

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

Pregnant people should get a dose of Tdap during every pregnancy, preferably during the early part of the third trimester, to help protect the newborn from pertussis. Infants are most at risk for severe, lifethreatening complications from pertussis.

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

Also, adults should receive a booster dose of either Tdap or Td (a different vaccine that protects against tetanus and diphtheria but not pertussis) every 10 years, or after 5 years in the case of a severe or dirty wound or burn.

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

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

Your health care provider can give you more information.



4. Risks of a vaccine reaction

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

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 members 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. 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 or call 1-800-338-2382 to learn about the program and about filing a claim.

7. How can I learn more?

- 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.
- 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.

CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTER
1121 LINDEN ST
CAPE GIRARDEAU, MO 63701
PHONE, (573)335, 7846

PHONE: (573)335-7846 FAX: (573)335-5909

WWW. CAPECOUNTYHEALTH.COM



Influenza (Flu) Vaccine (Inactivated or Recombinant): 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?

Influenza vaccine can prevent influenza (flu).

Flu is a contagious disease that spreads around the United States every year, usually between October and May. Anyone can get the flu, but it is more dangerous for some people. Infants and young children, people 65 years and older, pregnant people, and people with certain health conditions or a weakened immune system are at greatest risk of flu complications.

Pneumonia, bronchitis, sinus infections, and ear infections are examples of flu-related complications. If you have a medical condition, such as heart disease, cancer, or diabetes, flu can make it worse.

Flu can cause fever and chills, sore throat, muscle aches, fatigue, cough, headache, and runny or stuffy nose. Some people may have vomiting and diarrhea, though this is more common in children than adults.

In an average year, thousands of people in the United States die from flu, and many more are hospitalized. Flu vaccine prevents millions of illnesses and flu-related visits to the doctor each year.

2. Influenza vaccines

CDC recommends everyone 6 months and older get vaccinated every flu season. Children 6 months through 8 years of age may need 2 doses during a single flu season. Everyone else needs only 1 dose each flu season.

It takes about 2 weeks for protection to develop after vaccination.

There are many flu viruses, and they are always changing. Each year a new flu vaccine is made to protect against the influenza viruses believed to be likely to cause disease in the upcoming flu season.

Even when the vaccine doesn't exactly match these viruses, it may still provide some protection.

Influenza vaccine does not cause flu.

Influenza 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 influenza vaccine, or has any severe, lifethreatening allergies
- Has ever had Guillain-Barré Syndrome (also called "GBS")

In some cases, your health care provider may decide to postpone influenza vaccination until a future visit.

Influenza vaccine can be administered at any time during pregnancy. People who are or will be pregnant during influenza season should receive inactivated influenza vaccine.

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 influenza vaccine.

Your health care provider can give you more information.



4. Risks of a vaccine reaction

- Soreness, redness, and swelling where the shot is given, fever, muscle aches, and headache can happen after influenza vaccination.
- There may be a very small increased risk of Guillain-Barré Syndrome (GBS) after inactivated. influenza vaccine (the flu shot).

Young children who get the flu shot along with pneumococcal vaccine (PCV13) and/or DTaP vaccine at the same time might be slightly more likely to have a seizure caused by fever. Tell your health care provider if a child who is getting flu vaccine has ever had a seizure.

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 members 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. 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 or call 1-800-338-2382 to learn about the program and about filing a claim.

7. How can I learn more?

- 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.
- 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/flu.

CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTE

1121 LINDEN ST

CAPE GIRARDEAU, MO 63701

PHONE: (573)335-7846 FAX: (573)335-5909

WWW. CAPECOUNTYHEALTH.COM

42 U.S.C. § 300aa-26 **OFFICE** USE 8/6/2021



ONLY