



# HOP to IT!

Childhood and Adolescent Immunization Schedule

Immunize  
Georgia

**DPH**  
Georgia Department of Public Health

# Common Questions About Immunization & Childhood Diseases

## What Are Immunizations?

- ▶ Immunizations, also called vaccinations or shots, are a form of medicine made to protect people against many preventable diseases. These medicines are usually given by injection (shot). If your child is not properly immunized and gets one of these diseases, severe illness may result, which can cripple or even cause the death of your child.

## When To Immunize?

- ▶ Children begin vaccinations at birth. Children will need several vaccinations during their first 12-18 months of life and at different times for the rest of their lives.

## Where Can My Child Be Immunized?

- ▶ Call your health care provider's office or local public health clinic to find out the time and place to get your child immunized.

## How Do I Pay For Immunizations?

- ▶ Many health insurance plans, including Medicaid and PeachCare, cover the cost of immunizations. If your health insurance plan does not cover immunizations, check to see if your health care provider offers the Vaccines for Children (VFC) Program. VFC is a federally funded program that provides vaccines to local doctors

and public health clinics for children who meet required guidelines.

## Why Immunize Your Child?

- ▶ Immunizing your child will help protect him/her from these harmful diseases:
  - Hepatitis B
  - Hepatitis A
  - Diphtheria
  - Tetanus (lockjaw)
  - Pertussis (whooping cough)
  - *H. influenza* type b disease (Hib)
  - Polio
  - Measles
  - Mumps
  - Rubella (German measles)
  - Varicella zoster (chickenpox)
  - Pneumococcal disease
  - Influenza ("flu")
  - Meningococcal disease
  - Rotavirus disease
  - Human papillomavirus (HPV)
- ▶ These diseases can result in breathing problems, liver, lung and brain damage, heart problems, blindness, deafness, cancer and even death. All of these diseases, except tetanus, are spread from person to person. Child care centers, schools and colleges require students to be up-to-date with their vaccinations.

## Where Can I Find A Record Of My Child's Immunizations?

- ▶ Contact your health care provider. Georgia providers submit immunization records to the Georgia Registry of Immunization Transactions and Services (GRITS). GRITS maintains immunization records in a computer database, regardless of when or where in Georgia the shots were administered.

## Who Should Be Immunized?

- ▶ Every child should be fully immunized.
- ▶ Immunizing your children will protect them against harmful diseases. (See the immunization schedule for a complete list of recommended vaccinations.)

## Are Immunizations Safe?

- ▶ The risk of getting a disease by not being vaccinated is far greater than the chance of problems from the vaccine itself. It is important to remember that all vaccines are tested many times to ensure they are safe for your child.

## Are There Any Common Side Effects To Immunizations?

- ▶ Common side effects may include a slight fever or redness, tenderness and swelling

at the site of vaccination for a day or two. These side effects are mild and may not appear with each immunization. You should discuss any health concerns you may have with your doctor or public health clinic staff.

- ▶ If you feel your child has had an unusual or severe side effect to an immunization, contact your health care provider for immediate evaluation and attention, and request they file a Vaccine Adverse Event Reporting System (VAERS) report at 1-800-822-7967.

## Can My Child Be Immunized Even If He/She Is Sick?

- ▶ A minor illness should not prevent your child from being immunized. Talk to your doctor or public health clinic.

## What If My Child Misses Some of His/Her Immunizations?

- ▶ You should never skip a scheduled immunization appointment for your child. But if you do miss an immunization, your doctor or health care clinic can put your child on a "catch-up" schedule. Always keep an up-to-date immunization record for your child. Ask your doctor or public health clinic to review your child's record at each visit and to tell you when the next vaccination is needed.



## How To Keep On Track!

- ▶ Begin your child's immunizations on time. Hepatitis B can be given at birth and other vaccines start at 6 weeks of age.
- ▶ Never miss a chance to get your child immunized.
- ▶ Have your doctor or nurse review, update and enter each immunization given into the Georgia Registry of Immunization Transactions and Services (GRITS).
- ▶ Keep a record of your child's immunizations and take it with you when you visit your doctor or public health clinic.
- ▶ If you do not have a record, ask your provider to check GRITS.
- ▶ Mark the due date of your child's next vaccination and stay on schedule.
- ▶ Talk with your doctor or nurse about each vaccine. Don't be afraid to ask questions.
- ▶ Be careful to review all vaccine facts that you receive before your child is immunized.

## How To Comfort Your Child.

- ▶ Stay Calm – Your child can sense if you are nervous or upset.
- ▶ Talk Quietly – Speak in a soothing, quiet voice to comfort your child.
- ▶ Hold Your Child – Being close to you will comfort your child.
- ▶ Preoccupy Your Child – Try to distract your child with other things such as singing or playing a game.
- ▶ Bring a Toy – A toy or special item from home can help calm your child.
- ▶ Allow Your Child To Cry – It's a normal response.
- ▶ Be Truthful – Don't tell your child it won't hurt.



## When to Immunize (Vaccines are listed by the age and age range they are to be given)



\*Each frog equals one dose.

Age	Hep B (Hepatitis B)	DTaP/Tdap (Diphtheria, Tetanus, Pertussis)	Hib (Haemophilus influenza type B)	Polio	PCV (Pneumococcal Conjugate)	RV (Rotavirus)	MMR (Measles, Mumps & Rubella)	Varicella (Chickenpox)	Hep A (Hepatitis A)	MCV4 (Meningococcal Conjugate)	Influenza	HPV (Human Papillomavirus)
Birth												
1 Month												
2 Months												
4 Months												
6 Months			<sup>1</sup>			<sup>6</sup>						
12-18 Months		 15-18 months	 12-15 months		 12-15 months		 12-15 months	 12-15 months	 2 doses			
19-23 Months	Catch-Up <sup>3</sup>	Catch-Up <sup>3</sup>	Catch-Up <sup>3</sup> (to 5 years)	Catch-Up <sup>3</sup>	Catch-Up <sup>3,5</sup> (to 5 years)		Catch-Up <sup>3</sup>	Catch-Up <sup>3</sup>	Catch-Up <sup>3</sup> <small>Recommended for children at risk who are 2 years of age and older if not previously vaccinated.</small>	Catch-Up <sup>3</sup>	<sup>2</sup> 6 months – 18 years (given for each flu season)	
24-47 Months												
4-6 Years								<sup>5</sup>				
7-10 Years		Catch-Up <sup>3</sup>										
11-12 Years		<sup>4</sup>						<sup>4</sup>				
13-14 Years					Catch-Up <sup>3</sup>							
15 Years		Catch-Up <sup>3,4</sup> (Tdap/Td)										
16-18 Years												Catch-Up <sup>3</sup>

**This schedule was adapted from the immunization schedule published by the Immunization Action Coalition and the recommendations approved by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP).**

- 1** Your infant may not need a dose of Hib vaccine at 6 months of age depending on the brand of vaccine that your health care provider uses.
- 2** A child that is younger than 9 years and getting vaccinated against influenza for the first time should get two doses spaced at least four weeks apart.
- 3** Vaccinations delayed or missed entirely should be given as soon as possible.
- 4** One dose of Tdap, one dose of MCV4, and 2 doses of HPV is recommended for persons 11-12 years. A booster dose of MCV4 is recommended at age 16 years.
- 5** Children age 2 and older with high-risk health problems may need additional doses.
- 6** Your infant may not need a dose of rotavirus at 6 months depending on the brand of vaccine your health care provider uses.

## Responsibilities Associated with Immunization Requirements

- ▶ Physicians and Public Health Clinics:
  - Knowing the current legal requirements for attendance and accurately completing the certificate
  - Administering immunizations according to the current Recommended Childhood and Adolescent Immunization Schedule
  - Reporting the occurrence of any diseases listed on the "Notifiable Disease List"
  - Report any adverse event following the administration of a vaccine to VAERS
- ▶ Child Care and School:
  - Review the certificates for validity prior to accepting
  - Develop a system for immunization certificate management
  - Have certificates available for inspection and audit by health officials
  - Report the occurrence of any disease listed on the "Notifiable Disease List"



## Responsibilities of Parents or Caregivers

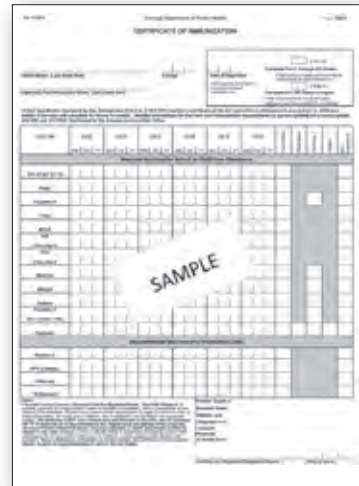
- ▶ Take your child to a health care provider for check-ups and immunizations at the recommended times
- ▶ Review all vaccine facts received before your child is immunized
- ▶ Discuss any questions or concerns about vaccines with your child's health care provider
- ▶ Keep your child's personal immunization record and take it with you on each visit to the health care provider to be assessed and updated
- ▶ Mark your child's vaccination due date and stay on schedule
- ▶ Obtain appropriate certificate for child care and school attendance from your health care provider
- ▶ Give a copy of the certificate to each facility your child attends

## Required Form for Child Care and School Attendance

- ▶ The immunization form you need for your child to attend child care or school in Georgia is called the “Georgia Certificate of Immunization, Form 3231.” Your child’s immunization record must be reviewed by a Georgia doctor or public health clinic to get the certificate.
- ▶ Each facility your child attends should have a copy of the certificate on file. A photocopy is OK. For instance, if your second-grader goes to an after-school program at a private child care center, the school may have the original and the child care facility a photocopy.
- ▶ To register for school in Georgia, your child will also need a Form 3300, “Hearing/Vision/Dental Form,” a birth certificate, Social Security card and proof of residence.

## Georgia Registry of Immunization Transactions and Services

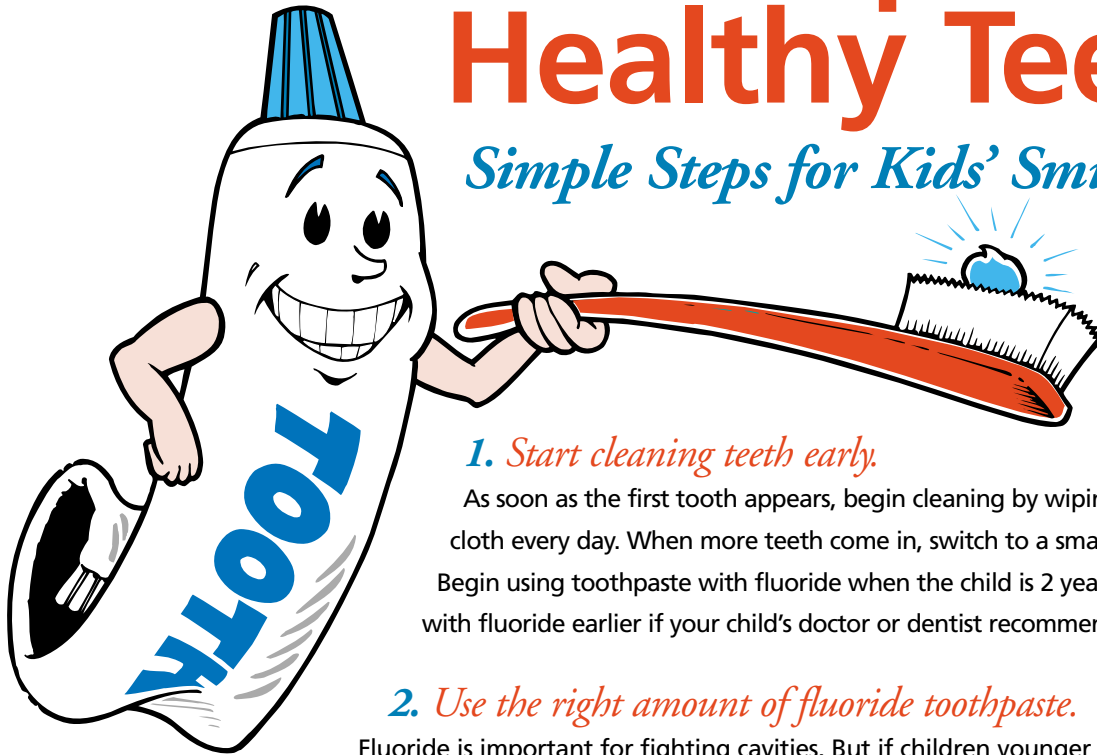
- ▶ GRITS is a “birth-to-death” web-based registry that keeps track of immunizations and related information for Georgians of all ages (i.e., children, adolescents and adults). The GRITS system includes a comprehensive database of immunization histories to help individuals get the immunizations they need by keeping track of all vaccines they have received so they don’t get double or triple doses. GRITS provides important immunization records and forms (i.e., 3231) for keeping track of immunizations.



**For more information visit the Georgia  
Immunization Program website  
<http://dph.georgia.gov/immunization-section>  
or call 404-657-3158.**

# Brush Up on Healthy Teeth

## *Simple Steps for Kids' Smiles*



### *1. Start cleaning teeth early.*

As soon as the first tooth appears, begin cleaning by wiping with a clean, damp cloth every day. When more teeth come in, switch to a small, soft toothbrush. Begin using toothpaste with fluoride when the child is 2 years old. Use toothpaste with fluoride earlier if your child's doctor or dentist recommends it.

### *2. Use the right amount of fluoride toothpaste.*

Fluoride is important for fighting cavities. But if children younger than 6 years old swallow too much fluoride, their permanent teeth may have white spots. To keep this from happening, use only a small amount of toothpaste (about the size of a pea). Teach your child to spit out the toothpaste and to rinse well after brushing.

### *3. Supervise brushing.*

Brush your child's teeth twice a day until your child has the skill to handle the toothbrush alone. Then continue to closely watch brushing to make sure the child is doing a thorough job and using only a small amount of toothpaste.

### *4. Talk to your child's doctor or dentist.*

Check with the doctor or dentist about your child's specific fluoride needs. After age 2, most children get the right amount of fluoride to help prevent cavities if they drink water that contains fluoride and brush their teeth with a pea-sized amount of fluoride toothpaste twice a day.

Parents of children older than 6 months should ask about the need for a fluoride supplement if drinking water does not have enough fluoride.

Do not let a child younger than 6 years old use a fluoride mouth rinse unless the child's doctor or dentist recommends it.

***Early care for your children's teeth will protect their smile and their health.***



# Vision Loss FACT SHEET

## What is vision loss?

Vision loss means that a person's eyesight is not corrected to a "normal" level. Vision loss can vary greatly among children and can be caused by many things.

## What causes loss of vision?

Vision loss can be caused by damage to the eye itself, by the eye being shaped incorrectly, or even by a problem in the brain. Babies can be born unable to see, and vision loss can occur anytime during a person's life.

## When should my child be checked?

Your child should be checked for vision problems by an ophthalmologist, optometrist, pediatrician, or other trained specialist at:

- newborn to 3 months
- 6 months to 1 year
- about 3 years
- about 5 years

Having your child's vision checked is especially important if someone in your family has had vision problems.

## What are some of the signs of vision loss?

### A child with vision loss might:

- close or cover one eye
- squint the eyes or frown
- complain that things are blurry or hard to see
- have trouble reading or doing other close-up work, or hold objects close to eyes in order to see
- blink more than usual or seem cranky when doing close-up work (such as looking at books)

One eye of a child with vision loss could look out or cross. One or both eyes could be watery, and one or both of the child's eyelids could also look red-rimmed, crusted, or swollen.

## What can I do if I think my child may have vision loss?

Talk with your child's doctor or nurse. If you or your doctor think there could be a problem, you can take your child to see an ophthalmologist, optometrist, or other specialist, and you can contact your local early intervention agency (for children under 3) or public school (for children 3 and older). To find out whom to speak to in your area, contact the National Information Center for Children and Youth with Disabilities at [www.nichcy.org/states.htm](http://www.nichcy.org/states.htm) or call the Centers for Disease Control and Prevention (CDC) at **1-800-232-4636**. In addition, CDC has information about vision loss at [www.cdc.gov/ncbddd](http://www.cdc.gov/ncbddd).

Treating vision problems early may protect your child's sight, and teaching children with severe vision loss how to function as early as possible can help them reach their full potential.

[www.cdc.gov/actearly](http://www.cdc.gov/actearly)

| 1-800-CDC-INFO



Learn the Signs. Act Early.



# Hearing Loss

## FACT SHEET

### What is hearing loss in children?

Hearing loss can vary greatly among children and can be caused by many things. In the United States, 1 to 3 children per 1,000 are born with hearing loss each year. Most children also experience mild, temporary hearing loss when fluid gets in the middle ear from allergies or colds. Sometimes as a result of an ear infection, fluid stays in the middle ears, which can sometimes cause hearing loss and delays in your child's speech. Some children have permanent hearing loss. This can be from mild (they don't hear as well as you do) to complete (where they can't hear anything at all).

### What are some of the signs of hearing loss?

The signs and symptoms of hearing loss are different for different children. If you see any of these signs call your child's doctor or nurse:

- does not turn to the source of a sound from birth to 3 or 4 months of age
- does not say single words, such as "dada" or "mama" by 1 year of age
- turns head when he or she sees you but not if you only call out his or her name: this usually is mistaken for not paying attention or just ignoring, but could be the result of a partial or complete hearing loss
- hears some sounds but not others

### What causes hearing loss? Can it be prevented?

Hearing loss can happen any time during life – from before birth to adulthood. Babies who are born early, who have low birth weight, or who are exposed to infections in the womb might have hearing loss, but this can happen to full-term, normal weight babies as well. Genetic factors are the cause of hearing loss in about 50% of babies – some of these babies might have family members who are deaf. Illnesses, injuries, certain medicines, and loud noise levels can cause children and adults to lose hearing.

[www.cdc.gov/actearly](http://www.cdc.gov/actearly)

Some causes of hearing loss can be prevented. For example, vaccines can prevent certain infections, such as measles or meningitis (an infection of the fluid around the brain and spinal cord), which can cause hearing loss. Another cause that can be prevented is a kind of brain damage called kernicterus, which is caused by bad jaundice. This can be prevented by using special lights (phototherapy) or other therapies to treat babies with jaundice before they go home from the hospital.

### What can I do if I think my child might have hearing loss?

Talk with your child's doctor or nurse. If you, your doctor, or anyone else who knows your child well, think your child might have hearing loss, ask that a hearing test be given as soon as possible. To have your child's exact levels of hearing measured, see an audiologist or an ear, nose, and throat doctor (ENT, otolaryngologist) who works with infants and children. If your child is under age 2 or does not cooperate for the hearing exam, a test (called brain-stem evoked-response audiometry) could be given. This test allows the doctor to check your child's hearing without having to rely on your child's cooperation. Your child will not be hurt; most babies even sleep through the test. This test is done routinely with newborn babies in all states.

Hearing loss can affect a child's ability to develop speech, language, and social skills. The earlier a child who is deaf or hard-of-hearing starts getting services, the more likely the child's speech, language, and social skills will reach their full potential. Services can be received through your local early intervention agency or public school. To find out who to speak to in your area, contact the National Dissemination Center for Children with Disabilities by logging on to [www.nichcy.org](http://www.nichcy.org). In addition, the Centers for Disease Control and Prevention (CDC) has links to information for families ([www.cdc.gov/ncbddd/ehdi](http://www.cdc.gov/ncbddd/ehdi)).



Learn the Signs. Act Early.