



BRIGHT FUTURES HANDOUT ► PARENT

11 THROUGH 14 YEAR VISITS

Here are some suggestions from Bright Futures experts that may be of value to your family.

✓ HOW YOUR FAMILY IS DOING

- Encourage your child to be part of family decisions. Give your child the chance to make more of her own decisions as she grows older.
- Encourage your child to think through problems with your support.
- Help your child find activities she is really interested in, besides schoolwork.
- Help your child find and try activities that help others.
- Help your child deal with conflict.
- Help your child figure out nonviolent ways to handle anger or fear.
- If you are worried about your living or food situation, talk with us. Community agencies and programs such as SNAP can also provide information and assistance.

✓ YOUR GROWING AND CHANGING CHILD

- Help your child get to the dentist twice a year.
- Give your child a fluoride supplement if the dentist recommends it.
- Encourage your child to brush her teeth twice a day and floss once a day.
- Praise your child when she does something well, not just when she looks good.
- Support a healthy body weight and help your child be a healthy eater.
 - Provide healthy foods.
 - Eat together as a family.
 - Be a role model.
- Help your child get enough calcium with low-fat or fat-free milk, low-fat yogurt, and cheese.
- Encourage your child to get at least 1 hour of physical activity every day. Make sure she uses helmets and other safety gear.
- Consider making a family media use plan. Make rules for media use and balance your child's time for physical activities and other activities.
- Check in with your child's teacher about grades. Attend back-to-school events, parent-teacher conferences, and other school activities if possible.
- Talk with your child as she takes over responsibility for schoolwork.
- Help your child with organizing time, if she needs it.
- Encourage daily reading.

✓ YOUR CHILD'S FEELINGS

- Find ways to spend time with your child.
- If you are concerned that your child is sad, depressed, nervous, irritable, hopeless, or angry, let us know.
- Talk with your child about how his body is changing during puberty.
- If you have questions about your child's sexual development, you can always talk with us.

✓ HEALTHY BEHAVIOR CHOICES

- Help your child find fun, safe things to do.
- Make sure your child knows how you feel about alcohol and drug use.
- Know your child's friends and their parents. Be aware of where your child is and what he is doing at all times.
- Lock your liquor in a cabinet.
- Store prescription medications in a locked cabinet.
- Talk with your child about relationships, sex, and values.
- If you are uncomfortable talking about puberty or sexual pressures with your child, please ask us or others you trust for reliable information that can help.
- Use clear and consistent rules and discipline with your child.
- Be a role model.

Helpful Resource: Family Media Use Plan: www.healthychildren.org/MediaUsePlan

11 THROUGH 14 YEAR VISITS—PARENT

✓ SAFETY

- Make sure everyone always wears a lap and shoulder seat belt in the car.
- Provide a properly fitting helmet and safety gear for biking, skating, in-line skating, skiing, snowmobiling, and horseback riding.
- Use a hat, sun protection clothing, and sunscreen with SPF of 15 or higher on her exposed skin. Limit time outside when the sun is strongest (11:00 am–3:00 pm).
- Don't allow your child to ride ATVs.
- Make sure your child knows how to get help if she feels unsafe.
- If it is necessary to keep a gun in your home, store it unloaded and locked with the ammunition locked separately from the gun.

Consistent with *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents*, 4th Edition

For more information, go to <https://brightfutures.aap.org>.

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BRIGHT FUTURES HANDOUT ► PATIENT 11 THROUGH 14 YEAR VISITS

Here are some suggestions from Bright Futures experts that may be of value to you and your family.

✓ HOW YOU ARE DOING

- Enjoy spending time with your family. Look for ways to help out at home.
- Follow your family's rules.
- Try to be responsible for your schoolwork.
- If you need help getting organized, ask your parents or teachers.
- Try to read every day.
- Find activities you are really interested in, such as sports or theater.
- Find activities that help others.
- Figure out ways to deal with stress in ways that work for you.
- Don't smoke, vape, use drugs, or drink alcohol. Talk with us if you are worried about alcohol or drug use in your family.
- Always talk through problems and never use violence.
- If you get angry with someone, try to walk away.

✓ HEALTHY BEHAVIOR CHOICES

- Find fun, safe things to do.
- Talk with your parents about alcohol and drug use.
- Say "No!" to drugs, alcohol, cigarettes and e-cigarettes, and sex. Saying "No!" is OK.
- Don't share your prescription medicines; don't use other people's medicines.
- Choose friends who support your decision not to use tobacco, alcohol, or drugs. Support friends who choose not to use.
- Healthy dating relationships are built on respect, concern, and doing things both of you like to do.
- Talk with your parents about relationships, sex, and values.
- Talk with your parents or another adult you trust about puberty and sexual pressures. Have a plan for how you will handle risky situations.

✓ YOUR GROWING AND CHANGING BODY

- Brush your teeth twice a day and floss once a day.
- Visit the dentist twice a year.
- Wear a mouth guard when playing sports.
- Be a healthy eater. It helps you do well in school and sports.
 - Have vegetables, fruits, lean protein, and whole grains at meals and snacks.
 - Limit fatty, sugary, salty foods that are low in nutrients, such as candy, chips, and ice cream.
 - Eat when you're hungry. Stop when you feel satisfied.
 - Eat with your family often.
 - Eat breakfast.
- Choose water instead of soda or sports drinks.
- Aim for at least 1 hour of physical activity every day.
- Get enough sleep.

✓ YOUR FEELINGS

- Be proud of yourself when you do something good.
- It's OK to have up-and-down moods, but if you feel sad most of the time, let us know so we can help you.
- It's important for you to have accurate information about sexuality, your physical development, and your sexual feelings toward the opposite or same sex. Ask us if you have any questions.

11 THROUGH 14 YEAR VISITS—PATIENT



STAYING SAFE

- Always wear your lap and shoulder seat belt.
- Wear protective gear, including helmets, for playing sports, biking, skating, skiing, and skateboarding.
- Always wear a life jacket when you do water sports.
- Always use sunscreen and a hat when you're outside. Try not to be outside for too long between 11:00 am and 3:00 pm, when it's easy to get a sunburn.
- Don't ride ATVs.
- Don't ride in a car with someone who has used alcohol or drugs. Call your parents or another trusted adult if you are feeling unsafe.
- Fighting and carrying weapons can be dangerous. Talk with your parents, teachers, or doctor about how to avoid these situations.

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Courtesy of HBCBS

You can choose to be healthy and add these tips to your daily routine. There is no right or wrong place to start, just jump in when and where you can!



Eat 5 servings of fruits and veggies every single day.

Ways to add fruits and vegetables to your meals:

- Include lettuce and slices of carrots, cucumber and tomato on your sandwich
- Add peppers, mushrooms, onions to a low-fat pasta sauce and pizza
- Choose fresh, frozen or canned fruit for dessert

You have options; fresh is best, but frozen and canned options are also good. Try to stay away from fried vegetables.

Every meal should be balanced.

1/2 of plate =

Vegetables, salads and fruit

- 1 cup of raw leafy vegetables
- 1/2 cup of cooked vegetables
- 1 cup of fruit = 1 medium apple, orange or pear

1 cup =



1/2 cup =



1/4 of plate =

Grains, rice or bread

1 fist = 1 serving of cereal flakes



1/4 of plate =

Meat, poultry or fish

A deck of cards = a portion of meat, poultry or fish



Know your serving sizes.



Limit screen time to 2 hours or less.

Screen time includes:

- Watching TV, videos or DVDs
- Playing or being on a computer
- Playing regular and hand-held video games
- Going to the movies
- Instant messaging or online chatting
- Using a cell phone

Try to avoid eating in front of a screen



Get at least 1 hour of physical activity each day.

Split your 1 hour into three 20-minute sessions.

It might be fun to try a different activity each time.

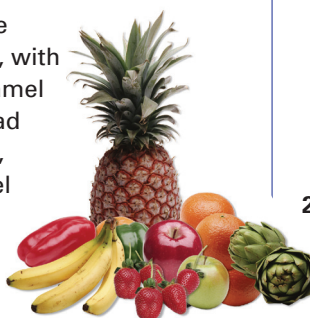
Limit sweetened drinks to 0.

Stay away from sugar-sweetened drinks like:

- Soda or pop
- Chocolate milk
- Energy drinks
- Café mochas

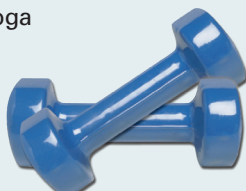




Challenge yourself, friends and family to eat better and live healthier.

Eat Something Fresh	It's Your Choice, Make it Healthy	Little tricks that have big effects
<p>1) Try adding fresh fruit or veggies to your meals.</p> <ul style="list-style-type: none"> • Eat a side salad, fruit slices or carrot sticks instead of fries, potato salad or onion rings • Eat fruit, like apple slices, with fat-free caramel sauce instead of a sundae, pastry, bagel or donut  <p>2) A snack can be healthy and tasty if you choose a fresh option.</p> <ul style="list-style-type: none"> • Eat a serving of fruit instead of a candy bar • Eat vegetable sticks instead of potato or tortilla chips <p>3) Be adventurous, try a new fruit or veggie from time to time.</p>	<p>1) Baked, grilled, steamed or roasted food options are better than fried options.</p> <ul style="list-style-type: none"> • Choose grilled or roasted chicken or fish instead of fried or crispy • Remove skin from chicken • Choose a favorite steamed or roasted vegetable instead of fried. For example, black beans instead of re-fried beans <p>2) Avoid creamy dressings and skip the croutons when you order salads.</p> <ul style="list-style-type: none"> • Ask for dressing on the side • Skip the croutons, crunchy strips or crunchy salad bowls <p>3) Choose fat-free or sugar-free food options when available.</p> 	<p>1) If you decide to treat yourself, just have half.</p> <ul style="list-style-type: none"> • Eat only half of a donut or pastry • Eat only half of a candy bar or the miniature version  <p>2) Watch your portion sizes; bigger is not necessarily better.</p> <ul style="list-style-type: none"> • Avoid piling food on your plate; maybe use a small dinner plate • Stop eating when you feel full • Restaurant portions can be larger than you need; order a small instead of a large size, share with a friend or save some to eat later <p>3) Don't treat yourself everyday; if you limit your treats, you'll enjoy them more.</p>

Increase your intensity!

Any activity is better than no activity. Set your goal to be active for one hour.

Low Intensity	Medium Intensity	High Intensity
<ul style="list-style-type: none"> • Wash the car • Do light weight training • Stretch or do yoga • Prepare a meal for your family and friends • Put on your headphones and clean your room • Carry your books between class 	<ul style="list-style-type: none"> • Walk your dog • Play sports such as softball and baseball • Ride a bike or jump rope • Do jumping jacks • Skateboard or inline skate • Ice skate, toboggan, sled • Use the stairs instead of the elevator or escalator 	<ul style="list-style-type: none"> • Run or jog • Do heavy weight training • Play soccer or basketball • Swim • Dance • Shovel the snow 

Use your screen time wisely.

Check out these websites for more information:

www.myfoodapedia.gov Tells you how many calories and servings are in the food you eat

www.mypyramidtracker.gov Lets you track your daily calorie intake and calorie burn

www.fruitsandveggiesmatter.gov Helps you eat the right amount of fruits and vegetables daily

www.presidentschallenge.org Lets you track your activity to see the difference that staying active can make in your life

WHAT IS A FAMILY MEDIA USE PLAN?

A Family Media Use Plan helps parents balance their children's online and off-line lives. Because every family is different, the American Academy of Pediatrics has a new tool to help you create a personalized plan that works within your family's values and busy lifestyles.



Younger Than 1½ to 2 Years

Avoid media use (except video chatting).

Preschoolers

No more than 1 hour per day of high-quality programming

Grade-schoolers & Teens

Don't let media displace other important activities.

- 1 hour of exercise daily
- Family meals
- A full night's sleep
- "Unplugged" downtime

All Ages

Co-view media with your kids (enjoy it with them) to help them learn from what they are doing, seeing, and saying online.

Be their media mentor!

Create your family's plan at HealthyChildren.org/MediaUsePlan.

By creating a Family Media Use Plan, parents can help children and teens balance their media use with other healthy activities.



Learn more and create a personalized Family Media Use Plan at HealthyChildren.org/MediaUsePlan.

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Beyond Screen Time: A Parent's Guide to Media Use

Media in all forms, including TV, computers, and smartphones, can affect how children and teens feel, learn, think, and behave. However, parents (you) are still the most important influence.

The American Academy of Pediatrics (AAP) encourages you to help your children develop healthy media use habits early on. Read on to learn more.

Media Use and Your Children

You can decide what media use is best for your family. Remember, all children and teens need adequate sleep (8–12 hours, depending on age), physical activity (1 hour), and time away from media. (See the “Media Use Guidelines” chart for general guidelines for media use based on age.)

Because children today are growing up in a time of highly personalized media use experiences, parents must develop personalized media use plans for their children. Media plans should take into account each child's age, health, personality, and developmental stage. Create a Family Media Use Plan online at HealthyChildren.org/MediaUsePlan. By creating a Family Media Use Plan, parents can help children and teens balance their media use with other healthy activities.

Why use digital media?

- Digital media use can
 - Expose users to new ideas and information.
 - Raise awareness of current events and issues.
 - Promote community participation.
 - Help students work with others on assignments and projects.
- Digital media use also has social benefits that
 - Allow families and friends to stay in touch, no matter where they live.
 - Enhance access to valuable support networks, especially for people with illnesses or disabilities.
 - Help promote wellness and healthy behaviors, such as how to quit smoking or how to eat healthy.

Why limit media use?

Overuse of digital media may place your children at risk of

- **Not enough sleep.** Children with more media exposure or who have a TV, computer, or mobile device in their bedroom sleep less and fall asleep later at night. Even babies can be overstimulated by screens and miss the sleep they need to grow. Exposure to light (particularly blue light) and stimulating content from screens can delay or disrupt sleep and have a negative effect on school.
- **Delays in learning and social skills.** Children who watch too much TV in infancy and preschool years can show delays in attention, thinking, language, and social skills. One of the reasons for the delays could be because they interact less with parents and family. Parents who keep the TV on or focus on their own digital media miss precious opportunities to interact with their children and help them learn. Children and teens often use entertainment media

at the same time they're doing other things, such as homework. Such multitasking can have a negative effect on school.

- **Obesity.** Watching TV for more than 1.5 hours daily is a risk factor for obesity for children 4 through 9 years of age. Teens who watch more than 5 hours of TV per day are 5 times more likely to have overweight than teens who watch 0 to 2 hours. Food advertising and snacking while watching TV can promote obesity. Also, children who overuse media are less apt to be active with healthy, physical play.
- **Behavior problems.** Violent content on TV and screens can contribute to behavior problems in children, either because they are scared and confused by what they see or they try to mimic on-screen characters.
- **Problematic Internet use.** Children who overuse online media can be at risk for problematic Internet use. Heavy video gamers are at risk for Internet gaming disorder. They spend most of their free time online and show less interest in off-line or real-life relationships. There may be increased risks for depression at both the high and low ends of Internet use.
- **Risky behaviors.** Teens' displays on social media often show risky behaviors, such as substance use, sexual behaviors, self-injury, or eating disorders. Exposure of teens through media to alcohol, tobacco use, or sexual behaviors is associated with earlier initiation of these behaviors.
- **Sexing, loss of privacy, and predators.** Sexting is sending nude or seminude images, as well as sexually explicit text messages, using a cell phone. About 12% of youth 10 to 19 years of age have sent a sexual photo to someone else. Teens need to know that once content is shared with others, they may not be able to delete or remove it completely. They may also not know about or choose not to use privacy settings. Another risk is that sex offenders may use social networking, chat rooms, e-mail, and online games to contact and exploit children.
- **Cyberbullying.** Children and teens online can be victims of cyberbullying. Cyberbullying can lead to short- and long-term negative social, academic, and health issues for both the bully and target. Fortunately, programs to help prevent bullying may reduce cyberbullying.

More Media Use Tips for Parents, Families, and Caregivers

- Do not feel pressured to introduce technology early. Media interfaces are intuitive, and children can learn quickly.
- Find out what type of and how much media are used and what media behaviors are appropriate for each child—and for you. Place consistent limits on hours of media use as well as types of media used.
- Select and co-view media with your child so your child can use media to learn, be creative, and share these experiences with your family.
- Check your children's media use for their health and safety.

Media Use Guidelines

Age	Description	Tips
Younger than 2 years	<p>Children younger than 2 learn and grow when they explore the physical world around them. Their minds learn best when they interact and play with parents, siblings, caregivers, and other children and adults.</p> <p>Children younger than 2 have a hard time understanding what they see on screen media and how it relates to the world around them.</p> <p>However, children 18–24 months of age can learn from high-quality educational media, IF their parents play or view with them and reteach the lessons.</p>	<ul style="list-style-type: none"> • Media use should be very limited and only when an adult is standing by to co-view, talk, and teach (for example, video chatting with family along with parents). • For children 18–24 months, if you want to introduce digital media, <ul style="list-style-type: none"> ◦ Choose high-quality programming. ◦ Use media together with your child. ◦ Avoid solo media use.
2–5 years of age	<p>At 2 years of age, many children can understand and learn words from live video chatting. Young children can listen to or join a conversation with their parents.</p> <p>Children 3–5 years of age have more mature minds, so a well-designed educational program such as Sesame Street (in moderation) can help children learn social, language, and reading skills.</p>	<ul style="list-style-type: none"> • Limit screen use to no more than 1 hour per day. • Find other activities for your children to do that are healthy for their bodies and minds. • Choose media that is interactive, nonviolent, educational, and pro-social. • Co-view or co-play with your children.
5 years and older	<p>Today's grade-schoolers and teens are growing up immersed in digital media. They may even have their own mobile device and other devices to access digital media.</p>	<ul style="list-style-type: none"> • Make sure media use is not displacing other important activities, such as sleep, family time, and exercise. • Check your children's media use for their health and safety.
Tweens and teens	<p>Tweens and teens are more likely to have some independence in what they choose and watch, and they may be consuming media without parental oversight.</p>	<ul style="list-style-type: none"> • Parents should engage tweens and teens in conversations about their media use, digital citizenship, what they've seen or read, who they are communicating with, and what they have learned from their media use.

See *More Media Use Tips for Parents, Families, and Caregivers*. Also, create a Family Media Use Plan online at HealthyChildren.org/MediaUsePlan. A Family Media Use Plan is useful to set consistent expectations and limits on media use for parents, children, and teens.

- Stop use of devices or screens for 1 hour before bedtime. Do not let your children sleep with devices such as smartphones.
- Discourage entertainment media while doing homework.
- Plan media-free times together, such as family dinners.
- Decide on media-free, unplugged locations in homes, such as bedrooms.
- Engage in family activities that promote well-being, such as sports, reading, and talking with each other.
- Set a good example. Turn off the TV and put your smartphone on “do not disturb” during media-free times with your family.
- Use sites like Common Sense Media (www.commonsensemedia.org) to help you decide if movies, TV shows, apps, and video games are age and content appropriate for your children and your family values.
- Share your family media rules with caregivers or grandparents to help ensure rules are consistent.
- Talk with your children and teens about online citizenship and safety. This includes treating others with respect online, avoiding cyberbullying and sexting, being wary of online solicitations, and safeguarding privacy.
- Remember that your opinion counts. TV, video games, and other media producers, airers, and sponsors pay attention to the views of the public. For more information from the Federal Communications Commission (FCC), visit <http://reboot.fcc.gov/parents>.
- Encourage your school and community to advocate for better media programs and healthier habits. For example, organize a Screen-Free Week in your town with other parents, teachers, and neighbors.

From Your Doctor

The American Academy of Pediatrics (AAP) is an organization of 67,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults.

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BULLYING: IT'S NOT OK

Bullying is when one child picks on another child again and again. Usually children who are being bullied are either weaker or smaller, as well as shy, and generally feel helpless. Some children and youth are at higher risk of being bullied, such as those with disabilities or other special health care needs and those who are lesbian, gay, bisexual, or transgender.

Bullying occurs when there is an imbalance of power. Sometimes children argue with each other or make bad choices in their behavior, which is not bullying.

Cyberbullying occurs electronically, using things like social media sites, texting, chat rooms, or instant messaging. Cyberbullying can happen any time—day or night—and is visible to many more people than traditional bullying. It's very hard to undo or hide what the child who is cyberbullying has done.

FACTS ABOUT BULLYING

- Both girls and boys can be bullies.
- A child can be both the bully and the victim.
- Bullies target children who cry, get mad, or easily give in to them.
- There are 3 types of bullying.
 - Physical—hitting, kicking, pushing, choking, punching
 - Verbal—threatening, taunting, teasing, hate speech (This can also include electronic messaging)
 - Social—excluding victims from activities or starting rumors about them



- Bullying happens
 - At school, when teachers are not there to see what is going on
 - When adults are not watching—going to and from school, on the playground, or in the neighborhood
 - Through electronic methods, such as social networks, texting, and instant messaging

Common characteristics of bullies and victims (from www.StopBullying.gov)

Generally, children who are bullied have one or more of the following risk factors:

- Are seen as different from their peers, such as being overweight or underweight, wearing glasses or different clothing, being new to a school, or not having what kids consider “cool”
- Are seen as weak or unable to defend themselves

- Are less popular than others and have few friends
- Do not get along well with others, are seen as annoying or provoking, or provoke others for attention

Those who bully others do not need to be stronger or bigger than those they bully. Often, these students require support to change their behavior and address other challenges that may be influencing their behavior. Children who bully may have more than one of the following characteristics:

- Are aggressive or easily frustrated
- Have less parental involvement
- Have issues at home
- Think badly of others
- Have difficulty following rules
- View violence in a positive way
- Have friends who bully others

EFFECTS OF BULLYING

Children who experience any kind of bullying—including cyberbullying—can experience long-term effects, even into adulthood. Bullying can have consequences for both the bully and the victim, who

- Have a higher risk of substance use
- Are more likely to skip or drop out of school
- Can have health complications
- Have poor school performance
- Experience depression or other mental health challenges

TALK WITH YOUR CHILD ABOUT BULLYING

Even if you don't think your child is bullied, a bully, or a bystander, you will be helping protect your child just by asking these questions.

- How are things going at school?
- What do you think of other kids in your class?
- Does anyone get picked on or bullied?
- What is lunchtime like? (or recess)
- Is anyone texting, tweeting, or posting mean things on social networks?

HELP YOUR CHILD RESIST BULLYING

You cannot always help your child avoid all bullying, but you can help him build coping skills to deal with difficult situations. Spend time with your child, show him love and encouragement, and model good behavior toward others. Talk through difficult situations with your child so he knows he can trust you with his problems.

WHEN YOUR CHILD IS BULLIED

It can be upsetting to find out your child has been bullied. Let her know you are there for her, willing to listen, and taking action to make sure it doesn't continue. Here are some things you can do.

- *Help your child learn how to respond.* For example, "Let's talk about what you can do and say if this happens again."
- Teach your child how to.
 - Look the bully in the eye.
 - Stand tall and stay calm.
 - Walk away.
 - Not respond to electronic messages and cut off communications with those who are sending unwanted messages.
 - Show bullying texts, posts, or e-mails to a parent or other trusted adult.

- Teach your child how to say in a firm voice.
 - “I don’t like what you are doing.”
 - “Please do not talk to me like that.”
 - “Why would you say that?”

For many children, these skills do not come naturally. It is like learning a new language—lots of practice is needed. Practice so, in the heat of the moment, these skills will come to your child naturally.

- **Teach your child when and how to ask for help.** Your child should not be afraid to ask an adult for help when bullying happens. Since some children are embarrassed about being bullied, parents need to let their children know being bullied is not their fault.
- **Encourage your child to make friends with other children.** There are many adult-supervised groups, in and out of school, that your child can join. Invite your child’s friends over to your home.
- **Support activities that interest your child.** By participating in activities such as team sports, music groups, or social clubs, your child will develop new abilities and social skills. When children feel good about how they relate to others, they are less likely to be picked on.
- **Alert school officials to the problems, and work with them on solutions.** Since bullying often happens outside the classroom, talk with the principal, guidance counselor, or playground monitors, as well as your child’s teachers. Write down and report all bullying, including cyberbullying, to your child’s school. By knowing when and where the bullying occurs, you and your child can better plan what to do if it happens again.

WHEN YOUR CHILD IS THE BULLY

No parents want to think their child would bully another child, but it does happen and parents must be ready to respond. If you know your child is bullying someone, take it very seriously.

Now is the time when you can change your child’s behavior.

In the long run, bullies continue to have problems. These often get worse. If the bullying behavior is allowed to continue, these children often become adults who are much less successful in their work and family lives and may even get in trouble with the law.

- Help your child understand what bullying is and why it is a problem. Help your child understand how bullying hurts other children. Give real examples of the good and bad results of your child’s actions.
- Set firm and consistent limits on your child’s aggressive or hurtful behavior. Be sure your child knows that bullying is never OK.
- Be a positive role model. Children need to develop new and constructive ways for getting what they want. All children can learn to treat others with respect.
- Use effective, nonphysical discipline, such as loss of privileges. When your child needs discipline, explain why the behavior was wrong and how your child can change it.
- Find positive ways to stop bullying with the school principal, teachers, counselors, and parents of the children your child has bullied.
- Supervise your child and help develop individual skills and interests. Children with too much “time on their hands” are more likely to find themselves in bad situations.

- Supervise their time online, and monitor what sites they are visiting. Require them to friend you on social media sites and share their passwords with you.
- Ask for help. If you find it difficult to change the behavior, reach out to a professional, like a teacher, counselor, or your child's pediatrician.

It is important for everyone in the community to work together to build a safe environment for all children. Partner with your child's pediatrician, school district, and local community leaders to create anti-bullying messages and policies. Find more information at StopBullying.gov.

WHEN YOUR CHILD IS A BYSTANDER (with additions from StopBullying.gov):

Most children are neither bullied nor bullies—they just watch. There are things your child can do to help stop bullying.

- Don't give bullying an audience. Often, those who bully are encouraged by the attention they receive from bystanders. Children can help stop bullying by actively not supporting it.
- Set a good example.
- Help the child who is bullied get away.
- Tell a trusted adult. Talking with an adult is not tattling. Standing up for another child by getting help is an act of courage and safety. To make it easier, suggest taking a friend.
- Be a friend. Children can help someone who's been bullied by simply being nice to him. Being friendly can go a long way toward letting him know that he's not alone.

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The persons whose photographs are depicted in this publication are professional models. They have no relation to the issues discussed. Any characters they are portraying are fictional.

Listing of resources does not imply an endorsement by the American Academy of Pediatrics (AAP). The AAP is not responsible for the content of external resources. Information was current at the time of publication.

The American Academy of Pediatrics is an organization of 66,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of infants, children, adolescents, and young adults.

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Social Media Tips for Kids and Teens

Link: <https://health.choc.org/handout/social-media-tips-for-kids-and-teens/>

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Social media can be a fun but dangerous place. To protect yourself from being exploited, bullied, disrespected or tricked, it is important to follow some important rules for social media safety.

Follow the rules

Be honest with your parents about the apps you download and the content you access. Adults can help protect you from predators and from content that might be inappropriate or dangerous.

Think before you post

Do not post or share messages, pictures or videos that you would not want the world to see. You cannot control how information is shared by those who see it, even if you post it privately or later delete it. Remember that can never permanently erase something that has been published on the internet. You could face consequences later on in school, college interviews or job applications, for example.

Be aware of your privacy settings

Make sure you know who can see what you post. The safest choice is usually to allow only your friends to see what you post. Always disable location services. Although it can be fun to let your friends know where you are, this also allows people with bad intentions to know how to reach you. Never share your passwords with anyone other than your parents.

Be cautious of requests by strangers

Play it safe and only accept friend requests from your real-world friends. Do not agree to meet strangers offline, and never give away your phone number or address.

Be kind

Remember that online communication does not allow you to tell how others are feeling, as you cannot see their facial expressions or hear their voice. Make sure that what you write cannot be misinterpreted. Be respectful of others' posts, even if you don't agree with them. If you wouldn't say something to someone's face, don't say it online.

If you are being cyberbullied, reach out

Tell an adult you trust, such as a parent, teacher or school counselor, if you or anyone you know is being cyberbullied. Do not delete any communications. Save all screenshots and emails so you can show an adult. Block the person who is harassing you and make copies of all communications if needed.

Avoid overusing social media

It's easy to get "sucked in" on social media and spend much more time than you intended to on it. But when people spend a lot of time on social media, they are at a higher risk of experiencing negative consequences, such as disrupted sleep and what researchers call "Facebook depression" (low self-esteem associated with comparing self with others who are thought to be "better off"). Spend quality time offline as well. Setting a timer or a time limit on your phone's settings for social media apps can be helpful.

Crisis Resources

If your child expresses thoughts of wanting to harm themselves or others, call **9-1-1** or visit the nearest emergency department.

988 Suicide and Crisis Lifeline:

Call 9-8-8

Text any message to 9-8-8

Chat online at 988lifeline.org/chat

Crisis Text Line:

Text "HOME" to 741741

External Resources

American Psychological Association

Promoting healthy technology use for children (<https://www.apa.org/helpcenter/digital-guidelines>)

Child Mind Institute

Media Guidelines for Kids of All Ages (<https://childmind.org/article/media-guidelines-for-kids-of-all-ages/>)

Healthychildren.org

Family media plan and media time calculator (<https://www.healthychildren.org/English/media/Pages/default.aspx>)

Healthychildren.org

Dangerous internet challenges (<https://www.healthychildren.org/English/family-life/Media/Pages/Dangerous-Internet-Challenges.aspx>)

The New York Times

How to use TikTok's parental controls

(<https://www.nytimes.com/interactive/2022/10/26/technology/personaltech/tiktok-parental-controls.html>)

YouTube

Parent resources for YouTube (https://www.youtube.com/intl/ALL_us/kids/parent-resources/)

Facebook

Safety resources for parents (<https://www.facebook.com/help/1079477105456277>)

Instagram

Parental guide for teens on Instagram (<https://about.instagram.com/community/parents>)

Learn more about CHOC's pediatric mental health services

At CHOC, we specialize in providing a full spectrum of pediatric mental healthcare, including inpatient, intensive outpatient and outpatient program services.

Get resources (<https://www.choc.org/programs-services/mental-health/>)

Get 24/7 advice from CHOC

✓ **The guidance on this page has been clinically reviewed by CHOC pediatric experts.**

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For more health information for your family visit health.choc.org



Encourage Your Child to Be Physically Active



Today's youth are less active and more overweight than any previous generation.

Did you know?

- Children on average spend nearly 3 hours a day watching TV.
- Only half of children and teens, aged 12 to 21, regularly exercise.
- Illinois is the only state that still mandates that physical education be offered in public schools.
- More than 15% of all school children are considered obese or overweight.
- Overweight teens have a 70% chance of becoming overweight or obese adults.
- Eighty-five percent of children diagnosed with type 2 diabetes are either overweight or obese.
- Sleep apnea occurs in approximately 7% of children who are obese.

Get the entire family moving

With participation in all types of physical activity declining dramatically as a child's age and grade in school increases, it is important that physical activity be a regular part of family life. Studies have shown that lifestyles learned as children are much more likely to stay with a person into adulthood. If sports and physical activities are a family priority, they will provide children and parents with a strong foundation for a lifetime of health.

The benefits of physical activity

While exercise is vital to the health and well-being of children, many of them either do not appreciate or fully understand the many emotional and physical health benefits of physical activity.

The benefits of physical activity include

Benefits to the body

- Builds and maintains healthy bones, muscles, and joints.
- Controls weight and body fat.
- Improves appearance.
- Increases muscle strength, endurance, and flexibility.
- Improves ability to fall asleep quickly and sleep well.
- Reduces the risk of diabetes, high blood pressure, and heart disease later in life.
- Builds and improves athletic skills.

Mental benefits

- Increases enthusiasm and optimism.
- Organized sports foster teamwork and friendship.
- Boosts self-esteem.
- Reduces anxiety, tension, and depression.

Getting started

Parents can play a key role in helping their child become more physically active.

Following are 11 ways to get started:

1. **Talk to your pediatrician.** Your pediatrician can help your child understand why physical activity is important. Your pediatrician also can suggest a sport or activity that is best for your child.
2. **Find a fun activity.** Help your child find a sport that she enjoys. The more she enjoys the activity, the more likely it is that she will continue. Get the entire family involved. It is a great way to spend time together.
3. **Choose an activity that is developmentally appropriate.** For example, a 7- or 8- year-old child is not ready for weight lifting or a 3-mile run, but soccer, bicycle riding, and swimming are all appropriate activities.
4. **Plan ahead.** Make sure your child has a convenient time and place to exercise.
5. **Provide a safe environment.** Make sure your child's equipment and chosen site for the sport or activity are safe. Make sure your child's clothing is comfortable and appropriate.
6. **Provide active toys.** Young children especially need easy access to balls, jump ropes, and other active toys.
7. **Be a model for your child.** Children who regularly see their parents enjoying sports and physical activity are more likely to do so themselves.
8. **Play with your child.** Help her learn a new sport.
9. **Turn off the TV.** Limit television watching and computer use. The American Academy of Pediatrics recommends no more than 1 to 2 hours of total screen time, including TV, videos, and computers and video games, each day. Use the free time for more physical activities.

- 10. Make time for exercise.** Some children are so overscheduled with homework, music lessons, and other planned activities that they do not have time for exercise.
- 11. Do not overdo it.** When your child is ready to start, remember to tell her to listen to her body. Exercise and physical activity should not hurt. If this occurs, your child should slow down or try a less vigorous activity. As with any activity, it is important not to overdo it. If your child's weight drops below an average, acceptable level, or if exercise starts to interfere with school or other activities, talk with your pediatrician.

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From your doctor

Remember

There is a powerful relationship between childhood obesity and lifelong weight and related medical problems.

Exercise along with a balanced diet provides the foundation for a healthy, active life. One of the most important things parents can do is encourage healthy habits in their children early on in life. It is not too late to start. Ask your pediatrician about tools for healthy living today.





Illustration by
Billy Nuñez, age 16

DRUG ABUSE PREVENTION STARTS WITH PARENTS

PREVENTION STARTS WITH PARENTS

As a parent, you have a major impact on your child's decision not to use tobacco, alcohol, and drugs.

- Prevention starts when you start talking with, and listening to, your child.
- Help your child make good choices and good friends.
- Teach your child different ways to say "No!"

Drugs, including tobacco and alcohol, are easily available to children and adolescents. As a parent, you have a **major impact** on your child's decision **not** to use drugs.

Most likely, children in grade school have not begun to use alcohol, tobacco, or any other kind of drug. That is why grade school is a good time to start talking about the dangers of drug use. Prepare your child for a time when drugs may be offered.

Drug abuse prevention starts with parents learning how to talk with their children about **difficult topics**. Then, the programs offered by school, sports, and other groups can support what you have started.

PARENTS ARE POWERFUL

Parents are the strongest influence that children have. There is no guarantee that your child won't use drugs, but drug use is much less likely to happen if you:

- Provide guidance and clear rules about not using drugs.
- Spend time with your child.
- Do not use tobacco or other drugs yourself.

If you do drink, do so in moderation, and never drive after drinking.

What messages do your actions and words send to your child?

Children notice how parents use alcohol, tobacco, and drugs at home, in their social life, and in other relationships. This includes how parents deal with strong feelings, emotions, stress, and even minor aches and pains.

Having a designated driver sends a very important message to children—safety and responsibility.

Actions speak louder than words. Children really do notice what their parents say and do.

PREVENTION STARTS WHEN YOU START TALKING— AND LISTENING

Talk honestly with your child about healthy choices and risky behaviors. Listen to what your child has to say. Make talking and listening a habit, the earlier the better!



Learn the facts about the harmful effects of drugs.

Talk with your child about the negative effects alcohol and drugs would have on their brains and bodies and their ability to learn or play sports. Ask your pediatrician about the other dangers of drug use.

As part of your regular safety conversations, talk about avoiding tobacco, alcohol, and drug use.

Be clear and consistent about family rules.

It does not matter what other families decide; your family rules show your family values.

Correct any wrong beliefs your child may have.

- “Everybody drinks.”
- “Marijuana won’t hurt you.”

Avoid TV programs, movies, and video games that glamorize tobacco, alcohol, and drugs.

Since it’s hard to escape the messages found in music and advertising, discuss with your child the influence these messages have on us.

Find time to do things together.

Eating together as a family is a good time to talk and learn about what’s going on.



MAKING SMART CHOICES

It’s a parent’s job to use love and experience to correct mistakes and poor choices.

By using a mix of praise and criticism, you can correct your child’s behavior without saying your child is bad. This helps children build self-confidence and learn how to make healthy and safe choices. In time, making smart choices on their own will become easier.

**Let children know you care about them.
Talk with them about being safe.**

HELP YOUR CHILD MAKE GOOD CHOICES AND FRIENDSHIPS

A good sense of self-worth and knowing what is right and wrong will help your child say “No!” to drugs and other risky behaviors. Help your child by

- Noticing efforts as well as successes.
- Praising for things done well and for making good choices.

Encourage positive friendships and interests.

- Check to see that the friends and neighbors your child spends time with are safe and have values similar to yours.
- Find ways to get your child involved in sports, hobbies, school clubs, and other activities. These usually are positive interactions that help develop character and lead to good peer relationships.
- Look for activities that you and your child or the entire family can do together.

Help your child learn the importance of being a responsible individual and what it means to be a real friend.

Children need to learn that doing something they know is wrong is not a good way to “fit in” or feel accepted by others.

Remind your child that **real friends do not:**

- Ask friends to do risky things like use alcohol, tobacco, or drugs.
- Reject friends when they don’t want to do something that they know is wrong.

Good communication between you and your child is one of the best ways to prevent drug use. If talking with your child becomes a problem, ask your pediatrician for help.



HELP YOUR CHILD LEARN DIFFERENT WAYS TO SAY “NO!”

Teach your child how to respond to someone offering drugs. It is much easier to say “No!” when prepared ahead of time.

It helps if you role play and practice. This way, it becomes natural to do at least one of the following:

- Firmly say, “No!”
- Give a reason—“No thanks, I’m not into that.” or “No, my parents would get really mad at me.”
- Suggest something else to do, like watch a movie or play a game.
- Leave—go home, go to class, go join other friends.

Connected Kids are Safe, Strong, and Secure

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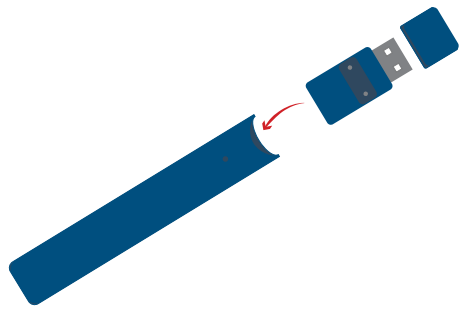
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American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™



What Every TEEN SHOULD KNOW ABOUT VAPING & How it Affects Your Life

MYTHS BUSTED

It's just NOT water vapor:

Vaping can **expose you to harmful chemicals** like diacetyl, formeldahyde and metal particles like nickel, lead and tin **which can harm:**



lungs



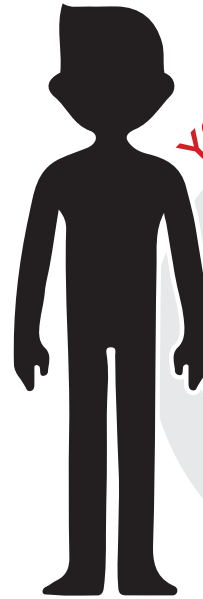
brain



heart



immune system



YOU ARE THE TARGET

4 out of 5 youth are exposed to at least one vaping advertisement

Over 15,000 flavors of e-juice

Discrete and colorful

Celebrities in advertisements

Vape pens do not need nicotine to be toxic. Diacetyl, known to be used by vaping companies for flavoring e-juice, has been **linked to a lung disease** called popcorn lung.

GET THE FACTS

addiction



Vaping can deliver a **high dose of nicotine** which can lead to addiction.

- One **JUUL** pod is = to **1 pack of cigarettes**
- Vaping can **increase** your risk of **cigarette use** by **8x**
- Vaping **increases** your risk of other **substance use**

local trends

(Data collected from the Muskegon MIPHY survey.)



Percentage of teen vapor use



Why I choose not to vape!

- "I get to stay on my **sports team.**"
- "I can use my money to **buy AirPods** instead."
- "I **won't get a fine** or have a record."

VACCINE INFORMATION STATEMENT

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, life-threatening 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, 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, 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.



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

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.



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 years 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



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

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.

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.*

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



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, life-threatening 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 www.cdc.gov/vaccines.



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, life-threatening 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.



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

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?

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