



# BRIGHT FUTURES HANDOUT ► PARENT

## 5 AND 6 YEAR VISITS

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



### HOW YOUR FAMILY IS DOING

- Spend time with your child. Hug and praise him.
- Help your child do things for himself.
- Help your child deal with conflict.
- 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.
- Don't smoke or use e-cigarettes. Keep your home and car smoke-free. Tobacco-free spaces keep children healthy.
- Don't use alcohol or drugs. If you're worried about a family member's use, let us know, or reach out to local or online resources that can help.



### FAMILY RULES AND ROUTINES

- Family routines create a sense of safety and security for your child.
- Teach your child what is right and what is wrong.
- Give your child chores to do and expect them to be done.
- Use discipline to teach, not to punish.
- Help your child deal with anger. Be a role model.
- Teach your child to walk away when she is angry and do something else to calm down, such as playing or reading.



### STAYING HEALTHY

- Help your child brush his teeth twice a day
  - After breakfast
  - Before bed
- Use a pea-sized amount of toothpaste with fluoride.
- Help your child floss his teeth once a day.
- Your child should visit the dentist at least twice a year.
- Help your child be a healthy eater by
  - Providing healthy foods, such as vegetables, fruits, lean protein, and whole grains
  - Eating together as a family
  - Being a role model in what you eat
- Buy fat-free milk and low-fat dairy foods. Encourage 2 to 3 servings each day.
- Limit candy, soft drinks, juice, and sugary foods.
- Make sure your child is active for 1 hour or more daily.
- Don't put a TV in your child's bedroom.
- Consider making a family media plan. It helps you make rules for media use and balance screen time with other activities, including exercise.



### READY FOR SCHOOL

- Talk to your child about school.
- Read books with your child about starting school.
- Take your child to see the school and meet the teacher.
- Help your child get ready to learn. Feed her a healthy breakfast and give her regular bedtimes so she gets at least 10 to 11 hours of sleep.
- Make sure your child goes to a safe place after school.
- If your child has disabilities or special health care needs, be active in the Individualized Education Program process.

**Helpful Resources:** Family Media Use Plan: [www.healthychildren.org/MediaUsePlan](http://www.healthychildren.org/MediaUsePlan)

Smoking Quit Line: 800-784-8669 | Information About Car Safety Seats: [www.safercar.gov/parents](http://www.safercar.gov/parents) | Toll-free Auto Safety Hotline: 888-327-4236

# 5 AND 6 YEAR VISITS—PARENT

## ✓ SAFETY

- Your child should always ride in the back seat (until at least 13 years of age) and use a forward-facing car safety seat or belt-positioning booster seat.
- Teach your child how to safely cross the street and ride the school bus. Children are not ready to cross the street alone until 10 years or older.
- Provide a properly fitting helmet and safety gear for riding scooters, biking, skating, in-line skating, skiing, snowboarding, and horseback riding.
- Make sure your child learns to swim. Never let your child swim alone.
- Use a hat, sun protection clothing, and sunscreen with SPF of 15 or higher on his exposed skin. Limit time outside when the sun is strongest (11:00 am–3:00 pm).
- Teach your child about how to be safe with other adults.
  - No adult should ask a child to keep secrets from parents.
  - No adult should ask to see a child's private parts.
  - No adult should ask a child for help with the adult's own private parts.
- Have working smoke and carbon monoxide alarms on every floor. Test them every month and change the batteries every year. Make a family escape plan in case of fire in your home.
- If it is necessary to keep a gun in your home, store it unloaded and locked with the ammunition locked separately from the gun.
- Ask if there are guns in homes where your child plays. If so, make sure they are stored safely.

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

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

American Academy of Pediatrics

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The information contained in this handout should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances. Original handout included as part of the *Bright Futures Tool and Resource Kit*, 2nd Edition.

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# Screen Time Guidelines by Age

*As recommended by the American Academy of Pediatrics*

## Under 18 months old

No screen time outside of video chatting with Grandma, etc.

## Toddlers (18 months-24 months)

### Little to no screen time recommended

- This is a critical developmental period for them, so encourage as much physical and creative interaction with people as possible.
- If they do get screen time, co-watch high-quality educational content with them to help them understand what they are seeing, and limit total exposure to < 1 hour. (Content offered by [Sesame Workshop](#) and [PBS Kids](#) is great)

## Preschoolers (3-5)

### Up to 1 hour per day is fine

- Try to plan TV-time in advance – resist the temptation to use them as a calming or distracting device.
- Children at this age can have mindful interaction with characters, so help them understand what they are seeing and apply it to the world around them!
- Many types of screen media content have print or other versions – try finding books or toys that can enable your child to interact with favorite characters off-screen. It makes for another way to engage your kids in creative play!

## Elementary School Aged (6-10)

### Up to 1 to 1.5 hours per day

- Place consistent limits on time spent using media, and the types of media being consumed.
- Since they are now entering school, make sure screens don't become a habit before homework gets completed.
- While developing tech skills is important, try to aim for a balance of creative and laid-back time.
- As they grow, parents can gradually give kids more control and choice in how they manage their time.
- Make sure media does not take the place of adequate sleep, physical activity and other behaviors essential to health.

## Middle School Aged (11-13)

### Up to 2 hours per day

- At this age, children can understand the concept of balance. It is up to parents to help them see how screen time fits into their schedule.
- If you find your child getting really into a certain video game for a week or two, gently try to help them understand the benefits of moderation.
- Help your children understand that recognizing when we are spending too much time doing any one thing is a valuable life skill.



## 6 YEARS

### Safety for Your Child

Did you know that injuries are the greatest threat to the life and health of your child? Injuries are the leading cause of death of school-aged children. **Yet you can prevent most major injuries!**

At age 6, your child will become more independent. He or she will be able to do more things that are dangerous. Your child will try to prove that he or she is grown up. But children still aren't good at judging sound, distance, or the speed of a moving car at this age. Your child can learn a few simple things to do for protection, but **you must still be in charge of his or her safety.**

#### Fire Safety

**Make an escape plan** in case of fire in your home. Your fire department can tell you how. Teach your child what to do when the smoke alarm rings. Practice what you and your child would do if you had a fire.

Do not smoke in your home. Many home fires are caused by a lit cigarette that has not been put out completely.

Install smoke alarms on every level in your house, especially in furnace and sleeping areas, and test the alarms every month. It is best to use smoke alarms that use long-life batteries, but if you do not, change the batteries once a year.



#### Firearm Hazards

Children in homes where guns are present are in more danger of being shot by themselves, their friends, or family members than of being injured by an intruder. Even if your child is taught never to touch a gun, if there is a gun in the house a child's curiosity can lead to severe injury or death. It is best to keep all guns out of the home. **Handguns are especially dangerous.** If you keep a gun, keep it unloaded and in a locked place, with the ammunition locked separately. Ask if the homes where your child visits or is cared for have guns and how they are stored.



#### Bike Safety

Protect your child from bad head injuries or even death. **Make sure your child wears a properly fitted, approved helmet every time he or she rides a bike.** Never let your child ride in the street. Your child is too young to ride in the street safely!



#### Street Safety

Never let your child play near the street. Your child may dart out into traffic without thinking. The park or playground is the best place to play. Begin to teach your child safe street habits. **Teach your child to stop at the curb,** then look to the left, to the right, and back to the left again. Teach your child never to cross the street without a grown-up.



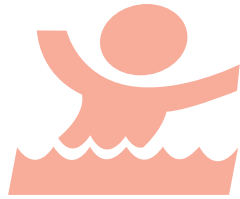
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## Water Safety

Now is the time to teach your child to swim. Even if your child knows how to swim, **never let him or her swim alone.** Teach your child how to turn upright, float, tread water, and get to safety.

Do not let your child play around any water (lake, stream, pool, or ocean) unless an adult is watching. The adult must be supervising closely and continuously without distractions like reading or using a phone. *Never* let your child swim in canals or any fast-moving water.

Teach your child to never dive into water unless an adult has checked the depth of the water. **And when your child is on any boat, be sure your child is wearing a Coast Guard-certified life jacket.**



## And Remember Car Safety

Your child must use a **car safety seat or booster seat** in the car. Always check to be sure he or she is correctly buckled up before you start the car. Your child should use a car safety seat until he or she reaches the manufacturer's height or weight limit, then a booster seat until the lap belt can be worn low and flat on the hips and the shoulder belt lies across the middle of the chest and the shoulder rather than the face or neck (usually at about 4 feet 9 inches tall and between 8 and 12 years of age). The safest place for all children, even through school age, is in the back seat of the car. Set a good example.

**Make sure you and other adults buckle up too!**



From Your Doctor

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# TIPS | for parents of First Graders

Give your child lots of opportunities to read aloud. Inspire your young reader to practice every day! The tips below offer some fun ways you can help your child become a happy and confident reader. Try a new tip each week. See what works best for your child.

■ **Don't leave home without it.**

Bring along a book or magazine any time your child has to wait, such as at a doctor's office. Always try to fit in reading!

■ **Once is not enough.**

Encourage your child to re-read favorite books and poems. Re-reading helps kids read more quickly and accurately.

■ **Dig deeper into the story.**

Ask your child questions about the story you've just read. Say something like, "Why do you think Clifford did that?"

■ **Take control of the television.**

It's difficult for reading to compete with TV and video games. Encourage reading as a free-time activity.

■ **Be patient.**

When your child is trying to sound out an unfamiliar word, give him or her time to do so. Remind your child to look closely at the first letter or letters of the word.

■ **Pick books that are at the right level.**

Help your child pick books that are not too difficult. The aim is to give your child lots of successful reading experiences.

■ **Play word games.**

Have your child sound out the word as you change it from *mat* to *fat* to *sat*; from *sat* to *sag* to *sap*; and from *sap* to *sip*.

■ **I read to you, you read to me.**

Take turns reading aloud at bedtime. Kids enjoy this special time with their parents.

■ **Gently correct your young reader.**

When your child makes a mistake, gently point out the letters he or she overlooked or read incorrectly. Many beginning readers will guess wildly at a word based on its first letter.

■ **Talk, talk, talk!**

Talk with your child every day about school and things going on around the house. Sprinkle some interesting words into the conversation, and build on words you've talked about in the past.

■ **Write, write, write!**

Ask your child to help you write out the grocery list, a thank you note to Grandma, or to keep a journal of special things that happen at home. When writing, encourage your child to use the letter and sound patterns he or she is learning at school.

Visit [www.ReadingRockets.org](http://www.ReadingRockets.org) for more information on how you can launch a child into a bright future through reading.



## Safe Bicycling Starts Early

When a child receives his or her first tricycle or bicycle, a lifelong pattern of vehicle operation is begun. A bike is not just a toy, but a vehicle that is a speedy means of transportation, subject to the same laws as motor vehicles.

### Training Children in Proper Use of Their Bicycles

1. Parents should set limits on where children may ride, depending on their age and maturity. Most serious injuries occur when the bicyclist is hit by a motor vehicle.
  - a. Young children should ride only with adult supervision and off the street.
  - b. The decision to allow older children to ride in the street should depend on traffic patterns, individual maturity, and an adequate knowledge and ability to follow the “Rules of the Road.”
2. Children must be provided with helmets (approved by the Consumer Product Safety Commission [CPSC]) and taught to wear them properly on every ride, starting when they get their first bike or tricycle.
3. The most important “Rules of the Road” for them to learn are
  - a. Ride with traffic.
  - b. Stop and look both ways before entering the street.
  - c. Stop at all intersections, marked and unmarked.
  - d. Before turning, use hand signals and look all ways.
4. Children should never ride at dusk or in the dark. This is extremely risky for children and adults. Your child should be told to call home for a ride rather than ride a bike.
5. Children should receive training in bicycle riding, including “Rules of the Road,” and should have their privilege with the bike withheld if they ignore safety rules or don’t wear a helmet.
6. Children should learn how to keep their bikes in good repair, with parents checking the tires, brakes, and seat and handlebar height annually.

From Your Doctor

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**Dear Parent:**

Your child is old enough to start learning how to prevent injuries. The games below are designed to help him or her think about safety. Read the messages with your child and talk about them. Then take this safety sheet home and post it where everyone can see it.

It takes time to form a safety habit. Remind each other about these safety messages. Make safety a big part of your lives.



**Bike Safety**

Always wear a



when you ride your



Get the Helmet Habit!

E	H	T	E	M	L	E	H
H	E	L	E	M	H	E	T
E	L	E	H	M	E	T	M
T	M	M	T	H	L	E	L
E	E	H	E	L	M	E	T
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H	E	L	H	H	E	T	M

Directions: Can you find the word "HELMET" in 9 different places (any direction)?

1. When turning or stopping,

2. LOOK both ways,

3. Always ride

4. Always stop at

5. When you ride on the sidewalk

6. Riders must always

at street corners and driveways.

STOP signs and the curb.

wear their helmet.

watch out for people.

always use hand signals.

with the traffic, to the right.

**"Rules of the Road"**

teaches you to ride your bike safely.

Directions: Here are 6 important "Rules of the Road." Draw a line from the first part of the rule to the correct ending to complete the sentence. The first one is done for you.







Courtesy Horizon Blue Cross Blue Shield

Get on a healthy track by adding these tips to your daily routine.

**Eat 5 servings of fruits and veggies every single day.**



**Examples:**

**Fruits**

- Apples, bananas, oranges
- Berries, grapes
- Pears, plums, melon
- Canned fruit (packed in 100% juice or water)

**Vegetables**

- Asparagus, broccoli
- Beans, lentils, peas
- Carrots, celery
- Spinach, collard greens
- Tomatoes, peppers
- Canned veggies

**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

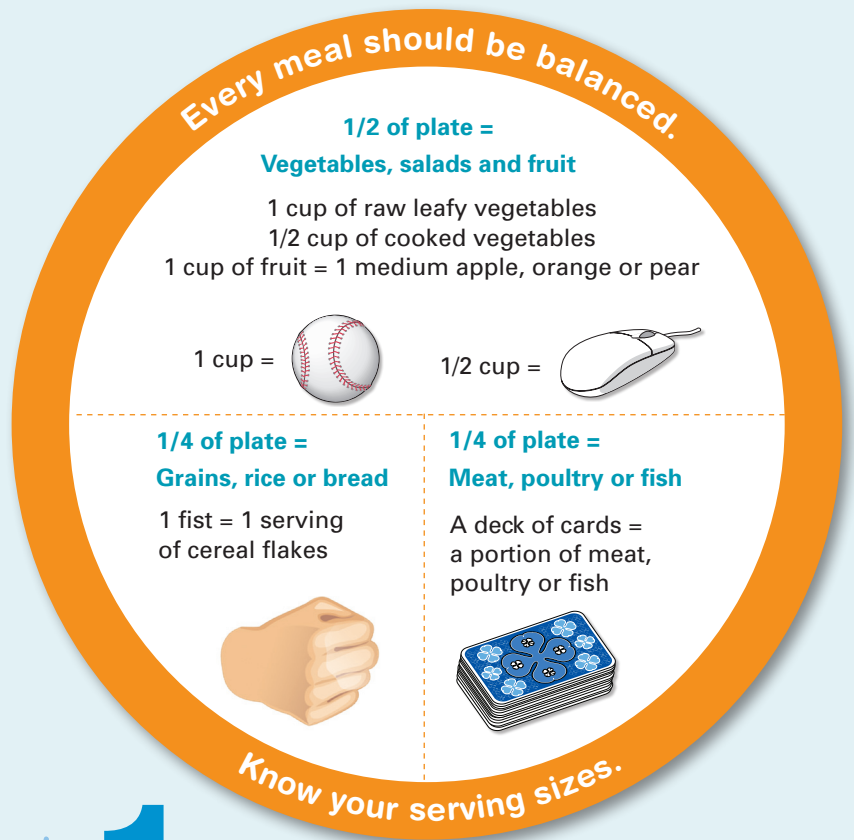


**Get at least 1 hour of physical activity.**

*Make sure an adult is there.*

- Walk to and/or from school
- Jump rope
- Ride a bike
- Play catch
- Jump, skip or hop to music

Review provided by leading experts:  
American Academy of Pediatrics  
American Diabetes Association



**Limit sweetened drinks to 0.**

**Examples of sweetened drinks to stay away from:**

- Soft drinks, soda, pop
- Juice drinks
- Chocolate milk
- Sports drinks

**Instead, drink:**

- Water with lemon, lime or orange to add flavor
- 1% or skim milk
- Unsweetened drinks
- Ask your physician about other healthy drink options



## Eat 5 servings of fruits and veggies every single day.



- Read the labels on food, including labels on soda, juice and fruit-based products that have a lot of sugar.
- Involve your child in shopping and meal planning. Children may want to eat healthier meals if they help make them.
- Encourage your child to try new, healthy foods. Try one new healthy recipe or food each week.
- Avoid using food as a reward or punishment.
- Remember your portion sizes: 3 oz. of meat is the size of a deck of playing cards, a 4 oz. bagel is the size of a hockey puck, one cup of pasta is the size of a tennis ball, and 1 oz. of cheese is the size of four dice.
- Put food on small plates, like salad plates, instead of large dinner plates.
- Eat meals at home and try to eat meals with the whole family each day.
- Avoid eating at fast-food restaurants.

## Limit screen time to 2 hours or less.



- Encourage your child to be active before letting him or her watch TV, play video games or use a computer.
- Limit the time your child sits at the computer, plays video games and watches movies.
- Limit the amount of time your child can watch TV (for example, if your child gets five hours of screen time a day, limit screen time to four hours initially and gradually decrease screen time to two or less hours per day).
- Avoid putting a TV in your child's bedroom.
- Have "family time" after dinner and play games, tell stories or do other fun things.
- Avoid eating food in front of the TV.

## Get at least 1 hour of physical activity.



- Walk 10 minutes with your child every day to make sure your family is getting enough exercise.
- Have a family contest to see who is the most active every day.
- Tell your child to play basketball, soccer or their favorite outdoor game with other children.
- Do jumping jacks or other quick activities while watching commercials with your kid.
- Go fly a kite with your kids.
- Have your kids play active games like jumping rope to music or hula hooping.
- Take your kids for a bike ride around the neighborhood.
- Wash the car with your kids.
- When you are at the mall, have your kids walk with you.
- Play inside with your child by dancing around the living room to fun music.
- Play tag with your kids.
- Have your children walk or bike to school.
- Other activities: \_\_\_\_\_

## Limit sweetened drinks to 0.



- Drink water or low-fat/nonfat milk instead of sweetened drinks like juice, sweet tea, sports drinks or soft drinks.
- Read the labels on soda, juice and fruit-based drinks to avoid those that have a lot of sugar.
- Tell everyone in your family to avoid drinks that have sugar.



## Booster Seats for School-Aged Children

Booster seats are for older children who have outgrown their forward-facing seats. All children whose weight or height exceeds the forward-facing limit for their car safety seat should use a belt-positioning booster seat until the vehicle seat belt fits properly. Typically, this is when they have reached 4 feet 9 inches in height and are 8 to 12 years of age. Most children will not fit in most vehicle seat belts without a booster until 10 to 12 years of age.



All children younger than 13 years should ride in the back seat. Instructions that come with your car safety seat will tell you the height and weight limits for the seat. As a general guideline, a child has outgrown a forward-facing seat when any of the following situations is true:

- They reach the top weight or height allowed for his seat with a harness. (These limits are listed on the seat and in the instruction manual.)
- Their shoulders are above the top harness slots.
- The tops of their ears have reached the top of the seat.

### Types of Booster Seats:

**High-back and backless are 2 standard types of booster seats.** They do not come with a harness but are used with lap and shoulder seat belts in your vehicle, the same way an adult rides. They are designed to raise a child up so that lap and shoulder seat belts fit properly over the strongest parts of the child's body.

Most booster seats are not secured to the vehicle seat with the seat belt or lower anchors and tether but simply rest on the vehicle seat and are held in place once the seat belt is fastened over a child. However, some models of booster seats can be secured to the vehicle seat and kept in place by using the lower anchors and tether along with lap and shoulder belts. (Currently, only a few vehicle manufacturers offer integrated booster seats.)

### Installation Tips for Booster Seats:

When using a booster seat, always read the vehicle owner's manual and the car safety seat manual before installing the seat. Booster seats often have a plastic clip or guide to correctly position vehicle lap and shoulder belts. See the booster seat instruction manual for directions on how to use the clip or guide.

**Booster seats must be used with lap and shoulder belts. When using a booster seat, make sure:**

- The lap belt lies low and snug across your child's upper thighs.
- The shoulder belt crosses the middle of your child's chest and shoulder and is off the neck.
- If your booster seat has lower anchors or tether attachments, check its manual for installation instructions.

### How to Use a Booster Seat - Video:

In this video, Benjamin Hoffman, MD, FAAP, a pediatrician and certified car seat technician, guides parents on how to properly use and install booster seats in your vehicle. Booster seats should be used until your child can correctly fit in the adult lap and shoulder seat belts, typically when they are around 4 feet 9 inches in height and 8 to 12 years old.

### Boost Your Child's Safety! Mastering the Art of Using a Booster Seat | AAP



## Common Questions about Booster Seats:

### What if my car has only lap belts in the back seat?

Lap belts work fine with rear-facing-only, convertible, and forward-facing seats that have a harness but can never be used with a booster seat. If your car has only lap belts, use a forward-facing seat that has a harness and higher weight limits. You could also

- Check to see if shoulder belts can be installed in your vehicle.
- Use a travel vest (check the manufacturer's instructions about the use of lap belts only and about the use of lap and shoulder belts).
- Consider buying another car with lap and shoulder belts in the back seat.

### What is the difference between high-back boosters and backless boosters?

- Both types of boosters are designed to raise your child so seat belts fit properly, and both will reduce your child's risk of injury in a crash. High-back boosters should be used in vehicles without headrests or with low seat backs. Many seats that look like high-back boosters are actually combination seats. They come with harnesses that can be used for smaller children and, later, removed for older children. Backless boosters are usually less expensive and are easier to move from one vehicle to another. Backless boosters can be used safely in vehicles with headrests and high seat backs.

## Additional Information from HealthyChildren.org:

- [Forward-Facing Car Seats for Toddlers & Preschoolers \(/English/safety-prevention/on-the-go/Pages/Forward-Facing-Car-Seats-for-Toddlers-Preschoolers.aspx\)](/English/safety-prevention/on-the-go/Pages/Forward-Facing-Car-Seats-for-Toddlers-Preschoolers.aspx)
- [Car Seats: Product Listing \(/English/safety-prevention/on-the-go/Pages/Car-Safety-Seats-Product-Listing.aspx\)](/English/safety-prevention/on-the-go/Pages/Car-Safety-Seats-Product-Listing.aspx)
- [Seat Belts for Older Children & Adults \(/English/safety-prevention/on-the-go/Pages/Seat-Belts-for-Older-Children-Adults.aspx\)](/English/safety-prevention/on-the-go/Pages/Seat-Belts-for-Older-Children-Adults.aspx)

Updated 2/28/2021

**Source** Adapted from Car Safety Seats Guide (Copyright © 2021 American Academy of Pediatrics)

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## VACCINE INFORMATION STATEMENT

# 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](http://www.immunize.org/vis)

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

## 1. Why get vaccinated?

**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

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## 4. Risks of a vaccine reaction

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- 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.

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

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An allergic reaction could occur after the vaccinated person leaves the clinic. If you see signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness), call **9-1-1** and get the person to the nearest hospital.

For other signs that concern you, call your health care provider.

Adverse reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your health care provider will usually file this report, or you can do it yourself. Visit the VAERS website at [www.vaers.hhs.gov](http://www.vaers.hhs.gov) or call **1-800-822-7967**. *VAERS is only for reporting reactions, and VAERS staff members do not give medical advice.*

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## 6. The National Vaccine Injury Compensation Program

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The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines. Claims regarding alleged injury or death due to vaccination have a time limit for filing, which may be as short as two years. Visit the VICP website at [www.hrsa.gov/vaccinecompensation](http://www.hrsa.gov/vaccinecompensation) or call **1-800-338-2382** to learn about the program and about filing a claim.

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## 7. How can I learn more?

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- Ask your health care provider.
- Call your local or state health department.
- Visit the website of the Food and Drug Administration (FDA) for vaccine package inserts and additional information at [www.fda.gov/vaccines-blood-biologics/vaccines](http://www.fda.gov/vaccines-blood-biologics/vaccines).
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call **1-800-232-4636** (1-800-CDC-INFO) or
  - Visit CDC's website at [www.cdc.gov/flu](http://www.cdc.gov/flu).

