

Routine Office Visits and Immunizations

Routine office visits are scheduled in advance. Since the office computer allows us to book appointments months in advance, you will often be able to make your next appointment as you leave the office. If not, please call the office at least 2-4 weeks ahead of time to get an appointment.

The office will try to remind you by phone about your appointment approximately 48 hours in advance. In addition, you can request reminders by email and/or text message that will start as early as 1 week prior to your scheduled appointment. If you are unable to keep the appointment, please call us as soon as possible. There is a \$25 fee for missed appointments that are not cancelled at least 24 hours in advance. The office will try to stay running smoothly but emergencies, late arrivals and unscheduled appointments may delay our normal schedule. Please realize that I try to give each patient the necessary time, so your understanding of unexpected delays is appreciated. Standard office visits are scheduled as follows with the following immunizations, tests, and procedures:

Newborn Hospital Stay	Daily Hospital Visits, HBV , RSV* , Vitamin K, Erythromycin Eye Ointment, Hearing Screening, Metabolic Newborn Screening
2 to 3 days after Hospital	Hospital follow-up
2 weeks	Checkup
1 month	Checkup
2 months	Checkup; DTaP , HIB , IPV , PCV20 , Rotateq
3 months	Checkup; HBV
4 months	Checkup; DTaP , HIB , IPV , PCV20 , Rotateq
6 months	Checkup; DTaP , HIB , PCV20 , Rotateq , Quadrivalent Fluzone* , Vision Screening, Ages & Stages Developmental Assessment. Consider COVID 19 Vaccine 2 doses at least 4 weeks apart.
9 months	Checkup; HBV , CBC and Serum Lead Level

12 months	Checkup; MMR , PCV20 , Vision Screening, Fluoride Varnish*, Ages & Stages Developmental Assessment
15 months	Checkup; HIB , Varivax , Fluoride Varnish*
18 months	Checkup; DTaP , IPV , HAV , Vision Screening, Fluoride Varnish*, Ages & Stages Developmental Assessment, MCHAT Assessment
2 years	Checkup; HAV , Vision Screening, Fluoride Varnish*, Ages & Stages Developmental Assessment, MCHAT Assessment
3-4 years	Annual Checkup; Vision Screening, Hearing Screening (if cooperative), Ages & Stages Developmental Assessment (Note the DTaP & MMR given at the 5 year checkup is often moved to the 4 year visit to decrease the number of injections given at one time).
5 years	Kindergarten Checkup; Vision Screening, Hearing Screening, Ages & Stages Developmental Assessment, CBC, Urinalysis, Lipid Profile, DTaP , IPV , MMR , Varivax
6-9 years	Annual Checkup; Vision Screening, Hearing Screening
10 years	Annual Checkup; Vision Screening, Hearing Screening, First HPV
11-12 years	Annual Checkup, Adult TdaP , Menquadfi , HPV series, Depression Screening, Vision Screening, Hearing Screening CBC, Urinalysis, Lipid Profile
13-15 years	Annual Checkup; Depression Screening, Vision Screening, Hearing Screening
16 years	Annual Checkup; Menquadfi , Trumenba , Depression Screening, Vision Screening, Hearing Screening
17-18	Annual Checkup; Second Trumenba , Depression Screening, Vision Screening, Hearing Screening, CBC, Lipid Profile, Urinalysis
19-21	Annual Checkup; Depression Screening, Vision Screening, Hearing Screening

The following is an explanation of the immunizations that are listed by abbreviation in the above schedule of checkups:

COVID 19 = This vaccine should be considered all children 6 months and older that have not yet been vaccinated. The COVID 19 vaccine has the following side effects.

1. Redness, pain, warm and swelling may occur at the shot site. The treatment for this is local application of warm compresses.
2. Fever, tiredness (fatigue), headache, chills, muscle pain, joint pain, nausea, vomiting, and swollen lymph nodes can happen after COVID-19 vaccination.
3. Myocarditis (inflammation of the heart muscle) or pericarditis (inflammation of the lining outside the heart) have been seen rarely after COVID-19 vaccination. This risk has been observed most commonly in males 12 through 39 years of age and often resolves. The chance of this occurring is low.
4. There is always the rare chance of a serious allergic reaction.
5. Dizziness or lightheadedness can occur and patients are observed for at least 15 minutes post vaccination.

DTaP = Diphtheria, Tetanus, & Acellular Pertussis. This vaccination has replaced the DTP vaccine for the 5 shot series listed in the previous table. Since this vaccination only utilizes a few of the antigenic components of the pertussis organism, it has drastically reduced the risks of vaccination against pertussis that occurred with the older vaccine. Reactions to the DTaP vaccine are handled in the same manner as those from the original DTP vaccine. The DTaP vaccine has the following side effects:

1. Redness, warmth and swelling may occur at the shot site as with any intramuscular injection. The treatment for this is local application of warm compresses
2. A hard, "pea-sized" knot may appear at the shot site. It is firm but not tender and may take several weeks to resolve itself. Sometimes it is still present when the child returns in two months for his/her next set of vaccines. No treatment is necessary. This will cause no physical limitations.
3. Fever and irritability occurred in 1 out of 4 times the vaccine is administered. The fever may range from low grade to 105 over the next 48 hours. The 105 fever occurs in 1 child out of 16,000. Similarly, the irritability may range from mild fussiness to nonstop

- crying. The nonstop crying for 3 hours or more occurs in 1 child out of 1,000. Both of these are treated by administering the appropriate dose of Tylenol every four hours for the next two days. Please contact me if in spite of this therapy, the fever is in excess of 102 or if nonstop crying exceeds 3 hours.
4. Approximately 1 out of 14,000 episodes in which the DTaP is administered results in an episode of limpness, convulsion, or a seizure in the 48 hours following such vaccination. This is less common with the new DTaP vaccine. If a seizure should occur, move all sharp objects away from the shaking child to avoid injury. Call 911 immediately and then call me. The reason for contacting 911 first is that they can be at your home in 5 minutes or less to objectively assess the situation and provide any assistance in the rare cases it is necessary.

HAV = Hepatitis A Vaccine. This vaccination is strongly recommended for all children 12 to 23 months of age. In addition, it is recommended to all people 1 year of age and older traveling to or working in countries with high or intermediate prevalence of the virus such as those located in Central or South America, Mexico, Asia, Africa and Eastern Europe. Two doses are administered at least 6 months apart between the ages of one and two years of age or older. The Hepatitis A vaccine has the following side effects in children:

1. Soreness at the shot site, 1 out of 6 children. The treatment for this is local application of alternating warm and cool compresses.
2. Headache in 1 out of 25 children. This may be treated with Tylenol.
3. Loss of appetite in 1 out of 12 children.
4. Rarely a serious allergic reaction.

HBV = Hepatitis B Vaccine. This vaccination is strongly recommended for all newborns. In addition, it is a required that this vaccination series be completed prior to your child entering kindergarten. If your child is already past kindergarten and has not received this vaccination, he/she must complete this vaccination series prior to entering the seventh grade in the Palm Beach County School system. It is also strongly recommended for all children who have significant risk for the disease. These high-risk

categories include IV drug use, multiple sexual partners, and recurrent blood transfusions. In the newborn period, our office recommends vaccinating at birth, 3 months, and either 6 or 9 months of age. The Hepatitis B vaccine has the following side effects:

1. Redness, warmth and swelling (up to 1 out of 11 children) may occur at the shot site as with any intramuscular injection. The treatment for this is local application of warm compresses.
2. Up to 1 in 14 children may develop low grade fever and fussiness over the next 72 hours. It should be noted that the effects of this vaccine are not additive to those of other vaccinations when they are administered simultaneously.

HIB = Hemophilus influenza Type B Vaccine. This vaccination is otherwise known as the spinal meningitis vaccine. Hemophilus influenza Type B (H. flu) is the name of the bacteria most commonly responsible for bacterial spinal meningitis between the ages of 2 months and 5 years. It is also an organism responsible for causing some serious pneumonias in children as well as the deadly disease known as epiglottitis. This vaccination is administered at ages 2, 4, 6, and 15 months. The HIB vaccine has the following side effects:

1. Redness, warmth and swelling (up to ¼ of children) may occur at the shot site as with any intramuscular injection. The treatment for this is local application of warm compresses.
2. Up to 1 out of 20 children may develop low grade fever and fussiness over the next 72 hours. It should be noted that the effects of this vaccine are not additive to those of other vaccinations when they are administered simultaneously.
3. Development of loose stools can be seen in the several days after the administration of the vaccine and is self-limited in nature.

HPV = Human Papillomavirus Vaccine (Gardasil 9). This vaccine is an inactivated (not live) vaccine which protects against 9 major types of HPV infection. These include two types responsible for 70% of cervical cancer and two types responsible for 90% of genital warts. There is also believed to be an association between HPV disease and throat cancer in males. It is

routinely recommended for children 10 to 12 years of age but can be given as young as age 9 years. The younger you start the vaccine, the more robust the immune response. The second dose is administered at least 2 months after the first dose. The third dose would be given at least 4 months after the second dose. It is safe to give with other scheduled vaccines. Note that for children under 15 years of age, Gardasil 9 can also be administered as a 2-dose series with the second dose given at least 6 months after the first dose but not more than 12 months after the first dose. Pregnant women and women who have had a life-threatening allergic reaction to yeast should not get the vaccine. The HPV vaccine has the following side effects:

1. Redness, warmth and swelling (up to ¼ of children) may occur at the shot site as with any intramuscular injection. The treatment for this is local application of alternating warm and cool compresses.
2. Up to 1 out of 10 children may develop low grade fever over the next 72 hours. A moderate fever (102F) may occur in 1 person out of 65.
3. Itching at the injection site occurs in 1 out of 30 people.
4. There are occasional reports of patients getting light headed or having a vasovagal episode after vaccination so patients must wait in the office for 15 minutes post injection.

IPV = Inactivated Polio Vaccine. This is administered to your child at 2,4,18 months and a booster dose at 5 years. This vaccination has become the preferred form of polio prevention United States secondary to the incidence of VAPP. VAPP stands for vaccine induced paralytic polio. This was a rare side effect of OPV (oral polio vaccine). Presently the incidence of VAPP is somewhere between 2 and eight cases per year worldwide. The only cases of polio in the United States since 1979 have been due to VAPP secondary to the administration of OPV. Therefore, both the CDC (Center for Disease Control) and the AAP (American Academy of Pediatrics) recommend vaccination with the safer IPV product versus the previously preferred OPV. Administration of OPV should still be considered in those individuals who frequent areas where polio is still endemic. In this case one would receive IPV for the first two vaccinations at 2 and 4 months followed by OPV for the

booster doses at 18 months and 5 years. The CDC and the AAP both believe this will decrease the risk of vaccine associated paralytic polio (VAPP). Please discuss these alternatives with me at the time of your infant's checkup.

Menquadfi = Meningococcal Vaccine (Strains A, C, W and Y). This vaccine is recommended for all children at their routine preadolescent visit (11 - 12 years of age). It is also recommended at high school entry or for college freshmen living in dormitories if they have not been previously immunized. About 2,600 people get meningococcal disease each year in the United States. At least one out of ten people die from this disease in spite of being appropriately diagnosed and treated with appropriate antibiotics. Therefore, one can see the obvious importance of becoming immunized against this disease. The side effects of this vaccine are rather minor:

- 1.Redness and pain at the injection site occurs in about half the people who are vaccinated. Alternating warm and cool compresses will help alleviate these symptoms. Administer Tylenol for the discomfort.
- 2.A small percentage of people develop a fever which can be managed with an appropriate dose of Tylenol.
3. Severe allergic reactions are very rare and occur within minutes to hours after vaccination. If this occurs call the physician on call immediately. The risk of the vaccine causing serious harm or death is extremely small.

MMR = Measles, Mumps, & Rubella Vaccine. This vaccine is given between 12 - 15 months and again between 4 - 6 years. The side effects of this vaccine are as follows:

- 1.Redness, warmth, swelling, and tenderness may occur locally at the injection site during the 48 hours after vaccination. Warm compresses will help alleviate these symptoms. Administer Tylenol for the discomfort.
2. Your child may develop an atypical form of the measles. This is characterized by a red blotchy rash that may appear anywhere on their body between 5 and 14 days after the injection. If this occurs,

there is no reason for concern. The rash is not contagious. You must observe your child for the following symptoms.

FEVER > 103 DEGREES.

EXTREME IRRITABILITY OR LETHARGY (VERY
DIFFICULT TO AROUSE).

If the above symptoms occur, give the appropriate dose of Tylenol and contact my office. Rarely this can be a sign of measles encephalitis. Note that this more commonly happens with the actual measles disease.

3. Contraindications to the MMR Vaccine include:

PREGNANCY

ANAPHYLAXIS TO EGG INGESTION

GAMMA GLOBULIN ADMINISTERED WITHIN THE
PREVIOUS 3 MONTHS.

PCV20 = Prevnar 20 (Pneumococcal conjugate 20 valent vaccination). This vaccine is presently recommended for all children under the age of 2 years who are at highest risk for the disease. It is also recommended for children between 2 and 5 years of age who: 1) have sickle cell disease; 2) have a damaged spleen or no spleen; 3) have HIV/AIDS; 4) have other diseases that affect the immune system such as diabetes or cancer; 5) take medications that suppress the immune system such as chemotherapy or steroids. Pneumococcal disease is the leading cause of bacterial meningitis in the United States. It also causes bacteremia (bacteria in the blood stream), pneumonia, and many ear infections. In the newborn period our office recommends vaccinating at 2, 4, 6 and 12 months of age. In Palm Beach County this has now become one of the required vaccines for entry into daycare or preschool. The Prevnar vaccine may have the following side effects:

1. Up to 1 out of 4 children have redness, tenderness, or swelling where the shot is given. The treatment for this is local application of warm compresses.

2. About 1 out of 3 vaccinations result in a mild fever and/or irritability in the 72 hours following administration. This may be treated by administering the appropriate dose of Tylenol every four hours as needed. Up to 1 in 50 has a fever over 102.2 and should be treated with Tylenol as previously stated.

3. Patients may also experience drowsiness, restless sleep, and decreased appetite in the 72 hours following vaccination as with other childhood vaccines.

Rotateq = Rotavirus vaccine. This is an oral vaccine and therefore not given by injection. It will not prevent diarrhea and vomiting caused by other germs, but it is very good at preventing diarrhea and vomiting caused by rotavirus. About 98% of vaccinated children will never get severe rotavirus vaccine that would lead to hospitalization. In addition, 74% of children will not get rotavirus disease at all. It is recommended to get vaccinated at 2, 4 and 6 months of age. The first dose must be administered prior to 3 months of age and all three doses must be given prior to 32 weeks of age. Side effects of the vaccine include a 1-3% chance of mild temporary diarrhea or vomiting within the 7 days after each dose. Getting rotavirus vaccine is much safer than getting the disease. As with all vaccines or medications there is always the rare chance of a serious problem such as a severe allergic reaction.

RSV = Nirsevimab is an RSV preventive antibody (Trade Name Beyfortus) that is a shot that prevents severe RSV disease in infants and young children. Nirsevimab is an immunization that provides antibodies directly to the recipient. This protection typically would last for 5 months (during the peak of the RSV season). Traditional vaccines are immunizations that stimulate the recipient's own immune system to produce antibodies.

Infants born during the RSV season (typically fall through spring) should receive a single dose of the RSV Immunization within 1 week after birth. Most infants whose mothers got the RSV vaccine at least 14 days prior to delivering don't need to get nirsevimab, too. Both protect infants from severe RSV by providing antibodies, either from the mother to the infant or directly to the infant. If the child is not born during RSV season, they should receive their first dose prior to the start of RSV season as long as they are less than or equal to 8 months of age at that time. Note that some children

age 8 to 19 months should receive another dose during their second RSV season if they are at increased risk for severe disease.

Side effects include temporary pain, redness, swelling where the injection was given, or a rash. As with any medication there is a rare chance of an allergic reaction.

Tdap = This vaccine is the adult booster against Diphtheria, Tetanus and Pertussis which is administered to children 7 years and older in place of the DTaP which is administered at 2 months, 4 months, 6 months, 18 months and again at 4 or 5 years of age. Adolescents should receive a single dose of Tdap at 11 or 12 years of age. Side effects include mild fever, tenderness at the injection site, headache, feeling tired, and nausea, vomiting, diarrhea, or stomachache. Redness, warmth and swelling at the injection site can be treated with warm compresses. As with any vaccine there is always the chance of an allergic reaction.

TB Screening Test = Tuberculosis Screening Test. This is a skin test that used to be routinely recommended for the 1-, 5-, 11-, and 15-year checkups. Now it is only recommended if your child has been exposed to TB or has risk factors. Then testing may be deemed necessary by your physician.

Trumenba = Meningococcal B Vaccine. This vaccine is recommended for people 10 years and older who are at increased risk for serogroup B meningococcal disease including: 1) People in an area of known outbreak 2) anyone with a spleen that is damaged or removed including people with sickle cell disease 3) People with persistent complement component deficiency 4) People taking a drug that is a complement inhibitor. It is also recommended to provide short term immunity for all people ages 16 to 23 years with the ideal age for administration between 16 and 18 years of age. Side effects of this vaccine include:

- 1) Soreness, redness and swelling at the vaccination site. The treatment for this is local application of warm compresses.
- 2) Low grade fever which can be treated with Tylenol
- 3) One can also experience fatigue, headache, muscle or joint pain, chills, nausea, and diarrhea for a few days that can be treated with rest, acetaminophen, oral fluids and supportive care.

- 4) Like with any vaccine or medication there is always the risk of a severe allergic reaction, serious illness, or death.

Varivax = Chickenpox Vaccine. This vaccine can be administered to any child who has not had the chickenpox and is over the age of 1 year with a booster dose at 5 years of age. The two doses need to be at least 1 month apart. Note that this vaccine does not guarantee that your child will not develop chickenpox; however, if it does occur, it will be a milder form of the disease. It is also believed to reduce the risk of developing shingles as an adult. Side effects of this vaccine include the following:

- 1) Redness, warmth and swelling (up to 1 in 5 children) may occur at the shot site. The treatment for this is local application of warm compresses.
- 2) About 1 out of 10 children may develop low grade fever and fussiness in the several days after the vaccine. Both of these are treated by administering the appropriate dose of Tylenol every four hours as needed.
- 3) Your child may develop a rash that mimics chickenpox up to 1 month after vaccination. No treatment for this is necessary.
- 4) A seizure caused by fever may occur in less than 1 person out of 1,000. See DTaP Vaccine Section for your appropriate response to this possible side effect.