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.

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®

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.

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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VACCINE INFORMATION STATEMENT

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.

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

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**.

Human Papillomavirus

A Parent's Guide to Preteen and Teen HPV Vaccination

HPV

Why vaccinate preteens and teens against HPV?

- The vaccine produces better immunity to fight infection when given at younger ages compared with older ages.
- Vaccination for HPV is much more effective if all doses in the series are given before the first sexual contact.
- Most American men and women will contract at least one type of HPV virus in their lifetime. Vaccination can reduce their risk of HPV infection.
- Most people who become infected with HPV do not even know it.
- HPV is easily spread by skin-to-skin contact during sexual activity. Even if someone does not have sexual intercourse, they can still get HPV.
- People who have only one lifetime sex partner can still get HPV if their partner had intimate contact with an infected person even once.
- The vaccine has been tested in tens of thousands of people around the world and has been proven to have no serious side effects except fainting, which is more likely to occur in adolescents after any vaccination.
- HPV vaccination can prevent more than 90% of HPV-attributable cancers in men and women in the future.

What is HPV?

Human papillomavirus (HPV) is a common family of viruses. There are more than 100 types of HPV viruses. Some cause infection of the skin and others infect mucous membranes of various areas of the body. Different types of HPV infection affect the body in different ways. For instance, some types of HPV can lead to cancer of the tongue, tonsils, anus, cervix, vulva, and penis, and others cause warts in the genital area.

How common is HPV?

HPV is very common. According to the Centers for Disease Control and Prevention (CDC), most American men and women will contract at least one type of HPV virus during their lifetime. Approximately 79 million Americans are currently infected with HPV, and about 14 million more become infected each year. HPV is the cause of almost all cervical cancers in women and recent studies show that HPV is associated with the majority (70%) of oropharyngeal cancers (cancer of the tongue or tonsils), which occur primarily in men, in the United States.

How serious is HPV?

HPV is extremely serious. In the United States, there are 34,800 new cancer cases caused by HPV each year, of which about 4 out of 10 are in men. Each year there are 10,900 new HPV-attributable cervical cancer cases, and more than 4,000 women die from cervical cancer. Cancer of the oropharynx (tongue, tonsils) due to HPV is even more common with 13,500 new cases each year, 11,300 of which are in men. Treatment may involve surgery, chemotherapy, and/or radiation.

How is HPV spread?

The most common ways to get an HPV infection is from oral, vaginal, or anal sex with an infected person. Infection can also be acquired from skin-to-skin contact with areas infected by HPV. It is possible to have HPV and not know it, so a person can unknowingly spread HPV to another person.

CONTINUED ON NEXT PAGE ▶

Resources for more information

- Your healthcare provider or local health department
- CDC's information on vaccines and immunization: www.cdc.gov/vaccines
- Immunize.org's vaccine information website: www.vaccineinformation.org
- Vaccine Education Center at the Children's Hospital of Philadelphia: www.chop.edu/centers-programs/vaccine-education-center
- CDC's Vaccines For Children (VFC) program: www.cdc.gov/vaccines/programs/vfc/index.html

SOURCES

American College of Obstetricians and Gynecologists (ACOG) Committee on Adolescent Health Care. Fact Sheet: Human Papillomavirus. ■www.acog.org/womens-health/faqs/hpv-vaccination

Centers for Disease Control and Prevention (CDC). National Center for Chronic Disease Prevention and Health Promotion. HPV and Cancer. ■ www.cdc.gov/hpv/parents/cancer.html

CDC. National Center for Emerging and Zoonotic Infectious Diseases. Vaccine Safety: Human Papillomavirus Vaccine. ■ www.cdc.gov/vaccinesafety/vaccines/hpv-vaccine.html

CDC. National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. Genital HPV Infection Fact Sheet. ■ www.cdc.gov/std/HPV/STDFact-HPV.htm

CDC. National Center for Immunization and Respiratory Diseases. HPV Vaccine-Questions and Answers. ■ www.cdc.gov/hpv/parents/questions-answers.html

CDC. National Center for Immunization and Respiratory Diseases. Vaccines by Age: 11–12 Years ■ www.cdc.gov/vaccines/parents/by-age/years-11-12.html and 13–18 Years ■ www.cdc.gov/vaccines/parents/by-age/years-13-18.html

Reduction in human papillomavirus (HPV) prevalence among young women following HPV vaccine introduction in the United States, National Health and Nutrition Examination Surveys, 2003-2010. *J Infect Dis.* 2013 Aug 1; 208(3):385-93 ■ https://pubmed.ncbi.nlm.nih.gov/23785124

Talk to your healthcare provider today about protecting your son or daughter from HPV infection!

Can HPV infection be treated?

There is no treatment for HPV infection. Fortunately, the body usually fights off the virus naturally; however, in cases where the virus cannot be fought off naturally, the person is at risk for serious complications, including cancer. There are treatments available for the health problems that HPV can cause, for example, removal of genital warts or pre-cancerous cervical cells, and chemotherapy, surgery, or radiation for cancer.

What is HPV vaccine?

Gardasil 9 is the only HPV vaccine currently being distributed in the United States. Gardasil 9 protects against most HPV-attributable cancers in men and women. It also prevents most genital warts and cervical pre-cancers. For preteens, HPV vaccine is given in two shots, separated by 6 to 12 months. It is important to get all the recommended doses to get the best protection.

At what age should my son or daughter get HPV vaccine?

Routine vaccination with HPV vaccine is recommended for all 11- and 12-year-old boys and girls. The vaccine can also be given beginning at age 9 or 10 years. If your son or daughter did not receive the two doses of vaccine at the recommended age, they should still start or complete their HPV vaccine series. Vaccination is routinely recommended through the age of 26 for all males and females, and can be given through age 45 years, if desired.

If the vaccine series is started before the 15th birthday, two doses are needed. If it's started at age 15 years or older or, if the person has problems with their immune system, three doses are necessary. Check with your healthcare provider to make sure your child has all the needed doses.

HPV vaccine works better when given on time. HPV vaccine produces better immunity to fight infection when given to preteens as compared to older adolescents and adults. For HPV vaccine to work best, it is very important for preteens to get all the recommended doses before any sexual activity begins. It is possible to get infected with HPV the very first time they have sexual contact with another person, even if they do not have intercourse.

Are HPV vaccines safe?

HPV vaccine has been shown to be very safe. Every vaccine used in the United States is required to go through rigorous safety testing before licensure by the FDA. Before licensure, the HPV vaccine was extensively tested in clinical trials with more than 28,000 male and female participants. Since the first HPV vaccine was licensed for use in 2006, more than 120 million doses of HPV vaccine have been distributed in the United States. Now in routine use, the vaccine is continually monitored for safety.

In the years of HPV vaccine safety monitoring, no serious safety concerns have been identified except fainting after vaccination (a common occurrence for adolescents after any vaccination). Like other vaccinations, most side effects from HPV vaccination are mild (e.g., fever, headache, pain and redness in the arm where the shot was given).

Is HPV vaccine effective?

The vaccine has been shown to be highly effective in protecting against the HPV types targeted by the vaccine. HPV vaccination has reduced the numbers of teen girls and young women with vaccine-type HPV infection. It also has reduced cases of genital warts, cervical pre-cancerous changes, and other complications of HPV infection.

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

CDC U.S. 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 women, but no safety concerns have been identified. A pregnant or breastfeeding woman 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.*

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**.

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 women 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.

CDC U.S. 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.*

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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**.

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

Graphic design and illustrations by Artists For Humanity, a non profit arts and entrepreneurship program for Boston teens.

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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Puberty: Ready or Not, Expect Some Big Changes

Puberty is the time in your life when your body starts changing from that of a child to that of an adult. At times, you may feel like your body is totally out of control! At first, your arms, legs, hands, and feet may grow faster than the rest of your body. But it will even out quickly.

Compared with your friends, you may feel too tall, too short, too fat, or too skinny. You may feel self-conscious about these changes, but many of your friends probably do too.

Everyone goes through puberty, but not always at the same time or in exactly the same way. In general, here's what you can expect.

When?

There's no "right" time for puberty to begin. But girls start a little earlier than boys, usually between 8 and 13 years of age. Puberty for boys usually starts at about 10 to 14 years of age.

What's happening?

Chemicals called hormones will cause many changes in your body.

Hair, everywhere!

Soft hair starts to grow in the pubic area (the area between your legs and around your genitals [around your vagina or penis]). This hair will become thick and very curly. It is not necessary to shave your pubic hair. It is a normal change as you become an adult. You may also notice hair under your arms and on your legs. Girls usually shave the hair under their arms. Boys start to get hair on their face or chest. Most boys choose to shave their facial hair.

Acne

You may start to get acne (also called pimples or zits) because your oil glands are changing. It's important to wash your face with soap, not bodywash, every day to keep your skin clean.

Don't be surprised, even if you wash your face every day, that you still get acne. It's normal to get acne when your hormone levels are high. Almost all teens develop acne at one time or another. Whether your case is mild or severe, you can do things to keep it under control. Talk with your doctor about how to treat and control acne.

Body odor

You may begin to sweat more. Most people use a deodorant or an antiperspirant to keep underarm odor and wetness under control.

Weight gain

Sometimes the weight gain of puberty causes girls and boys to feel so uncomfortable with how they look that they try to lose weight by throwing up, by not eating, or by taking medicines. These are not healthy ways to lose weight and may make you very sick. If you feel this way, or have tried any of these ways to lose weight, please talk with your parents or doctor.

Girls only

Breasts. The first sign of puberty in most girls is breast development (small, tender lumps under one or both nipples). The soreness is temporary and goes away as your breasts grow. Don't worry if one breast grows a little faster than the other. By the time your breasts are fully developed, they usually end up being the same size.

When your breasts get larger, you may want to start wearing a bra. Some girls are excited about this. Other girls may feel embarrassed, especially if they are the first of their friends to need a bra. Talk with your mom or another trusted adult about buying your first bra.

Curves. As you go through puberty, you'll get taller, your hips will get wider, and your waist will get smaller. Your body also begins to build up fat in your belly, bottom, and legs. This is normal and gives your body the curvier shape of a woman.

Periods. Your menstrual cycle, or "period," starts during puberty. Most girls get their periods 2 to 2½ years after their breasts start to grow (between 10 and 16 years of age).

During puberty, your ovaries begin to release eggs. If an egg connects with sperm from a man's penis (fertilization), it will grow inside your uterus and develop into a baby. To help your body prepare for this, a thick layer of tissue and blood cells builds up in your uterus. If the egg doesn't connect with a sperm, the body does not need these tissues and cells. They turn into a blood-like fluid and flow out of your vagina. Your period is the monthly discharge of this fluid out of the body.

A girl who has started having periods is able to get pregnant, even if she doesn't have a period every month.

You will need to wear some kind of sanitary pad or tampon, or both, to absorb this fluid and keep it from getting on your clothes. Most periods last from 3 to 7 days. Having your period does not mean you have to avoid any of your normal activities, like swimming, horseback riding, or gym class. Exercise can even help get rid of cramps and other discomforts you may feel during your period.

Boys only

Muscles. As you go through puberty, you'll get taller, your shoulders will get broader, and, as your muscles get bigger, your weight will increase.

Does size matter? During puberty, the penis and testes get larger. There's also an increase in sex hormones. You may notice you get erections (when the penis gets stiff and hard) more often than before. This is normal. Even though you may feel embarrassed, try to remember that unless you draw attention to it, most people won't notice your erection. Also, remember that the size of your penis has nothing to do with manliness or sexual functioning.

Wet dreams. During puberty, your testes begin to produce sperm. This means that during an erection, you may also ejaculate. This is when

semen (made up of sperm and other fluids) is released through the penis. This could happen while you are sleeping. You might wake up to find your sheets or pajamas are wet. This is called a nocturnal emission, or wet dream. This is normal and will stop as you get older.

Voice cracking. Your voice will get deeper, but it doesn't happen all at once. It usually starts with your voice cracking. As you keep growing, the cracking will stop and your voice will stay at the lower range.

Breasts? You may have swelling under your nipples. If this happens to you, you may worry that you're growing breasts. Don't worry, you're not. This swelling is very common and only temporary. But if you're worried, talk with your doctor.

New feelings

In addition to all the physical changes you will go through during puberty, there are many emotional changes. For example, you may start to care more about what other people think about you because you want to be accepted and liked. Your relationships with others may begin to change. Some become more important and some less so. You'll start to separate more from your parents and identify with others your age. You may begin to make decisions that could affect the rest of your life.

At times, you may not like the attention of your parents and other adults, but they, too, are trying to adjust to the changes you're going through. Many teens feel their parents don't understand them; this is a normal feeling. It's usually best to let them know (politely) how you feel and then talk things out together.

Also, it's normal to lose your temper more easily and to feel that nobody cares about you. Talk about your feelings with your parents, another trusted adult, or your doctor. You may be surprised at how much better you will feel.

Sex and sexuality

During this time, many teens also become more aware of their sexual feelings. A look, a touch, or just thinking about someone may make your heart beat faster and may produce a warm, tingling feeling all over. You may not be sure if you are attracted to boys, girls, or both. That's OK and you shouldn't feel worried about it.

You may ask yourself...

- When should I start dating?
- When is it OK to kiss?
- How far should I go sexually?
- When will I be ready to have sexual intercourse?
- Will having sex help my relationship?
- Do I have to have sex?
- If I am attracted to a same-sex friend, does that mean I am gay or lesbian?
- What is oral sex? Is oral sex really sex?
- Is it OK to masturbate (stimulate your genitals for sexual pleasure)? (Masturbation is normal and won't harm you. Some boys and girls masturbate; some don't.)

Remember, talking with your parents or doctor is a good way to get information and to help you think about how these changes affect you.

Decisions about sex

Deciding to become sexually active can be very confusing. On the one hand, you hear many warnings and dangers about having sex. On the other hand, movies, TV, magazines, and even the lyrics in songs all seem to be telling you that having sex is OK.

It's normal for teens to be curious about sex, but deciding to have sex is a big step.

There's nothing wrong if you decide to wait to have sex. Not everyone is having sex. Half of all teens in the United States have never had sex. Many teens believe waiting until they are ready to have sex is important. The right time is different for each teen.

If you decide to wait, stick with your decision. Plan ahead how you are going to say no so you are clearly understood. Stay away from situations that can lead to sex. If your boyfriend or girlfriend doesn't support your decision to wait, he or she may not be the right person for you.

No one should be forced to have sex! If you are ever forced to have sex, it's important to never blame yourself and to tell an adult you trust as soon as possible. Medical and counseling supports are available to help someone who has been forced to have sex.

If you decide to have sex, it's important you know the facts about birth control, infections, and emotions. Sex increases your chances of becoming pregnant, becoming a teen parent, and getting a sexually transmitted infection (commonly known as an STI), and it may affect the way you feel about yourself or how others feel about you.

These are important decisions and are worth talking about with adults who care about you, including your doctor.

Taking care of yourself

As you get older, you will need to make many decisions to ensure you stay healthy.

- Eating right, exercising, and getting enough rest are important during puberty because your body is going through many changes.
- It's also important to feel good about yourself and the decisions you make.
- Whenever you have questions about your health or your feelings, don't be afraid to share them with your parents and doctor.

From Your Doctor

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Illustration by Damon Butler and Billy Nuñez, age 16

TALKING WITH YOUR TEEN: TIPS FOR PARENTS

BE AN INVOLVED PARENT

- Show interest in your teenager's activities and friends.
- Talk openly, honestly, and respectfully with your teenager.
- Set clear limits and expectations.
- Know what's going on at school and after school.
- Teach your teenager how to safely avoid violence.

Teenagers are no longer children, but they are not yet adults. While teenagers are developing more independent thoughts, feelings, and values, it is only natural for them to question their parents' rules, beliefs, and expectations. During this time of change, parents often worry about their teenager's safety.

Encourage independence while teaching safety.

As teenagers are testing their new independent roles, it's not an easy time for parents. But if teens don't get love, security, and a feeling of safety from their family, they might look elsewhere, even toward friends who are a bad influence, such as gang members. One of the best ways parents can help their teenagers stay safe is to teach them how to avoid violence.

Talking with your teen is one of the most important things you can do to help keep your child safe.

KNOW WHAT'S GOING ON

It's important to understand some of the typical behaviors and feelings of teenagers, even if your teenager thinks you don't!

Teens are very interested in:

- New ways of doing things.
- The present, with little interest in the future. With maturity, the future becomes more important.

Teens often:

- Feel awkward and believe they don't fit in.
- Behave childishly when stressed.

Teens want:

- Role models for themselves.
- To be capable and needed.

SET CLEAR LIMITS AND EXPECTATIONS

Talk about limits to which you can both agree:

- Homework completion and school progress
- How many nights out each week, and how late
- After-school activities or jobs
- Allowance or money
- Safety in and around motor vehicles

Clearly communicate any change in the original limits.

You have specific reasons for deciding to change what was agreed to. You aren't simply giving up because your teen didn't follow the rules.

POSITIVE COMMUNICATION

Good communication—talking and listening—with your teenager may be the most important part of your relationship.

Since teens are forming their own identity and testing limits, some conversations may lead to

disagreements and become uncomfortable. Your goal is to have open, respectful, and honest conversations. Teens need to feel loved and that their point of view is respected, even when you disagree.

Positive communication gives teenagers a chance to:

- Learn how to talk honestly and respectfully with others, even when they disagree.
- Feel more confident in discussing their needs and feelings.
- Know that a positive attitude can keep them safe and out of fights.

Make a habit of talking about whatever makes your teen happy.
No matter what your teen's interest—sports, music, clothing, TV, video games, friends, school—ask questions and learn what's going on.

Try to eat together whenever possible.
Mealtimes are good times to talk and listen.

Answer questions directly and honestly.

If you have made a mistake, admit it.
"I'm sorry" are very powerful words for a teenager to hear from parents.

Notice your teen's feelings.
"You seem upset about your relationship with _____."

Be aware of your own reactions and emotions.
Teenagers are great at saying or doing things that annoy their parents. Take time to think about your responses and decisions to your teen's requests.

Offer your opinion without lecturing or judging.
Know that you may hear something with which you disagree. Avoid statements like, "That's stupid." or "You're wrong." Try saying, "I hear you, but this is how I see it..."

Give all of your attention.
If the phone rings, don't answer it. It also is difficult to talk while doing other things, like watching TV.

Offer assistance.
"Is there something I can do to help?"

WHEN TALKING IS DIFFICULT

Yelling, threatening, blaming, and name-calling can only make matters worse. Sometimes teens just don't want to talk with their parents.

Consider helping your teen find other caring adults who share your values. It may be easier to hear advice from one of these other adults.

KEEPING YOUR TEEN SAFE

Know where your child is after school.
The most common time for teenagers to get into trouble is between 2:00 and 6:00 PM. If not supervised, this is often when teens fight, use drugs, and have sex.

Talk with your child about carrying a weapon.
Carrying a weapon makes people feel bold, leading to foolish behaviors. Carrying a weapon gives a false sense of protection and makes your teen less safe.

Teach your child that it takes more courage to walk away from a fight than to fight.
Most young people hurt in fights have been fighting with someone they know. Teach your child how to resolve problems without fighting. Your example is the best way for your child to learn this.

Let your teen know that it is more important to know how to walk away from a fight than how to win one, and that it is possible to stand up for yourself without fighting.

IF YOUR TEEN GETS INTO A FIGHT

Often teenagers who get into a fight are just in the wrong place at the wrong time. Sometimes fighting is the only choice they know.

Talk about what happened:

- Find out what caused the fight. This helps avoid future fights. Did it start with an argument? An insult? Was it revenge? Did it result from being robbed? Getting jumped?
- Listen to the whole story. Try not to interrupt, scold, judge, or problem solve. Just listen.

- Being hurt in a fight can be scary and embarrassing. It's important to pay attention to your teen's feelings.

Find out if the fight is over:

- Help resolve the problem. "Are you still afraid? Are you thinking of getting even? Do you think the other person is looking for revenge?"
- Involve your teen in finding a solution. "What else could you have done besides fight? Is there someone else who can help you and _____ find a solution to this problem?"

Develop a safety plan for the future:

- Change routes to avoid known threats. "Is there another way that you can get home? Can you leave home or school at a different time? Try not to travel alone."
- Guard against robbery. "Always know what's going on around you, especially if you are wearing new clothes or flashy jewelry. It may be better to just hand it over. Things can be replaced; you can't."
- Seek a safe place when being followed. "Walk or run into a store, police or fire station, or any other public building. Tell them it's an emergency and ask to use the phone to call for a ride. Or, go to a friend's home and get inside quickly."

WHEN YOUR TEEN MAY NEED HELP

Your teen may need help if you notice any of the following warning signs:

- Not talking, or a change in communication style
- Feeling down most of the time—losing interest in friends or activities
- Change in school performance, skipping school, or maybe even dropping out
- Trouble with the law

If you or your teenager needs help, please contact your pediatrician.

Connected Kids are Safe, Strong, and Secure

Graphic design and illustrations by Artists For Humanity, a non profit arts and entrepreneurship program for Boston teens.

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After the Shots...

Your child may need extra love and care after getting vaccinated. Some vaccinations that protect children from serious diseases also can cause discomfort for a while. Here are answers to questions many parents have after their children have been vaccinated. If this sheet doesn't answer your questions, call your healthcare provider.

Vaccinations may hurt a little... but disease can hurt a lot!

Call your healthcare provider right away if you answer "yes" to any of the following questions:

- ☐ Does your child have a temperature that your healthcare provider has told you to be concerned about?
- ☐ Is your child pale or limp?
- ☐ Has your child been crying for more than 3 hours and just won't quit?
- ☐ Is your child's body shaking, twitching, or jerking?
- ☐ Is your child very noticeably less active or responsive?

▶ *Please see page 2 for information on the proper amount of medicine to give your child to reduce pain or fever.*

What to do if your child has discomfort

I think my child has a fever. What should I do?

Check your child's temperature to find out if there is a fever. An easy way to do this is by taking a temperature in the armpit using an electronic thermometer (or by using the method of temperature-taking your healthcare provider recommends). If your child has a temperature that your healthcare provider has told you to be concerned about or if you have questions, call your healthcare provider.

Here are some things you can do to help reduce fever:

- Give your child plenty to drink.
- Dress your child lightly. Do not cover or wrap your child tightly.
- Give your child a fever- or pain-reducing medicine such as acetaminophen (e.g., Tylenol) or ibuprofen (e.g., Advil, Motrin). The dose you give your child should be based on your child's weight and your healthcare provider's instructions. See the dose chart on page 2. *Do not give aspirin.* Recheck your child's temperature after 1 hour. Call your healthcare provider if you have questions.

My child has been fussy since getting vaccinated. What should I do?

After vaccination, children may be fussy because of pain or fever. To reduce discomfort, you may want to give your child a medicine such as acetaminophen or ibuprofen. See the dose chart on page 2. *Do not give aspirin.* If your child is fussy for more than 24 hours, call your healthcare provider.

My child's leg or arm is swollen, hot, and red. What should I do?

- Apply a clean, cool, wet washcloth over the sore area for comfort.
- For pain, give a medicine such as acetaminophen or ibuprofen. See the dose chart on page 2. *Do not give aspirin.*
- If the redness or tenderness increases after 24 hours, call your healthcare provider.

My child seems really sick. Should I call my healthcare provider?

If you are worried **at all** about how your child looks or feels, call your healthcare provider!

HEALTHCARE PROVIDER: PLEASE FILL IN THE INFORMATION BELOW.

If your child's temperature is 104 °F or 40 °C or higher, or if you have questions, call your healthcare provider.

Healthcare provider phone number 605-721-8939

immunization action coalition
IAC
immunize.org

Saint Paul, Minnesota • 651-647-9009 • www.immunize.org • www.vaccineinformation.org

www.immunize.org/catg.d/p4015.pdf • Item #P4015 (2/19)

Medicines and Doses to Reduce Pain and Fever

Choose the proper medicine, and measure the dose accurately.

1. Ask your healthcare provider or pharmacist which medicine is best for your child.
2. Give the dose based on your child's weight. If you don't know your child's weight, give the dose based on your child's age. Do not give more medicine than is recommended.
3. If you have questions about dosage amounts or any other concerns, call your healthcare provider.
4. **Always use a proper measuring device when giving acetaminophen liquid (e.g., Tylenol) or ibuprofen liquid (e.g., Advil, Motrin):**
   - **Use the device enclosed in the package.**
   - **If you misplace the device**, consult your healthcare provider or pharmacist for advice.
   - **Meal-time spoons are not accurate measures.** Never use a meal-time spoon for giving medication.

Take these two steps to avoid causing a serious medication overdose in your child.

1. Don't give your child a larger amount of acetaminophen (e.g., Tylenol) or ibuprofen (e.g., Motrin, Advil) than is shown in the table below. Too much of any of these medicines can be extremely dangerous.
2. When you give your child acetaminophen or ibuprofen, don't also give them over-the-counter cough or cold medicines. This can cause a medication overdose because cough and cold medicines often contain acetaminophen or ibuprofen. In fact, to be safe, don't ever give over-the-counter cough and cold medicines to your child unless you talk to your child's healthcare provider first.

ACETAMINOPHEN (Tylenol or another brand): How much to give?

Give every 4 to 6 hours, as needed, no more than 5 times in 24 hours (unless directed to do otherwise by your healthcare provider).

Child's weight	**Child's age**	**Infants' or children's liquid** 160 mg in each 5 mL	**Children's chewables – current product** 160 mg in each tablet	~~**Infants' drops**~~ 80 mg in each 0.8 mL	~~**Children's chewables**~~ 80 mg in each 0.8 mL
6–11 lbs (2.7–5 kg)	0–3 mos	Advised dose*_____			
12–17 lbs (5.5–7.7 kg)	4–11 mos	**2.5 mL**		OLD PRODUCT Throw away this product. It is out of date and should not be used.	OLD PRODUCT Throw away this product. It is out of date and should not be used.
18–23 lbs (8.2–10.5 kg)	12–23 mos	**3.75 mL**			
24–35 lbs (10.9–15.9 kg)	2–3 yrs	**5 mL**	**1 tablet**		
36–47 lbs (16.4–21.4 kg)	4–5 yrs	**7.5 mL**	**1½ tablets**		
48–59 lbs (21.8–26.8 kg)	6–8 yrs	**10 mL**	**2 tablets**		
60–71 lbs (27.3–32.3 kg)	9–10 yrs	**12.5 mL**	**2½ tablets**		
72–95 lbs (32.7–43.2 kg)	11 yrs	**15 mL**	**3 tablets**		

IBUPROFEN (Advil, Motrin, or another brand): How much to give?

Give every 6 to 8 hours, as needed, no more than 4 times in 24 hours (unless directed to do otherwise by your healthcare provider).

Child's weight	**Child's age**	**Infants' drops** 50 mg in each1.25 mL 	**Children's liquid** 100 mg in each 5 mL 	**Children's chewables or junior tablets** 100 mg in each tablet	~~**Children's chewables**~~ 50 mg in each tablet
less than 11 lbs (5 kg)	0–5 mos				
12–17 lbs (5.5–7.7 kg)	6–11 mos	**1.25 mL**	Advised dose* 2.5 mL		OLD PRODUCT Throw away this product. It is out of date and should not be used.
18–23 lbs (8.2–10.5 kg)	12–23 mos	**1.875 mL**	Advised dose* 3.75 mL		
24–35 lbs (10.9–15.9 kg)	2–3 yrs		**5 mL**	**1 tablet**	
36–47 lbs (16.4–21.4 kg)	4–5 yrs		**7.5 mL**	**1½ tablets**	
48–59 lbs (21.8–26.8 kg)	6–8 yrs		**10 mL**	**2 tablets**	
60–71 lbs (27.3–32.3 kg)	9–10 yrs		**12.5 mL**	**2½ tablets**	
72–95 lbs (32.7–43.2 kg)	11 yrs		**15 mL**	**3 tablets**	

* **HEALTHCARE PROVIDER:** Please fill in the advised dose.