

## After receiving vaccines...



Today's Date \_\_\_\_\_

You have received the vaccines that are checked below:

<input type="checkbox"/>	Influenza—TIV (flu shot)	<input type="checkbox"/>	Hepatitis A—hep A
<input type="checkbox"/>	Influenza—LAIV (nasal spray)	<input type="checkbox"/>	Hepatitis B—hep B
<input type="checkbox"/>	Pneumococcal—PPSV23	<input type="checkbox"/>	Varicella—Var (chickenpox)
<input type="checkbox"/>	Tetanus/Diphtheria—Td	<input type="checkbox"/>	Zoster—zoster (shingles)
<input type="checkbox"/>	Tetanus/Diphtheria/Pertussis—Tdap	<input type="checkbox"/>	Meningococcal Conj—MCV4
<input type="checkbox"/>	Human Papillomavirus—HPV4	<input type="checkbox"/>	Meningococcal Poly—MPSV4
<input type="checkbox"/>	Measles/Mumps/Rubella—MMR	<input type="checkbox"/>	

Sometimes the vaccines that protect you from serious diseases may also cause some discomfort. Reactions to vaccinations do occur, but serious reactions are rare. The more common reactions are redness, slight swelling and pain at the injection site, and fever.

- If your arm becomes sore, you may want to apply a cold pack or cloth to the injection area for 5-10 minutes at a time.
- Using or exercising the arm where the injection was given will distribute the medication quickly and decrease soreness
- If you develop a fever greater than 100° F (38° C)
  - Take a fever reducing medication as directed:  
\_\_\_\_\_ for the next 24 hours.
  - Drink plenty of fluids.
  - Dress lightly.

If you have other questions or are concerned about how you are feeling, CALL the clinic!

**The Clinic Phone Number is** \_\_\_\_\_

**Your next vaccine(s) are due on or after** \_\_\_\_\_