

Peniel Baptist Academy

110 Peniel Church Road...Palatka, Florida...32177-8550
Website: www.penieltwarriors.org...Email: contact@penieltwarriors.org

SPECIAL EDITION

HEALTH NEWS
CONTINUES....

STUDENT HEALTH NEWSLETTER

As of 2006, Florida Legislature requires all schools to provide parents with information regarding:

- ✓ school entry requirements
- ✓ required school immunizations
- ✓ the CDC recommended immunization schedule
- ✓ student health resource information, including available parent resources, and
- ✓ detailed information about seasonal flu, H1N1, meningococcal disease, and HPV vaccination.

Please read over this information carefully. You may contact the school office if you have any questions and we will direct you to the appropriate health agency.



PBA SCHOOL ENTRY



What information must parents provide the PBA Records Department before their child may start school?

1. **Birth Certificate (copy).** Information on how to obtain your child's birth certificate can be found online at [Birth | Florida Department of Health \(floridahealth.gov\)](http://Birth | Florida Department of Health (floridahealth.gov))
2. **Social Security Card (copy).** Information on how to obtain your child's social security number can be found online at [Social Security Forms | Social Security Administration \(ssa.gov\)](http://Social Security Forms | Social Security Administration (ssa.gov))
3. **Immunization Record (Form 680)** A Florida Certificate of Immunization, Form 680 (blue card), completed by a Florida physician or by a Florida county health department, must be turned into the school office within 30 days of enrollment for new students. All immunizations must stay current while attending PBA. Students who are not in compliance (current) with the required immunizations will be refused admittance or temporarily excluded from school attendance until the proper immunizations and documentation is received. This is a requirement of the state of Florida (see Florida Statute Section 1003.22). Parents may get a Blue Card from their child's doctor or the county health department that administered the immunization. Information about obtaining a Blue Card may also be found online at [Home | Florida SHOTS \(fishotsusers.com\)](http://Home | Florida SHOTS (fishotsusers.com))
4. **School Entry Health Exam (Canary Copy DH 3040)** The school physical exam must have been given within in the 12 months prior to school entry. The physical report must be recorded on the DH 3040 form by a licensed physician or an authorized agent of a Florida County Health Department attesting that the child is in good health or that any irregular condition is under treatment. Your child's physician or the health department will have a copy of the DH3040.

Washing Hands and Using Hand Sanitizer

With the recent Covid19 and common cold and flu seasons, we are taking some precautions here at PBA to help keep your children as healthy as possible. Our teachers will be encouraging students to thoroughly wash their hands several times a day, to cough and sneeze into a tissue, and to avoid putting their hands and fingers near their mouth, nose, and eyes. In addition to these common precautions, we have hand sanitizer dispensers in each classroom and other areas of the school.

Students are encouraged to use the hand sanitizer each time they enter the classroom as well as before and after lunch, after using the restroom, when returning from recess, or after coughing or sneezing.



Quick Facts About Hand Washing

1. Wet hands thoroughly with water.
2. Apply soap and work up a lather.
3. Scrub your hands as well as each individual finger for no less than 20 seconds. (about as long as it takes to sing "Happy Birthday" twice)
4. Rinse and dry.

IMMUNIZATION AND RECORD REQUIREMENTS (Form DH 680)**FOR CHILDREN ENTERING OR ATTENDING
SCHOOL, CHILD CARE, FAMILY DAY CARE AND/OR PRESCHOOL****Forms Required for Immunization Documentation:**

- Department of Health Form 680
- Ask your doctor, clinic or county health department to fill out the Department of Health Form 680 for you. Don't forget to take your child's immunization record with you.

Immunizations Required for Preschool Entry (age-appropriate doses as are medically indicated):

- Diphtheria-Tetanus-Pertussis Series (DTaP)
- Haemophilus influenzae type b (Hib)
- Hepatitis B Series
- Polio Series
- Measles-Mumps-Rubella (MMR)
- Varicella (Chickenpox) - either vaccine or history of disease documented by a healthcare provider

Immunizations Required for Kindergarten Entry:

- Diphtheria-Tetanus-Pertussis Series (five doses)
- Polio Series (four doses)
- Measles-Mumps-Rubella (2nd dose of mumps and rubella, preferably as two doses of measles, mumps, rubella and varicella vaccine (MMRV) in the combined form.)
- Hepatitis B Series (three doses)
- Varicella (Chickenpox) - either vaccine or history of disease documented by healthcare provider

Immunizations Required for 7th Grade Entry:

- Tetanus-Diphtheria Booster (Td or Tdap)

For more information, contact your [County Health Department](#) or private physician.

This information may be found at
www.doh.state.fl.us/Family/school/parent/parent_info.html

A detailed childhood immunization schedule is available online at
<http://www.cdc.gov/vaccines/>



Student Health Resource Information and Available Parent Resources

FL♥rida KidCare

Working families with uninsured children can apply year-round for affordable health care benefits from Florida KidCare.

KidCare provides quality medical benefits to families with uninsured children under the age of 19. Children enrolled in the program receive regular doctor's visits, immunizations and routine vision and hearing screening. Most families pay a premium of \$15 or \$20 a month.

Qualified families can enroll their children in KidCare by simply completing a one-page application, attaching the income verification documents, and mailing, faxing or e-mailing it back to KidCare anytime during the year. (See information box for contact information)

Applications and enrollment information are available at www.floridakidcare.org. Families can complete an on-line application, download and print an application, determine what documents they need to send and find answers to their questions about the program.

"Our goal is to enroll as many eligible children in the program as possible and we hope people will read this article and let others know about our benefits," said Rose Naff, executive director of the Florida Healthy Kids Corporation. "There's nothing like having the peace of mind that you have affordable health insurance which allows you to take your kids to the doctor instead of the emergency room when they're sick."

Since it began in 1998, Florida KidCare has offered working families access to high-quality doctors and preventative care for their children at a low cost. KidCare now covers more than 250,000 children statewide.

To enroll in Florida KidCare, visit www.floridakidcare.org or call 1-888-540-KIDS.

Florida Kid Care Enrollment Facts and Information

- Open enrollment applications can be downloaded off the Internet at: www.floridakidcare.org
- Families can also call 1-888-540-KIDS (1-888-540-5437) to receive the enrollment application by mail
- [Apply Now for Florida Healthy Kids | Kids Insurance](#)

Email: connect@healthykids.org

Family Checklist—

What will you need to have handy?

Your family's most recent tax return (**Form 1040**)
OR

Your Wage and Earning Statement (**W-2 Form**) OR

Current Pay Stubs (**covering the last 4 weeks**)

- Your children's Social Security numbers or the date applied for if you have not received a Social Security card.

Proof of Citizenship and Identity

**SEE THE INSERT FOR
DETAILED INFORMATION
ABOUT SEASONAL FLU,
MENINGOCOCCAL DISEASE
AND HPV VACCINATION.**

Florida Vaccines for Children Program (VFC)

Under federal government regulations, children from birth-18 years of age are eligible to receive free vaccines if they are enrolled in Medicaid, or have no health insurance, or are American Indians/Native Alaskans, or are covered by a health insurance that does not provide for immunizations. For more information call 1-800-888-7468 or visit [Vaccines for Children \(VFC\) Program | Florida Department of Health \(floridahealth.gov\)](#)

Head Lice

The peak season for lice is August through October and January. The most common symptom of head lice is itching. It's the body's reaction to the bites from lice. Lice are very small, about the size of a sesame seed, and they can be brown, tan or gray. They are tough to see and may require that you stand your child in the bright light or use a magnifying glass to see them. Lice eggs or "nits" are easier to see since they are stationary and are white. They may look like dandruff, but nits cannot be removed by brushing or shaking them off.



To get rid of lice, we suggest that parents first use an over-the-counter shampoo. Then, working one section of hair at a time in the bright sunlight, comb through and pick out all the lice and nits. Parents are also encouraged to wash all their child's bedding in hot water and dry them on the hot cycle for about 20 minutes, to spray objects such as the couch, pillows, stuffed animals or other such objects with lice spray, to vacuum all the furniture, car seats or any other place where lice may have fallen from your child's head, and to soak combs, brushes, hair clips and head bands in hot water for 10 minutes.

Students who have lice may not return to school until all the lice AND nits are removed from the hair. Students must stop by the front office on their first day back from school to have their hair inspected.

To help prevent your child from getting lice, we encourage you to talk to your child about not wearing other student's hats, hoodies, helmets or other articles of clothing that come in contact with hair. Girls with long hair may want to wear their hair in a braid or pony tail during peak seasons. Lice actually prefer clean hair, so hair with some product to add resistance may help (hair spray, gel, etc.).

Portions of this information is brought to you by Nix in their publication "Heads Up! The Facts of Lice".

Flu Prevention

Locate a Flu Shot: Check with your private healthcare provider, you local county health department, or use one of these convenient locators to schedule your flu vaccine.

- **CVS Pharmacy**
CVS/pharmacy Flu Clinic Locator: www.cvs.com/flu
- **Publix**
Flu & Other Immunizations: www.publix.com/vaccines
- **Walgreens Pharmacy**
Flu Center: www.walgreens.com/pharmacy/immunization/immunization_index.jsp
- *Store Locator for flu clinics:* www.walgreens.com/storelocator/find.jsp?check=true
- **Walmart**
Flu Shot : <https://www.walmart.com/cp/immunizations-flu-shots/1228302>

Information located at: www.floridahealth.gov/programs-and-services/immunization

Covid 19 Vaccine

Locate a Covid 19 vaccine: Check with your private healthcare provider, you local county health department, or use one of these convenient locators to schedule your flu vaccine.

- **Winn-Dixie**
<https://www.winndixie.com/pharmacy/covid-vaccine>
- **CVS Pharmacy**
CVS/pharmacy Covid Clinic Locator: www.cvs.com/coronavirus
- **Publix**
<https://www.publix.com/covid-vaccine>
- **Walmart**
Covid Shot : <https://www.walmart.com/cp/immunizations-flu-shots/1228302>

Information located at: <https://floridahealthcovid19.gov/>

<https://floridahealthcovid19.gov/vaccines/vaccine-locator/>

Table 1

COVID-19 vaccination recommendations have changed. Find the latest recommendations at www.cdc.gov/covid/schedule **Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 2023**

These recommendations must be read with the notes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars.

To determine minimum intervals between doses, see the catch-up schedule (Table 2).

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19-23 mos	2-3 yrs	4-6 yrs	7-10 yrs	11-12 yrs	13-15 yrs	16 yrs	17-18 yrs	
Hepatitis B (HepB)	1 st dose	← 2 nd dose →			← 3 rd dose →													
Rotavirus (RV): RV1 (2-dose series), RV5 (3-dose series)			1 st dose	2 nd dose	See Notes													
Diphtheria, tetanus, acellular pertussis (DTaP <7 yrs)			1 st dose	2 nd dose	3 rd dose			← 4 th dose →				5 th dose						
Haemophilus influenzae type b (Hib)			1 st dose	2 nd dose	See Notes			← 3 rd or 4 th dose → See Notes										
Pneumococcal conjugate (PCV13, PCV15)			1 st dose	2 nd dose	3 rd dose		← 4 th dose →											
Inactivated poliovirus (IPV <18 yrs)			1 st dose	2 nd dose	← 3 rd dose →				4 th dose								See Note	
COVID-19 (1vCOV-mRNA, 2vCOV-mRNA, 1vCOV-aPS)	2- or 3- dose primary series and booster (See Notes)																	
Influenza (IV4)	Annual vaccination 1 or 2 doses																	
Influenza (LAIV4)	Annual vaccination 1 or 2 doses																	
Measles, mumps, rubella (MMR)			See Notes				← 1 st dose →		2 nd dose									
Varicella (VAR)						← 1 st dose →		2 nd dose										
Hepatitis A (HepA)			See Notes				2-dose series; See Notes											
Tetanus, diphtheria, acellular pertussis (Tdap ≥7 yrs)													1 dose					
Human papillomavirus (HPV)													See Notes					
Meningococcal (MenACWY-D ≥9 mos, MenACWY-CRM ≥2 mos, MenACWY-TT ≥2 years)			See Notes															
Meningococcal B (MenB-4C, MenB-FHbp)																		
Pneumococcal polysaccharide (PPSV23)																		
Dengue (DEN4CVD; 9-16 yrs)																	See Notes	

Range of recommended ages for all children

Range of recommended ages for catch-up vaccination

Range of recommended ages

Recommended vaccination

Recommended vaccination based

No recommendation

Seropositive in endemic dengue areas (See Notes)

Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger

UNITED STATES
2023

Vaccines in the Child and Adolescent Immunization Schedule*

Vaccine	Abbreviation(s)	Trade name(s)
COVID-19	1vCOV-mRNA	Comirnaty [®] /Pfizer-BioNTech COVID-19 Vaccine Spikevax [®] /Moderna COVID-19 Vaccine
	2vCOV-mRNA	Pfizer-BioNTech COVID-19 Vaccine, Bivalent Moderna COVID-19 Vaccine, Bivalent
	1vCOV-aPS	Novavax COVID-19 Vaccine
Dengue vaccine	DENACVD	Dengvaxia [®]
Diphtheria, tetanus, and acellular pertussis vaccine	DTaP	Daptacel [®]
	DT	Infanrix [®]
	Hib (PRP-T)	No trade name
	Hib (PRP-OMP)	ActHib [®]
	HepA	Hibervix [®] PedvaxHib [®] Havrix [®] Vaqta [®]
Hepatitis B vaccine	HepB	Engerix-B [®] Recombivax HB [®]
	HPV	Gardasil 9 [®]
Human papillomavirus vaccine	HPV	Multiple
Influenza vaccine (inactivated)	II/IV	FluMist [®]
Influenza vaccine (live, attenuated)	LA/IV4	FluMist [®] Quadrivalent
Measles, mumps, and rubella vaccine	MMR	M-M-R-II [®] Priorix [®]
		Menactra [®]
Meningococcal serogroups A, C, W, Y vaccine	MenACWY-D	Menactra [®]
	MenACWY-CRM	Menveo [®]
	MenACWY-TT	MenQuadfi [®]
	MenB-4C	Bexsero [®]
	MenB-FHbp	Trumenba [®]
	Plv13	Prevnar 13 [®]
	Plv15	Vaxneuvance [™]
	PlvSV23	Pneumovax 23 [®]
	IPV	IPOL [®]
	IPV	Rotarix [®]
	RV1	Rotateq [®]
	RV5	Adacel [®]
	Tdap	Boostrix [®] Tenivac [®] TdapVax [™]
Tetanus, diphtheria, and acellular pertussis vaccine	Td	Variavax [®]
Tetanus and diphtheria vaccine	VAR	Variavax [®]

Combination vaccines (use combination vaccines instead of separate injections when appropriate)

DTaP, hepatitis B, and inactivated poliovirus vaccine	DTap-HepB-IPV	Pediarix [®]
DTaP, inactivated poliovirus, and Haemophilus influenzae type b vaccine	DTap-IPV/Hib	Pentacel [®]
DTaP and inactivated poliovirus vaccine	DTap-IPV	Kinrix [®]
DTaP, inactivated poliovirus, Haemophilus influenzae type b, and hepatitis B vaccine	DTap-IPV-Hib-HepB	Quadracel [®] Vaxelis [®]
Measles, mumps, rubella, and varicella vaccine	MMRV	ProQuad [®]

Administer recommended vaccines if immunization history is incomplete or unknown. Do not restart or add doses to vaccine series for extended intervals between doses. When a vaccine is not administered at the recommended age, administer at a subsequent visit. The use of trade name is for identification purposes only and does not constitute an endorsement.

How to use the child and adolescent immunization schedule

- Determine recommended vaccine by age (Table 1)
- Determine recommended interval for catch-up vaccination (Table 2)
- Assess need for additional recommended vaccines by medical condition or other indication (Table 3)
- Review vaccine types, frequencies, intervals, and considerations for special situations (Notes)
- Review contraindications and precautions for vaccine types (Appendix)

Recommended by the Advisory Committee on Immunization Practices (www.cdc.gov/vaccines/acip) and approved by the Centers for Disease Control and Prevention (www.cdc.gov), American Academy of Pediatrics (www.aap.org), American Academy of Family Physicians (www.aafp.org), American College of Obstetricians and Gynecologists (www.acog.org), American College of Nurse-Midwives (www.midwife.org), American Academy of Physician Associates (www.aapa.org), and National Association of Pediatric Nurse Practitioners (www.npnap.org).

Report

- Suspected cases of reportable vaccine-preventable diseases or outbreaks to your state or local health department
- Clinically significant adverse events to the Vaccine Adverse Event Reporting System (VAERS) at www.vaers.fda.gov or 800-822-7967

Questions or comments

Contact www.cdc.gov/od/oc/ifo or 800-CDC-INFO (800-232-4636), in English or Spanish, 8 a.m.–8 p.m. ET, Monday through Friday, excluding holidays

Download the CDC Vaccine Schedules app for providers at www.cdc.gov/vaccines/schedules/hcp/schedule-app.html

Helpful information

- Complete Advisory Committee on Immunization Practices (ACIP) recommendations: www.cdc.gov/vaccines/hcp/acip-recs/index.html
- General Best Practice Guidelines for Immunization (including contraindications and precautions): www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html
- Vaccine information statements: www.cdc.gov/vaccines/hcp/vis/index.html
- Manual for the Surveillance of Vaccine-Preventable Diseases (including case identification and outbreak response): www.cdc.gov/vaccines/pubs/surv-manual
- ACIP Shared Clinical Decision-Making Recommendations www.cdc.gov/vaccines/acip/acip-scdm-faqs.html



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



Scan QR code for access to online schedule



The Flu:

A Guide for Parents



Influenza (also known as flu) is a contagious respiratory illness caused by influenza viruses that infect the nose, throat and lungs. Flu is different from a cold, and usually comes on suddenly. Each year flu viruses cause millions of illnesses, hundreds of thousands of hospital stays and thousands or tens of thousands of deaths in the United States.

Flu can be very dangerous for children. CDC estimates that between 6,000 and 26,000 children younger than 5 years have been hospitalized each year in the United States because of influenza. The flu vaccine is safe and helps protect children from flu.

What parents should know

How serious is flu?

While flu illness can vary from mild to severe, children often need medical care because of flu. Children younger than 5 years and children of any age with certain long-term health problems are at high risk of flu complications like pneumonia, bronchitis, sinus and ear infections. Some health problems that are known to make children more vulnerable to flu include asthma, diabetes and disorders of the brain or nervous system.

How does flu spread?

Flu viruses are thought to spread mainly by droplets made when someone with flu coughs, sneezes or talks. These droplets can land in the mouths or noses of people nearby. A person also can get flu by touching something that has flu virus on it and then touching their mouth, eyes, or nose.

What are flu symptoms?

Flu symptoms can include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills, feeling tired and sometimes vomiting and diarrhea (more common in children than adults). Some people with the flu will not have a fever.



Protect your child

How can I protect my child from flu?

The first and best way to protect against flu is to get a yearly flu vaccine for yourself and your child.

- Flu vaccination is recommended for everyone 6 months and older every year. Flu shots and nasal spray flu vaccines are both options for vaccination.
- It's especially important that young children and children with certain long-term health problems get vaccinated.
- Caregivers of children at high risk of flu complications should get a flu vaccine. (Babies younger than 6 months are at high risk for serious flu complications, but too young to get a flu vaccine.)
- Pregnant women should get a flu vaccine to protect themselves and their baby from flu. Research shows that flu vaccination protects the baby from flu for several months after birth.
- Flu viruses are constantly changing and so flu vaccines are updated often to protect against the flu viruses that research indicates are most likely to cause illness during the upcoming flu season.

Is flu vaccine safe?

Flu vaccines are made using strict safety and production measures. Millions of people have safely received flu vaccines for decades. Flu shots and nasal spray flu vaccines are both options for vaccination. Different types of flu vaccines are licensed for different ages. Each person should get one that is appropriate for their age. CDC and the American Academy of Pediatrics recommend an annual flu vaccine for all children 6 months and older.

What are the benefits of getting a flu vaccine?

- **A flu vaccine can keep you and your child from getting sick.** When vaccine viruses and circulating viruses are matched, flu vaccination has been shown to reduce the risk of getting sick with flu by about half.
- **Flu vaccines can keep your child from being hospitalized from flu.** One recent study showed that flu vaccine reduced children's risk of flu-related pediatric intensive care unit admission by 74%.

- **Flu vaccine can prevent your child from dying from flu.**
A study using data from recent flu seasons found that flu vaccine reduced the risk of flu-associated death by half among children with high risk medical conditions and by nearly two-thirds among children without medical conditions.
- **Flu vaccination also may make your illness milder if you do get sick.**
- **Getting yourself and your child vaccinated also can protect others** who may be more vulnerable to serious flu illness, like babies and young children, older people, and people with certain long-term health problems.

What are some other ways I can protect my child against flu?

In addition to getting a flu vaccine, you and your child should take everyday actions to help prevent the spread of germs.

Stay away from people who are sick as much as possible to keep from getting sick yourself. If you or your child are sick, avoid others as much as possible to keep from infecting them. Also, remember to regularly cover your coughs and sneezes, wash your hands often, avoid touching your eyes, nose and mouth, and clean surfaces that may be contaminated with flu viruses. These everyday actions can help reduce your chances of getting sick and prevent the spread of germs to others if you are sick. However, a yearly flu vaccine is the best way to prevent flu illness.

If your child is sick

What can I do if my child gets sick?

Talk to your doctor early if you are worried about your child's illness.

Make sure your child gets plenty of rest and drinks enough fluids.

If your child is 5 years or older and does not have a long-term health problems and gets flu symptoms, including a fever and/or cough, consult your doctor as needed.

Children younger than 5 years of age – especially those younger than 2 years – and children with certain long-term health problems (including asthma, diabetes and disorders of the brain or nervous system), are at high risk of serious flu complications. Call your doctor or take your child to the doctor right away if they develop flu symptoms.

What if my child seems very sick?

Even healthy children can get very sick from flu. If your child is experiencing the following emergency warning signs, you should go to the emergency room:

- Fast breathing or trouble breathing
- Bluish lips or face

- Ribs pulling in with each breath
- Chest pain
- Severe muscle pain (child refuses to walk)
- Dehydration (no urine for 8 hours, dry mouth, no tears when crying)
- Not alert or interacting when awake
- Seizures
- Fever above 104°F
- In children less than 12 weeks, any fever
- Fever or cough that improve but then return or worsen
- Worsening of chronic medical conditions



This list is not all inclusive. Please consult your medical provider for any other symptom that is severe or concerning.

Is there a medicine to treat flu?

Yes. Antiviral drugs are prescription medicines that can be used to treat flu illness. They can shorten your illness and make it milder, and they can prevent serious complications that could result in a hospital stay. Antivirals work best when started during the first 2 days of illness. Antiviral drugs are recommended to treat flu in people who are very sick (for example, people who are in the hospital) or people who are at high risk of serious flu complications who get flu symptoms. Antivirals can be given to children and pregnant women.

How long can a sick person spread flu to others?

People with flu may be able to infect others from 1 day before getting sick to up to 5 to 7 days after. Severely ill people or young children may be able to spread the flu longer, especially if they still have symptoms.

Can my child go to school, day care, or camp if he or she is sick?

No. Your child should stay home to rest and to avoid spreading flu to other children or caregivers.

When can my child go back to school after having flu?

Keep your child home from school, day care, or camp for at least 24 hours after their fever is gone. (The fever should be gone without the use of a fever-reducing medicine.) A fever is defined as 100°F (37.8°C)* or higher.

*Many authorities use either 100 (37.8 degrees Celsius) or 100.4 F (38.0 degrees Celsius) as a cut-off for fever, but this number can vary depending on factors such as the method of measurement and the age of the person.



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

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/vaccine-safety/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>

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.

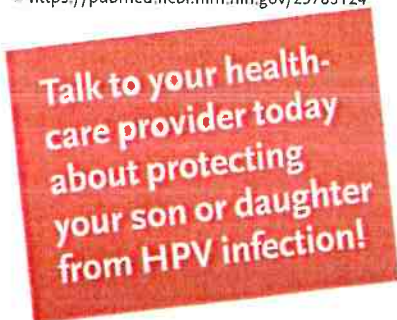
Are HPV vaccines safe?

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).

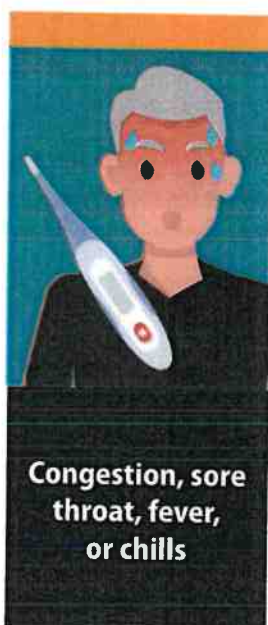
Is HPV vaccine effective?

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.



Symptoms of COVID-19

Know the symptoms of COVID-19, which can include the following:



If you are experiencing any of these symptoms, get tested for COVID-19.

Symptoms can range from mild to severe and appear 2–14 days after you are exposed to the virus that causes COVID-19.

**Seek medical care immediately if you or someone you know has
Emergency Warning Signs of COVID-19:**

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Difficulty waking or staying awake
- Pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone

This is not a list of all possible symptoms. Please call your healthcare provider for any other symptoms that are severe or concerning to you.



[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

Meningococcal Vaccines for Preteens and Teens



All preteens and teens should get vaccines to protect against meningococcal disease. Talk with your child's doctor or nurse about meningococcal vaccination to help protect your child's health.

Why does my child need meningococcal vaccines?

Meningococcal vaccines help protect against the bacteria that cause meningococcal disease. Meningococcal disease can refer to any illness caused by a type of bacteria called *Neisseria meningitidis*. Meningococcal disease is not very common in the United States, but teens and young adults are at increased risk.

The two most common types of illnesses include infections of the

- **Lining of the brain and spinal cord (meningitis)**
- **Bloodstream**

Even with treatment, about 10 to 15 out of 100 people with meningococcal disease will die from it. Meningococcal vaccines are the best way to protect preteens and teens from getting meningococcal disease.



When should my child be vaccinated?



Dose 1: Ages 11-12
Dose 2: Age 16

All preteens and teens should get 2 doses of the meningococcal conjugate (MenACWY) vaccine. They should get the first dose at ages 11-12 and a booster dose at 16 years old. If your teen hasn't gotten this meningococcal shot, talk to their doctor or nurse about getting it as soon as possible.

Teens and young adults (16 through 23 years old) may also get a serogroup B meningococcal (MenB) vaccine (2 doses). The preferred age to get MenB vaccine is 16 through 18 years old. Talk with your teen's doctor or nurse about meningococcal vaccination to help protect your child's health.

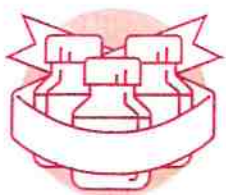
Are meningococcal vaccines safe for my child?

Researchers have studied the meningococcal vaccines very carefully and they are shown to be very safe. Like any vaccine, meningococcal vaccines may cause mild side effects, like redness and soreness where the shot was given (usually in the arm). Note that your child can get both meningococcal vaccines during the same visit, but in different arms.

Some preteens and teens might faint after getting a meningococcal vaccine or any shot. To help avoid fainting and injuries related to fainting, preteens and teens should sit or lie down when they get a shot and then for about 15 minutes after getting the shot. Serious side effects from meningococcal vaccines are rare.

How can I get help paying for these vaccines?

Most health insurance plans cover routine vaccinations. The Vaccines for Children (VFC) program also provides vaccines for children 18 years and younger who are uninsured, underinsured, Medicaid-eligible, American Indian, or Alaska Native. Learn more at www.cdc.gov/Features/VFCprogram.



Talk to your child's doctor or nurse about meningococcal vaccines, or visit www.cdc.gov/meningococcal/vaccine-info.html

