

VACCINE INFORMATION STATEMENT

Td or Tdap Vaccine

What You Need to Know

(Tetanus and Diphtheria or Tetanus, Diphtheria and Pertussis)

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?

Tetanus, diphtheria and pertussis can be very serious diseases.

TETANUS (Lockjaw) causes painful muscle spasms and stiffness, usually all over the body.

- It can lead to tightening of muscles in the head and neck so the victim cannot open his mouth or swallow, or sometimes even breathe. Tetanus kills about 1 out of 5 people who are infected.

DIPHTHERIA can cause a thick membrane to cover the back of the throat.

- It can lead to breathing problems, paralysis, heart failure, and even death.

PERTUSSIS (Whooping Cough) causes severe coughing spells which can lead to difficulty breathing, vomiting, and disturbed sleep.

- It can lead to weight loss, incontinence, rib fractures and passing out from violent coughing. Up to 2 in 100 adolescents and 5 in 100 adults with pertussis are hospitalized or have complications, including pneumonia and death.

These three diseases are all caused by bacteria. Diphtheria and pertussis are spread from person to person. Tetanus enters the body through cuts, scratches, or wounds.

The United States saw as many as 200,000 cases a year of diphtheria and pertussis before vaccines were available, and hundreds of cases of tetanus. Since then, tetanus and diphtheria cases have dropped by about 99% and pertussis cases by about 92%.

Children 6 years of age and younger get **DTaP** vaccine to protect them from these three diseases. But older children, adolescents, and adults need protection too.

2 Vaccines for adolescents and adults: Td and Tdap

Two vaccines are available to protect people 7 years of age and older from these diseases:

- **Td vaccine** has been used for many years. It protects against tetanus and diphtheria.
- **Tdap vaccine** was licensed in 2005. It is the first vaccine for adolescents and adults that protects against pertussis as well as tetanus and diphtheria.

A Td booster dose is recommended every 10 years. Tdap is given only once.

3 Which vaccine, and when?

Ages 7 through 18 years

- A dose of Tdap is recommended at age 11 or 12. This dose could be given as early as age 7 for children who missed one or more childhood doses of DTaP.
- Children and adolescents who did not get a complete series of DTaP shots by age 7 should complete the series using a combination of Td and Tdap.

Age 19 years and older

- All adults should get a booster dose of Td every 10 years. Adults under 65 who have never gotten Tdap should get a dose of Tdap as their next booster dose. Adults 65 and older may get one booster dose of Tdap.
- Adults (including women who may become pregnant and adults 65 and older) who expect to have close contact with a baby younger than 12 months of age should get a dose of Tdap to help protect the baby from pertussis.
- Healthcare professionals who have direct patient contact in hospitals or clinics should get one dose of Tdap.

Protection after a wound

- A person who gets a severe cut or burn might need a dose of Td or Tdap to prevent tetanus infection. Tdap should be used for anyone who has never had a dose previously. Td should be used if Tdap is not available, or for:
 - anybody who has already had a dose of Tdap,
 - children 7 through 9 years of age who completed the childhood DTaP series, or
 - adults 65 and older.

Pregnant women

- Pregnant women who have never had a dose of Tdap should get one, after the 20th week of gestation and preferably during the 3rd trimester. If they do not get Tdap during their pregnancy they should get a dose as soon as possible after delivery. Pregnant women who have previously received Tdap and need tetanus or diphtheria vaccine while pregnant should get Td.

Tdap or Td may be given at the same time as other vaccines.

4 Some people should not be vaccinated or should wait.

- Anyone who has had a life-threatening allergic reaction after a dose of any tetanus, diphtheria, or pertussis containing vaccine should not get Td or Tdap.
- Anyone who has a severe allergy to any component of a vaccine should not get that vaccine. Tell your doctor if the person getting the vaccine has any severe allergies.
- Anyone who had a coma, or long or multiple seizures within 7 days after a dose of DTP or DTaP should not get Tdap, unless a



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cause other than the vaccine was found. These people may get Td.

- Talk to your doctor if the person getting either vaccine:
 - has epilepsy or another nervous system problem,
 - had severe swelling or severe pain after a previous dose of DTP, DTaP, DT, Td, or Tdap vaccine, or
 - has had Guillain-Barré Syndrome (GBS).

Anyone who has a moderate or severe illness on the day the shot is scheduled should usually wait until they recover before getting Tdap or Td vaccine. A person with a mild illness or low fever can usually be vaccinated.

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What are the risks from Tdap and Td vaccines?

With a vaccine, as with any medicine, there is always a small risk of a life-threatening allergic reaction or other serious problem.

Brief fainting spells and related symptoms (such as jerking movements) can happen after any medical procedure, including vaccination. Sitting or lying down for about 15 minutes after a vaccination can help prevent fainting and injuries caused by falls. Tell your doctor if the patient feels dizzy or light-headed, or has vision changes or ringing in the ears.

Getting tetanus, diphtheria or pertussis disease would be much more likely to lead to severe problems than getting either Td or Tdap vaccine.

Problems reported after Td and Tdap vaccines are listed below.

Mild problems

(Noticeable, but did not interfere with activities)

Tdap

- Pain (about 3 in 4 adolescents and 2 in 3 adults)
- Redness or swelling at the injection site (about 1 in 5)
- Mild fever of at least 100.4°F (up to about 1 in 25 adolescents and 1 in 100 adults)
- Headache (about 4 in 10 adolescents and 3 in 10 adults)
- Tiredness (about 1 in 3 adolescents and 1 in 4 adults)
- Nausea, vomiting, diarrhea, stomach ache (up to 1 in 4 adolescents and 1 in 10 adults)
- Chills, body aches, sore joints, rash, swollen glands (uncommon)

Td

- Pain (up to about 8 in 10)
- Redness or swelling at the injection site (up to about 1 in 3)
- Mild fever (up to about 1 in 15)
- Headache or tiredness (uncommon)

Moderate problems

(Interfered with activities, but did not require medical attention)

Tdap

- Pain at the injection site (about 1 in 20 adolescents and 1 in 100 adults)
- Redness or swelling at the injection site (up to about 1 in 16 adolescents and 1 in 25 adults)
- Fever over 102°F (about 1 in 100 adolescents and 1 in 250 adults)
- Headache (1 in 300)
- Nausea, vomiting, diarrhea, stomach ache (up to 3 in 100 adolescents and 1 in 100 adults)

Td

- Fever over 102°F (rare)

Tdap or Td

- Extensive swelling of the arm where the shot was given (up to about 3 in 100).

Severe problems

(Unable to perform usual activities; required medical attention)

Tdap or Td

- Swelling, severe pain, bleeding and redness in the arm where the shot was given (rare).

A severe allergic reaction could occur after any vaccine. They are estimated to occur less than once in a million doses.

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What if there is a serious reaction?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or behavior changes.

Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would start a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 or get the person to the nearest hospital. Otherwise, call your doctor.
- Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor might file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS is only for reporting reactions. They do not give medical advice.

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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.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling **1-800-338-2382** or visiting the VICP website at www.hrsa.gov/vaccinecompensation.

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How can I learn more?

- Ask your doctor.
- Call your local or state health department.
- 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

Vaccine Information Statement (Interim) Td and Tdap Vaccines

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Office Use Only



RCCD Student Health & Psychological Services

Norco College 2001 Third Street, Norco, CA 92860 Phone (951) 372-7046 Fax (951) 372-7184

Tetanus, Diptheria & Pertussis (TDAP) Vaccine Consent Form

1. Have you ever had a DPT series (of 3 shots) as a child? Yes No
2. When was your most recent DPT, DT, TD or Tetanus Toxoid? Yes _____ No
3. Have you ever had a severe reaction to a DPT, DT, TD or tetanus Toxoid? Yes No
4. Have you ever had a convulsion or problem with your nervous system? Yes No
5. Are you taking a drug or undergoing a treatment that lowers the bodies resistance to infection such as cortisone, prednisone, certain anti-cancer drugs or irradiation? Yes No
6. Are you allergic to Thimersol mercurial antiseptic? Yes No
7. Do you have an illness with fever today or did you during the past week? Yes No
8. Are you sick right now with anything more serious than a cold? Yes No
9. Are you pregnant? Yes No

Doctors usually do not recommend giving any vaccines to pregnant women unless there is a specific need. Pregnant women who need a tetanus should consult their physician

I have read or have had explained to me the information on the Vaccine Information Sheet (VIS) about the Tetanus, Diptheria & Pertussis Vaccine. I have had a chance to ask questions, which were answered to my satisfaction. I believe I understand the benefits and risks of the Tetanus, Diptheria & Pertussis Vaccine and request that it be given to me.

PRINT Last Name	PRINT First Name	Student ID#
Date of Birth	Age	Telephone #
Street Address	City	State Zip
Signature	Date	

For Clinic Use Only

Clinic Address	Date	Manufacturer	Lot#/Exp Date	Injection Site	Signature
Norco College 2001 3rd St Norco, CA 92860					