Immunisation:
What you need to know before you consent
Acknowledgements

Developed and regularly updated by:

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Communicable Disease Control Branch,
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Adelaide SA 5000

Version control and change history

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Reference:

• The Therapeutic Goods Administration product information [https://www.tga.gov.au](https://www.tga.gov.au)
Immunisation Information

The immunisation information in this folder is to help you understand more about certain diseases and the vaccines used to prevent them.

- You only need to read the sheets relevant to your vaccinations

This information will assist you in reaching a decision about choosing to vaccinate

What's the next step?

Go to **CHILDHOOD IMMUNISATION PROGRAM** tab – if this vaccination is for a child

OR

Go to **OTHER COMMON VACCINES** tab – if vaccinations are not for the Childhood Immunisation Program

The term Aboriginal is inclusive of Aboriginal and Torres Strait Islander People
This section includes information for the Childhood Immunisation Program.

Please note: Vaccines may be given in combination such as MMR (Measles, Mumps and Rubella) vaccine.

Routine Childhood Vaccines are due at:
- Birth
- 6 weeks, 4 and 6 months of age (additional vaccines for Aboriginal and Medically at Risk children)
- 12 months of age (additional vaccines for Aboriginal and Medically at Risk children)
- 18 months of age (additional vaccines for Aboriginal children)
- 4 years of age (additional vaccines for Medically at Risk children)

What's the next step?

Step 1: Read the Prevacination Screening Checklist (over page).

Step 2: Read the relevant information sheets for required age and vaccine.

Step 3: Discuss any queries with your immunisation provider.
Pre-vaccination screening checklist

This checklist helps your doctor/nurse decide about vaccinating you or your child. Please tell your doctor/nurse if the person about to be vaccinated:

- is unwell today
- has a disease which lowers immunity (e.g. leukaemia, cancer, HIV/AIDS) or is having treatment which lowers immunity (e.g. oral steroid medicines such as cortisone and prednisone, radiotherapy, chemotherapy)
- has had a severe reaction following any vaccine
- has any severe allergies (to anything)
- has had any vaccine in the past month
- has had an injection of immunoglobulin, or received any blood products or whole blood transfusion within the past year

Additional vaccines may be recommended if the person to be vaccinated:

- is an infant who was preterm
- identifies as an Aboriginal person
- does not have a functioning spleen
- is planning a pregnancy or anticipating parenthood
- is a parent, grandparent or carer of a newborn
- lives with someone who has a disease which lowers immunity (e.g. leukaemia, cancer, HIV/AIDS) or lives with someone who is having treatment which lowers immunity (e.g. oral steroid medicines such as cortisone and prednisone, radiotherapy, chemotherapy)
- is planning travel
- has an occupation or lifestyle factor(s) for which vaccination may be needed (discuss with your doctor of nurse)

- is pregnant
- has a past history of Guillain-Barré syndrome
- has a chronic illness
- has a bleeding disorder
- was a preterm infant
- is an infant of a mother who was receiving highly immunosuppressive therapy (e.g. biological disease modifying anti-rheumatic drugs (bDMARDs) during pregnancy

Note: Please discuss this information or any questions you have about vaccination with your doctor or nurse before the vaccine is given. It is important for you to take home a personal record of your or your child’s vaccinations. If you do not have a record, ask your doctor or nurse to give you one and bring it with you each time you or your child have a vaccination. Vaccination details will be forwarded to the relevant national immunisation register.
Vaccines due at Birth

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia is able to offer advice on 1800 022 222.
Hepatitis B: A contagious virus spread mainly by blood, sexual contact, from mother to newborn baby and person-to-person (usually through contact between open sores or wounds).

Following acute infection, up to 10% of those infected as adults and up to 90% of those infected as neonates become chronically infected with hepatitis B. Carriers of hepatitis B virus often have no symptoms and may not be aware that they are infected; though they are capable of transmitting the disease.

1 in 4 chronic cases die prematurely from cirrhosis or liver cancer.

### Possible side effects of vaccination

<table>
<thead>
<tr>
<th>Common</th>
<th>Uncommon</th>
<th>Very Rare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low grade fever</td>
<td>Injection site nodule, lasting many weeks. No treatment is necessary</td>
<td>Severe allergic reaction (anaphylaxis)</td>
</tr>
</tbody>
</table>

**Note:** Extensive studies indicate that the birth dose of hepatitis B vaccine is very well tolerated by newborn infants. It does not interfere with either the establishment or maintenance of breast feeding.

### What to do to reduce side effects

- Give extra fluids (e.g. more breast/bottle feeds)
- Do not overdress the infant if hot

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Vaccines due at
6 weeks,
4 and 6 months

Additional vaccines may be due at 6 months of age for children with specific medical conditions.

Please discuss this with your immunisation provider.

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia is able to offer advice on 1800 022 222.
### Vaccines due at 6 weeks and 4 months

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<tr>
<td>Rotavirus</td>
<td>Rotavirus: Rotavirus is transmitted by the faecal/oral route, through close person to person contact and contact with contaminated objects. Rotavirus starts with fever and vomiting, followed by diarrhoea. The diarrhoea can be mild to severe and generally lasts 3-7 days. Prior to the vaccination program in Australia each year rotavirus disease caused 22,000 Emergency Department visits and 10,000 hospital admissions in children less than 5 years of age.</td>
<td>Common The following reactions may occur and may last up to 7 days - Diarrhoea - Vomiting Very Rare - Severe allergic reaction (anaphylaxis) - Intussusception – a type of bowel obstruction – can occur in 1 in 17,000 children after the 1st or 2nd dose</td>
<td>- Give extra fluids (e.g. more breast/bottle feeds or water) - Paracetamol liquid can be given according to the instructions on the bottle - Do not overdress the infant if hot</td>
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Vaccines due at 6 weeks and 4 months

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| **Pneumococcal** | *Pneumococcal infections:* bacteria spread by airborne droplets from the nose and throat; causes fever, pneumonia (severe chest infection), septicaemia (blood poisoning), meningitis (infection of the tissues surrounding the brain) and occasionally other infections. About 3 in 10 people with meningitis die. | **Common**  
• Pain, redness and swelling at the injection site  
• Low grade fever  
• Irritability, drowsiness and decreased appetite  
**Uncommon**  
• Injection site nodule lasting weeks, no treatment necessary  
**Very Rare**  
• Severe allergic reaction (anaphylaxis) | • Give extra fluids (e.g. more breast/bottle feeds or water)  
• Paracetamol liquid can be given according to the instructions on the bottle  
• Do not overdress the infant if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
### Vaccines due at 6 weeks, 4 and 6 months

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</table>
| Diphtheria/Tetanus/ Pertussis (Whooping Cough) | **Diphtheria:** contagious bacteria spread by airborne droplets from the nose and throat; causes severe throat and breathing difficulties, nerve paralysis and heart failure. About 16% of patients die.  
**Tetanus:** caused by toxin of bacteria in soil; causes painful muscle spasms, convulsions and lockjaw. About 2 in 100 patients die.  
**Pertussis** (whooping cough): contagious bacteria spread by airborne droplets from the nose and throat; causes “whooping cough” and vomiting; cough can last up to 3 months. About 1 in 125 babies under 6 months who have pertussis die from pneumonia or brain damage. | **Common**  
- Pain, redness and swelling at injection site  
- Low grade fever  
- Irritable, crying, unsettled and generally unhappy  
- Drowsiness or tiredness  
**Uncommon**  
- Injection site nodule, lasting many weeks.  
No treatment is necessary  
**Rare**  
- Continuous screaming for 3 or more hours  
**Very Rare**  
- Severe allergic reaction (anaphylaxis)  
- Hypotonic-hyporesponsive episode – when an infant becomes pale, limp and unresponsive for a short period. This can occur from 1 to 48 hours after the vaccination | • Give extra fluids (e.g. more breast/bottle feeds or water)  
• Paracetamol liquid can be given according to the instructions on the bottle  
• Do not overdress the infant if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Hepatitis B

Not a live virus vaccine

**Hepatitis B:** A contagious virus spread mainly by blood, sexual contact, from mother to newborn baby, person-to-person (usually through contact between open sores or wounds).

Following acute infection, up to 10% of those infected as adults and up to 90% of those infected as neonates become chronically infected with hepatitis B. Carriers of hepatitis B virus often have no symptoms and may not be aware that they are infected; though they are capable of transmitting the disease.

1 in 4 of all chronic cases die prematurely from cirrhosis or liver cancer.

### Possible side effects of vaccination

**Common**
- Low grade fever
- Pain, redness and swelling at the injection site
- Unsettled

**Uncommon**
- Injection site nodule, lasting many weeks. No treatment is necessary

**Very Rare**
- Severe allergic reaction (anaphylaxis)

### What to do to reduce side effects

- Give extra fluids (e.g. more breast/bottle feeds or water)
- Paracetamol liquid can be given according to the instructions on the bottle
- Do not overdress the infant if hot

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Comparing the effects of diseases with the possible side effects of vaccination:

### Vaccines due at 6 weeks, 4 and 6 months

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<th>Vaccine</th>
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</table>
| Hepatitis B | **Hepatitis B:** A contagious virus spread mainly by blood, sexual contact, from mother to newborn baby, person-to-person (usually through contact between open sores or wounds). Following acute infection, up to 10% of those infected as adults and up to 90% of those infected as neonates become chronically infected with hepatitis B. Carriers of hepatitis B virus often have no symptoms and may not be aware that they are infected; though they are capable of transmitting the disease. 1 in 4 of all chronic cases die prematurely from cirrhosis or liver cancer. | **Common**
- Low grade fever
- Pain, redness and swelling at the injection site
- Unsettled

**Uncommon**
- Injection site nodule, lasting many weeks. No treatment is necessary

**Very Rare**
- Severe allergic reaction (anaphylaxis) | • Give extra fluids (e.g. more breast/bottle feeds or water)
• Paracetamol liquid can be given according to the instructions on the bottle
• Do not overdress the infant if hot

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## Vaccines due at 6 weeks, 4 and 6 months

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</table>
| Polio   | Poliomyelitis: Contagious virus spread by faeces and saliva; symptoms can include fever, headache, vomiting, neck and back stiffness and may progress to paralysis. About 1 in 20 children and 1 in 3 adults with paralytic polio die. 100% of all children that remain unprotected and come in contact with the virus will become infected. | Common  
- Pain, redness and swelling at injection site  
- Low grade fever  
- Crying  
- Decreased appetite  
- Muscle aches  

Uncommon  
- Injection site nodule, lasting many weeks. No treatment is necessary  

Very Rare  
- Severe allergic reaction (anaphylaxis) | Give extra fluids (e.g. more breast/bottle feeds or water)  
Paracetamol liquid can be given according to the instructions on the bottle  
Do not overdress the infant if hot  

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222. |
## Vaccines due at 6 weeks, 4 and 6 months

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</table>
| **Hib - *Haemophilus influenzae* type b** | **Hib**: Contagious bacteria spread by airborne droplets from the nose or throat. Causes meningitis (inflammation of the brain), epiglottitis (respiratory obstruction), septicaemia (infection of the blood) and septic arthritis (infection in the joints). About 1 in 20 meningitis patients die. Up to 30% who survive have permanent brain or nerve damage. All epiglottitis patients die without treatment. | **Common**  
- Pain, redness and swelling at injection site  
- Mild fever  
**Uncommon**  
- Injection site nodule lasting weeks, no treatment necessary  
**Very Rare**  
- Severe allergic reaction (anaphylaxis) | • Give extra fluids (e.g. more breast/bottle feeds or water)  
• Paracetamol liquid can be given according to the instructions on the bottle  
• Do not overdress the infant if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Additional vaccines for Aboriginal children at 6, 12 and 18 months

The term Aboriginal is inclusive of Aboriginal and Torres Strait Islander People

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## Compare the effects of diseases with the possible side effects of vaccination

### Additional vaccines for Aboriginal children at 6 months

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<th></th>
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<tbody>
<tr>
<td>Pneumococcal</td>
<td><strong>Pneumococcal infections</strong>: bacteria spread by airborne droplets from the nose and throat; causes fever, pneumonia (severe chest infection), sepsicaemia (blood poisoning), meningitis (infection of the tissues surrounding the brain) and occasionally other infections. About 3 in 10 people with meningitis die.</td>
<td><strong>Common</strong>&lt;br&gt;• Pain, redness and swelling at the injection site&lt;br&gt;• Low grade fever&lt;br&gt;• Irritability, drowsiness and decreased appetite&lt;br&gt;<strong>Uncommon</strong>&lt;br&gt;• Injection site nodule lasting weeks, no treatment necessary&lt;br&gt;<strong>Very Rare</strong>&lt;br&gt;• Severe allergic reaction (anaphylaxis)</td>
<td>• Give extra fluids (e.g. more breast/bottle feeds or water)&lt;br&gt;• Paracetamol liquid can be given according to the instructions on the bottle&lt;br&gt;• Do not overdress the infant if hot</td>
<td></td>
</tr>
<tr>
<td>Due at 6 months of age</td>
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<tr>
<td>Not a live virus vaccine</td>
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</tbody>
</table>
## Compare the effects of diseases with the possible side effects of vaccination

**Additional vaccines for Aboriginal children at 12 and 18 months**

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<tr>
<td><strong>Hepatitis A</strong>&lt;br&gt;Dose 1 due at 12 months&lt;br&gt;Dose 2 due at 18 months&lt;br&gt;Not a live virus vaccine</td>
<td><strong>Hepatitis A</strong>: an acute infection of the liver. The virus survives for a long time on food kept at room temperature and on hands. Hepatitis A virus is spread from person to person or when contaminated food or water has been consumed. Causes fever, tiredness, feeling unwell, loss of appetite, vomiting, dark coloured urine, jaundice and pale faeces. Young children may not show symptoms but can still infect others. Aboriginal children are at a greater risk of acquiring hepatitis A and also for being hospitalised with the infection, compared to non-Aboriginal children.</td>
<td><strong>Common</strong>&lt;br&gt;- Pain, redness and swelling at injection site&lt;br&gt;- Low grade fever&lt;br&gt;- Headache&lt;br&gt;&lt;br&gt;<strong>Very Rare</strong>&lt;br&gt;- Severe allergic reaction (anaphylaxis)</td>
<td>• Give extra fluids (e.g. more breast/bottle feeds or water)&lt;br&gt;• Paracetamol liquid can be given according to the instructions on the bottle&lt;br&gt;• Do not overdress the child if hot&lt;br&gt;&lt;br&gt;<strong>Note:</strong> If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.</td>
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# Effects of the Disease

**Influenza (Flu)**

- Recommended annually for all Aboriginal children aged 6 months to <5 years.
- Not a live virus vaccine.

*People with a life threatening allergy to eggs should speak to their doctor before having the vaccination.*

**Influenza:** is a contagious virus spread from person to person by airborne droplets from the nose and throat, or by direct contact with secretions on hands, tissues and other objects.

Onset of illness is usually abrupt and includes malaise, fever, chills, headache, loss of appetite, myalgia, cough, nasal discharge and sneezing. Temperatures may be higher in children (and may result in febrile convulsions).

Influenza causes increased hospitalisations in the very young (under 5 year olds) and the elderly. Other high risk groups include pregnant women, people who are obese, diabetics and others with certain chronic medical conditions.

There is an estimated 3000 deaths in people older than 50 years of age in Australia each year.

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## Possible side effects of vaccination

**Common**
- Pain, redness and swelling at the injection site
- Fever
- Drowsiness, tiredness or generally feeling unwell
- Muscle aches

**Uncommon**
- Injection site nodule lasting weeks, no treatment necessary

**Very Rare**
- Severe allergic reaction (anaphylaxis)
- Guillain-Barre (1 in 1 million)

In children less than 5 years of age these side effects may be more pronounced.

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## What to do to reduce side effects

- Drink extra fluids
- Rest
- Paracetamol can be given according to the instruction on the bottle/packet
- Do not overdress if hot

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Vaccines due at 12 months

Additional vaccines may be due at 12 months of age for children with specific medical conditions. Please discuss this with your immunisation provider.

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia is able to offer advice on 1800 022 222.
### Vaccines due at 12 months

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</table>
| MMR – Measles/ Mumps/ Rubella Live virus vaccine | **Measles**: Highly infectious virus spread by airborne droplets from the nose and throat. Causes high fever, rash and cough. About 1 in 15 children with measles develop pneumonia (severe chest infection) and 1 in 1,000 develop encephalitis (brain inflammation). For every 10 children who develop measles encephalitis, 1 will die and many will suffer permanent brain damage. About 1 in 100,000 children develop SSPE (brain degeneration), which is always fatal. **Mumps**: Contagious virus spread by saliva. Causes swollen neck and salivary glands. 1 in 5,000 children develop encephalitis (brain inflammation). 1 in 5 adolescent/adult males develop inflammation of the testes. Can cause infertility and deafness. **Rubella**: A contagious virus spread by airborne droplets from the nose and throat. Causes fever, rash, painful swollen glands and painful joints. 1 in 6,000 develop encephalitis (brain inflammation). Causes severe malformations in babies of infected women – 9 in 10 babies infected during the first trimester of pregnancy will have major abnormalities (deafness, blindness, brain damage and heart defects). | **Common**  
- Pain, redness and swelling at injection site  
The following reactions may occur within 5 to 12 days after immunisation:  
- Moderate fever  
- High fever above 39°C lasting 2-3 days (5-15%)  
- Faint rash (not infectious) may develop  
- Cold like symptoms  
- Swollen glands, stiff neck or joint pain  
**Uncommon**  
- Injection site nodule lasting weeks, no treatment necessary  
**Very Rare**  
- Thrombocytopenia (bruising or bleeding) occurs after a first dose of MMR at a rate of about 5 in 100,000  
- Severe allergic reaction (anaphylaxis) | • Give extra fluids (e.g. more breast/bottle feeds or water)  
• Paracetamol liquid can be given according to the instructions on the bottle  
• Do not overdress the infant if hot and fever is not high  
If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222. |

**Compare the effects of diseases with the possible side effects of vaccination**
## Vaccines due at 12 months

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<td>Meningococcal ACWY</td>
<td><strong>Meningococcal</strong>: a bacteria spread by respiratory droplets. Causes meningitis (inflammation of the covering of the brain), septicaemia (blood infection) or a combination of the two. Pneumonia (severe chest infection), arthritis and conjunctivitis may also occur but are uncommon. A purple rash may develop in patients with meningococcal septicaemia. The rash may appear rapidly on any part of the body. Septicaemia with or without meningitis can be particularly severe, and can result in death. Of those who survive, 10-30% will have permanent long-term problems, such as the loss of limbs, deafness and brain damage.</td>
<td><strong>Common</strong>&lt;br&gt;The following reactions may occur:&lt;br&gt;- Pain, redness and swelling at injection site&lt;br&gt;- Mild fever&lt;br&gt;- Irritable or unsettled&lt;br&gt;- Decreased appetite&lt;br&gt;- Headache&lt;br&gt;<strong>Uncommon</strong>&lt;br&gt;- Injection site nodule lasting weeks, no treatment necessary&lt;br&gt;- Rash&lt;br&gt;<strong>Very Rare</strong>&lt;br&gt;- Severe allergic reaction (anaphylaxis)</td>
<td><strong>•</strong> Give extra fluids (e.g. more breast/bottle feeds or water)&lt;br&gt;<strong>•</strong> Paracetamol liquid can be given according to the instructions on the bottle&lt;br&gt;<strong>•</strong> Do not overdress the infant if hot</td>
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  - Pain, redness and swelling at the injection site  
  - Low grade fever  
  - Irritability, drowsiness and decreased appetite  

**Uncommon**  
  - Injection site nodule lasting weeks, no treatment necessary  

**Very Rare**  
  - Severe allergic reaction (anaphylaxis) |   
  - Give extra fluids (e.g. more breast/bottle feeds or water)  
  - Paracetamol liquid can be given according to the instructions on the bottle  
  - Do not overdress the child if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Vaccines due at 18 months

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia is able to offer advice on 1800 022 222.
### Compare the effects of diseases with the possible side effects of vaccination

**Vaccines due at 18 months**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
</table>
| **Diphtheria/Tetanus/Pertussis (Whooping Cough)** | **Diphtheria**: contagious bacteria spread by airborne droplets from the nose and throat; causes severe throat and breathing difficulties. The bacteria release a toxin which can cause nerve paralysis and heart failure. About 16% of patients die.  
**Tetanus**: caused by toxin of bacteria in soil; causes painful muscle spasm, convulsions and lockjaw. About 2 in 100 patients die.  
**Pertussis** (whooping cough): contagious bacteria spread by airborne droplets from the nose and throat; causes “whooping cough” and vomiting; cough can last up to 3 months. About 1 in 125 babies under 6 months who have pertussis die from pneumonia or brain damage. | **Common**  
- Pain, redness and swelling at injection site  
- Low grade fever  
**Uncommon**  
- Irritable, crying, unsettled and generally unhappy  
- Drowsiness or tiredness  
**Rare**  
- Continuous screaming for 3 or more hours  
**Very Rare**  
- Severe allergic reaction (anaphylaxis)  
- Hypotonic-hyporesponsive episode – when an infant becomes pale, limp and unresponsive for a short period. This can occur from 1 to 48 hours after the vaccination | - Give extra fluids  
- Paracetamol liquid can be given according to the instructions on the bottle  
- Do not overdress the child if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
<table>
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</thead>
</table>
| Chickenpox    | **Chickenpox**: A highly contagious virus. Causes low-grade fever and an itchy, vesicular rash (fluid-filled spots). Reactivation of the virus later in life causes herpes zoster (shingles). 1 in 100,000 patients develop encephalitis (brain inflammation). About 3 in 100,000 patients die. Infection during pregnancy can result in congenital malformations in the baby. Infection in the mother around delivery time results in a severe infection in the newborn baby in 1 in 3 cases. | **Common**  
- Fever  
- Pain, redness and swelling at injection site  
**Uncommon**  
- Injection site nodule lasting weeks, no treatment necessary  
**5-26 days following vaccination**  
- Pustular rash (2-5 lesions) usually at injection site, occasionally elsewhere (can occur in 1 in 20 children)  
*Most ‘chickenpox’ like rashes that occur within the first 2 weeks after vaccination are due to ‘wild type’ chickenpox.*  
**Very Rare**  
- Thrombocytopenia (reduced platelets in the blood), ataxia (impaired ability to coordinate movement) and encephalitis (brain inflammation)  
- Severe allergic reaction (anaphylaxis). | • Give extra fluids (e.g. more breast/bottle feeds or water)  
• Paracetamol liquid can be given according to the instructions on the bottle  
• Do not overdress child if hot  
• Treat rash as infectious  
• Seek advice from your pharmacy for products that may reduce itchiness  

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
### Vaccines due at 18 months

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</thead>
</table>
| **MMR - Measles/ Mumps/ Rubella Live virus vaccine** | **Measles:** Highly infectious virus spread by airborne droplets from the nose and throat. Causes high fever, rash and cough. About 1 in 15 children with measles develop pneumonia (severe chest infection) and 1 in 1,000 develop encephalitis (brain inflammation). For every 10 children who develop measles encephalitis, 1 will die and many suffer permanent brain damage. About 1 in 100,000 children develop SSPE (brain degeneration), which is always fatal. **Mumps:** Contagious virus spread by saliva. Causes swollen neck and salivary glands. 1 in 5,000 children develop encephalitis (brain inflammation). 1 in 5 adolescent/adult males develop inflammation of the testes. Can cause infertility and deafness. **Rubella:** A contagious virus spread by airborne droplets from the nose and throat. Causes fever, rash, painful swollen glands and painful joints. 1 in 6,000 develop encephalitis (brain inflammation). Causes severe malformations in babies of infected women – 9 in 10 babies infected during the first trimester of pregnancy will have major abnormalities (deafness, blindness, brain damage and heart defects). | **Common**  
• Pain, redness and swelling at injection site  
The following reactions may occur **within 5 to 12 days** after immunisation:  
• Moderate fever  
• High fever above 39°C lasting 2-3 days (5-15%)  
• Faint rash (not infectious)  
• Head cold and/or runny nose  
• Cold like symptoms  
• Swollen glands, stiff neck or joint pain  
**Uncommon**  
• Injection site nodule lasting weeks, no treatment necessary  
**Very Rare**  
• Thrombocytopenia (bruising or bleeding) can occur after the first dose (in about 5 in 100,000 people)  
• Severe allergic reaction (anaphylaxis) | **Give extra fluids (e.g. more breast/bottle feeds or water)**  
**Paracetamol liquid can be given according to the instructions on the bottle**  
**Do not overdress the infant if hot**  
If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222. |
### Compare the effects of diseases with the possible side effects of vaccination

#### Vaccines due at 18 months

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</tr>
</thead>
</table>
| Hib - *Haemophilus influenzae* type b | Hib: Contagious bacteria spread by airborne droplets from the nose or throat. Causes meningitis (inflammation of the brain), epiglottitis (respiratory obstruction), septicaemia (infection of the blood) and septic arthritis (infection in the joints). About 1 in 20 meningitis patients die. Up to 30% who survive have permanent brain or nerve damage. All epiglottitis patients die without treatment. | Common  
- Pain, redness and swelling at injection site  
- Mild fever  
Uncommon  
- Injection site nodule lasting weeks, no treatment necessary  
Very Rare  
- Severe allergic reaction (anaphylaxis) | • Give extra fluids (e.g. more breast/bottle feeds or water)  
• Paracetamol liquid can be given according to the instructions on the bottle  
• Do not overdress the infant if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Vaccines due at 4 years

Additional vaccines may be due at 4 years of age for children with specific medical conditions. Please discuss this with your immunisation provider.

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia is able to offer advice on 1800 022 222.
### Diphtheria/Tetanus/Pertussis (Whooping Cough)

- **Diphtheria**: contagious bacteria spread by airborne droplets from the nose and throat; causes severe throat and breathing difficulties. The bacteria release a toxin which can cause nerve paralysis and heart failure. About 16% of patients die.

- **Tetanus**: caused by toxin of bacteria in soil; causes painful muscle spasm, convulsions and lockjaw. About 2 in 100 patients die.

- **Pertussis** (whooping cough): contagious bacteria spread by airborne droplets from the nose and throat; causes “whooping cough” and vomiting; cough can last up to 3 months. About 1 in 125 babies under 6 months who have pertussis die from pneumonia or brain damage.

### Possible side effects of vaccination

<table>
<thead>
<tr>
<th>Common</th>
<th>Uncommon</th>
<th>Rare</th>
<th>Very Rare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain, redness and swelling at injection site</td>
<td>Irritable, crying, unsettled and generally unhappy</td>
<td>Continuous screaming for 3 or more hours</td>
<td>Severe allergic reaction (anaphylaxis)</td>
</tr>
<tr>
<td>Low grade fever</td>
<td>Drowsiness or tiredness</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### What to do to reduce side effects

- Give extra fluids
- Paracetamol liquid can be given according to the instructions on the bottle
- Do not overdress the child if hot

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
### Polio

**Not a live virus vaccine**

**Poliomyelitis:** Contagious virus spread by faeces and saliva; symptoms can include fever, headache, vomiting, neck and back stiffness and may progress to paralysis.

- About 1 in 20 children and 1 in 3 adults with paralytic polio die.
- 100% of all children that remain unprotected and come in contact with the virus will become infected.

**Possible side effects of vaccination**

**Common**
- Pain, redness and swelling at injection site
- Low grade fever
- Crying
- Decreased appetite
- Muscle aches

**Uncommon**
- Injection site nodule lasting weeks, no treatment necessary

**Very Rare**
- Severe allergic reaction (anaphylaxis)

**What to do to reduce side effects**

- Give extra fluids
- Paracetamol liquid can be given according to the instructions on the bottle
- Do not overdress the child if hot

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, [healthdirect Australia](https://www.healthdirect.gov.au) can offer advice on 1800 022 222.

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**Vaccines due at 4 years**

<table>
<thead>
<tr>
<th>Vaccine</th>
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</thead>
</table>
| Polio   | Poliomyelitis: Contagious virus spread by faeces and saliva; symptoms can include fever, headache, vomiting, neck and back stiffness and may progress to paralysis. About 1 in 20 children and 1 in 3 adults with paralytic polio die. 100% of all children that remain unprotected and come in contact with the virus will become infected. | Common
- Pain, redness and swelling at injection site
- Low grade fever
- Crying
- Decreased appetite
- Muscle aches

Uncommon
- Injection site nodule lasting weeks, no treatment necessary

Very Rare
- Severe allergic reaction (anaphylaxis) | Give extra fluids
- Paracetamol liquid can be given according to the instructions on the bottle
- Do not overdress the child if hot |
Other Common Vaccines

This section includes information on other vaccines:

- Adsorbed diphtheria-tetanus
- Diphtheria-tetanus-pertussis (Whooping Cough)
- Hepatitis A
- Hepatitis B
- Hepatitis A/B
- Human Papillomavirus (HPV)
- Influenza
- Measles, mumps, rubella (MMR)
- Meningococcal ACWY
- Meningococcal B
- Pneumococcal (Pneumovax 23)
- Pneumococcal (Prevenar 13)
- Poliomyelitis
- Varicella (Chickenpox)
- Zoster (herpes zoster)

What's the next step?

Step 1: Read the Prevaccination Screening Checklist (over page).
Step 2: Read the relevant information sheets for vaccine.
Step 3: Discuss any queries with your immunisation provider.
Pre-vaccination screening checklist

This checklist helps your doctor/nurse decide about vaccinating you or your child. Please tell your doctor/nurse if the person about to be vaccinated:

- is unwell today
- has a disease which lowers immunity (e.g. leukaemia, cancer, HIV/AIDS) or is having treatment which lowers immunity (e.g. oral steroid medicines such as cortisone and prednisone, radiotherapy, chemotherapy)
- has had a severe reaction following any vaccine
- has any severe allergies (to anything)
- has had any vaccine in the past month
- has had an injection of immunoglobulin, or received any blood products or whole blood transfusion within the past year
- is pregnant
- has a past history of Guillain-Barré syndrome
- has a chronic illness
- has a bleeding disorder
- was a preterm infant
- is an infant of a mother who was receiving highly immunosuppressive therapy (e.g. biological disease modifying anti-rheumatic drugs (bDMARDs) during pregnancy

Additional vaccines may be recommended if the person to be vaccinated:

- identifies as an Aboriginal person
- does not have a functioning spleen
- is planning a pregnancy or anticipating parenthood
- is a parent, grandparent or carer of a newborn
- lives with someone who has a disease which lowers immunity (e.g. leukaemia, cancer, HIV/AIDS) or lives with someone who is having treatment which lowers immunity (e.g. oral steroid medicines such as cortisone and prednisone, radiotherapy, chemotherapy)
- is planning travel
- has an occupation or lifestyle factor(s) for which vaccination may be needed (discuss with your doctor of nurse)

Note: Please discuss this information or any questions you have about vaccination with your doctor or nurse before the vaccine is given. It is important for you to take home a personal record of your or your child’s vaccinations. If you do not have a record, ask your doctor or nurse to give you one and bring it with you each time you or your child have a vaccination. Vaccination details will be forwarded to the relevant national immunisation register.
Diphtheria: contagious bacteria spread by airborne droplets from the nose and throat; causes severe throat and breathing difficulties. The bacteria release a toxin which can cause nerve paralysis and heart failure. About 16% of patients die.

Tetanus: caused by toxin of bacteria in soil; causes painful muscle spasm, convulsions and lockjaw. About 2 in 100 patients die.

### Possible side effects of vaccination

#### Common
- Low grade fever
- Pain, redness and swelling at injection site
- Nausea, feeling unwell and joint pain

#### Uncommon
- Headache
- Tiredness, feeling generally unwell
- Muscle aches (myalgia)

#### Very Rare
- Severe allergic reaction (anaphylaxis)
- Raised and itchy skin rash (urticarial)
- Inflammation of nerve in arm causing weakness and numbness (brachial neuritis)

### What to do to reduce side effects

- Drink extra fluids
- Rest
- Paracetamol can be given according to the instructions on the packet
- Do not overdress if hot

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.

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### Vaccines

- **ADT – Diphtheria/Tetanus**
  - Not a live virus vaccine

### Comparison

#### Vaccine
- **ADT – Diphtheria/Tetanus**

#### Effects of the Disease

<table>
<thead>
<tr>
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<th>Effects of the Disease</th>
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<tbody>
<tr>
<td>ADT – Diphtheria/Tetanus</td>
<td>Diphtheria: contagious bacteria spread by airborne droplets from the nose and throat; causes severe throat and breathing difficulties. The bacteria release a toxin which can cause nerve paralysis and heart failure. About 16% of patients die. Tetanus: caused by toxin of bacteria in soil; causes painful muscle spasm, convulsions and lockjaw. About 2 in 100 patients die.</td>
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#### Possible side effects of vaccination

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</tr>
<tr>
<td>- Inflammation of nerve in arm causing weakness and numbness (brachial neuritis)</td>
</tr>
</tbody>
</table>

#### What to do to reduce side effects

- Drink extra fluids
- Rest
- Paracetamol can be given according to the instructions on the packet
- Do not overdress if hot

---

ADT Vaccine
Recommendations for Adsorbed Diphtheria and Tetanus vaccine

Diphtheria and Tetanus (dT) Booster

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.

Note: Routine 10 yearly tetanus boosters are no longer recommended.
## Compare the effects of diseases with the possible side effects of vaccination

### Adolescent/Adult dTpa Vaccine

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<tr>
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| Diphtheria/Tetanus/ Pertussis (Whooping Cough) | **Diphtheria**: contagious bacteria spread by airborne droplets from the nose and throat; causes severe throat and breathing difficulties. The bacteria release a toxin which can cause nerve paralysis and heart failure. About 16% of patients die.  
**Tetanus**: caused by toxin of bacteria in soil; causes painful muscle spasm, convulsions and lockjaw. About 2 in 100 patients die.  
**Pertussis** (whooping cough): contagious bacteria spread by airborne droplets from the nose and throat; causes “whooping cough” and vomiting; cough can last up to 3 months. About 1 in 125 babies under 6 months who have pertussis die from pneumonia or brain damage. | **Common**  
- Pain, redness and swelling at injection site  
- Low grade fever  
- Headache  
- Nausea  
- Generally feeling unwell  
**Very Rare**  
- Severe allergic reaction (anaphylaxis)  
- Inflammation of nerve in arm causing weakness and numbness (brachial neuritis) | • Drink extra fluids  
• Rest  
• Paracetamol can be given according to the instructions on the packet  
• Do not overdress if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Recommendations for Adolescent/Adult dTpa vaccine

Adolescent/Adult dTpa vaccine

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
## Hepatitis A Vaccine

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<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis A</td>
<td><strong>Hepatitis A</strong>: an acute infection of the liver. The virus survives for a long time on food kept at room temperature and on hands. Hepatitis A virus is spread from person to person and when contaminated food or water has been consumed. Causes fever, tiredness, feeling unwell, loss of appetite, vomiting, dark coloured urine, jaundice and pale faeces. Young children may not show symptoms but can still infect others. Aboriginal children are at a greater risk of acquiring hepatitis A and also for being hospitalised with the infection, compared to non-Aboriginal children.</td>
</tr>
<tr>
<td>Not a live virus vaccine</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Common</strong></td>
<td>• Drink extra fluids</td>
</tr>
<tr>
<td>• Pain, redness and swelling at injection site</td>
<td>• Paracetamol can be given according to the instructions on the packet/bottle</td>
</tr>
<tr>
<td>• Low grade fever</td>
<td>• Do not overdress if hot</td>
</tr>
<tr>
<td>• Headache</td>
<td></td>
</tr>
<tr>
<td><strong>Very Rare</strong></td>
<td>If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.</td>
</tr>
<tr>
<td>• Severe allergic reaction (anaphylaxis)</td>
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</tr>
</tbody>
</table>
Recommendations for Hepatitis A vaccine

Hepatitis A Vaccine

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
### Compare the effects of diseases with the possible side effects of vaccination

#### Hepatitis B Vaccine

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<th>What to do to reduce side effects</th>
</tr>
</thead>
</table>
| Hepatitis B | **Hepatitis B**: A contagious virus spread mainly by blood, sexual contact, from mother to newborn baby, person-to-person (usually through contact between open sores or wounds). Following acute infection, up to 10% of those infected as adults and up to 90% of those infected as neonates become chronically infected with hepatitis B. Carriers of hepatitis B virus often have no symptoms and may not be aware that they are infected; though they are capable of transmitting the disease. 1 in 4 of all chronic cases die prematurely from cirrhosis or liver cancer. | **Common**  
• Low grade fever  
• Pain, redness and swelling at the injection site  
• Nausea/loss of appetite  
• Headache  

**Uncommon**  
• Injection site nodule, lasting many weeks. No treatment is necessary  

**Very Rare**  
• Severe allergic reaction (anaphylaxis) | • Drink extra fluids  
• Rest  
• Paracetamol can be given according to the instructions on the packet  
• Do not overdress if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Recommendations for Hepatitis B vaccine

Hepatitis B Vaccine

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
### Combined Hepatitis A and Hepatitis B Vaccine

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<td>Hepatitis A/</td>
<td><strong>Hepatitis A:</strong> an acute infection of the liver. The virus survives for a long time</td>
<td><strong>Common</strong></td>
<td>• Drink extra fluids</td>
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<tr>
<td>Hepatitis B</td>
<td>on food kept at room temperature and on hands.</td>
<td>• Pain, redness and swelling at injection site</td>
<td>• Paracetamol can be given according to the instructions on the packet</td>
</tr>
<tr>
<td></td>
<td>Hepatitis A virus is spread from person to person and when contaminated food or water</td>
<td>• Headache</td>
<td>• Do not overdress if hot</td>
</tr>
<tr>
<td></td>
<td>has been consumed. Causes fever, tiredness, feeling unwell, loss of appetite, vomiting,</td>
<td>• Generally feeling unwell and/or tired</td>
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<td>dark coloured urine, jaundice and pale faeces. Young children may not show symptoms but</td>
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<td>Aboriginal children are at a greater risk of acquiring hepatitis A and also for being</td>
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<td></td>
<td>hospitalised with the infection, compared to non-Aboriginal children.</td>
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<td></td>
<td><strong>Hepatitis B:</strong> A contagious virus spread mainly by blood, sexual contact, from mother</td>
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<td>to newborn baby, person-to-person (usually through contact between open sores or wounds).</td>
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</table>
Recommendations for Hepatitis A/B combination vaccine

Combined Hepatitis A and Hepatitis B Vaccine

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
**Human Papillomavirus (HPV)**

<table>
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</thead>
</table>
| Human Papillomavirus (HPV) | **Human Papillomavirus**: Virus spread mainly by sexual contact; up to 80% of the population will be infected at some time in their lives. Most people clear the HPV infection within 12-24 months. HPV can cause penile, anal, cervical, vulval and vaginal cancers, as well as genital warts. About 7 in 10 cervical cancers have been associated with HPV-16 and HPV-18. HPV types 6 and 11 are associated with more than 90% of genital warts. In Australia, there are significant numbers of hospitalisations and deaths from HPV related cancers each year. | Common  
- Mild to moderate pain  
- Redness and swelling at the injection site  
- Fever  
- Muscle aches and tiredness,  
- Headache  
Uncommon  
- Nausea  
- Injection site nodule, lasting many weeks. No treatment is necessary  
- Hypersensitivity reactions including bronchospasm and urticaria (itchy rash)  
Very Rare  
- Severe allergic reaction (anaphylaxis) |  
- Drink extra fluids  
- Rest  
- Paracetamol can be given according to the instructions on the packet  
- Do not overdress if hot  

Gardasil®9 recommendations:  
(2 doses 11 to <15 years of age)  
(3 doses >15 years of age)  
Not a live virus vaccine

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Recommendations for Human Papillomavirus (HPV) vaccine

Human Papillomavirus (HPV)

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
Influenza (Flu) vaccine

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza</td>
<td>Influenza: is a contagious virus spread from person to person by airborne droplets from</td>
<td>Common</td>
<td>• Drink extra fluids</td>
</tr>
<tr>
<td></td>
<td>the nose and throat, or by direct contact with secretions on hands, tissues and other</td>
<td>• Pain, redness and swelling at the injection site</td>
<td>• Rest</td>
</tr>
<tr>
<td></td>
<td>objects. Onset of illness is usually abrupt and includes malaise, fever, chills,</td>
<td>• Fever (in children aged 6 months to 3 years)</td>
<td>• Paracetamol can be given according to the instructions on the bottle/packet</td>
</tr>
<tr>
<td></td>
<td>headache, loss of appetite, myalgia, cough, nasal discharge and sneezing. Temperatures</td>
<td>• Drowsiness or tiredness and generally feeling unwell</td>
<td>• Do not overdress if hot</td>
</tr>
<tr>
<td></td>
<td>may be higher in children (and may result in febrile convulsions). Influenza causes</td>
<td>• Muscle aches</td>
<td></td>
</tr>
<tr>
<td></td>
<td>increased hospitalisations in the very young (under 5 year olds) and the elderly.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other high risk groups include pregnant women, people who are obese, diabetics and</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>others with certain chronic medical conditions. There is an estimated 3000 deaths in</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>people older than 50 years of age in Australia each year.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>*People with a life threatening allergy to eggs should speak to their doctor before</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>the vaccination</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In children less than 5 years of age these side effects may be more pronounced.

Uncommon
- Injection site nodule lasting weeks, no treatment necessary

Very Rare
- Severe allergic reaction (anaphylaxis)
- Guillain-Barré (1 in 1 million)

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Recommendations for Influenza (Flu) Vaccine

Influenza (Flu) vaccine

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
Compare the effects of diseases with the possible side effects of vaccination

### Measles, Mumps and Rubella (MMR) vaccine

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
</table>
| MMR – Measles/ Mumps/Rubella Live virus vaccine | **Measles:** Highly infectious virus spread by airborne droplets from the nose and throat. Causes high fever, rash and cough. About 1 in 15 children with measles develop pneumonia (severe chest infection) and 1 in 1,000 develop encephalitis (brain inflammation). For every 10 children who develop measles encephalitis, 1 will die and many will suffer permanent brain damage. About 1 in 100,000 children develop SSPE (brain degeneration), which is always fatal. **Mumps:** Contagious virus spread by saliva. Causes swollen neck and salivary glands. 1 in 5,000 children develop encephalitis (brain inflammation). 1 in 5 adolescent/adult males develop inflammation of the testes. Can cause infertility and deafness. **Rubella:** A contagious virus spread by airborne droplets from the nose and throat. Causes fever, rash, painful swollen glands and painful joints. 1 in 6,000 develop encephalitis (brain inflammation) Causes severe malformations in babies of infected women – 9 in 10 babies infected during the first trimester of pregnancy will have major abnormalities (deafness, blindness, brain damage and heart defects). | **Common**  
• Pain, redness and swelling at injection site  
The following reactions may occur **within 5 to 12 days** after immunisation:  
• Moderate fever  
• High fever above 39°C lasting 2-3 days (5-15%)  
• Faint rash (not infectious)  
• Cold like symptoms  
• Swollen glands, stiff neck or joint pain  
**Uncommon**  
• Injection site nodule lasting weeks, no treatment necessary  
**Very Rare**  
• Thrombocytopenia (bruising or bleeding) can occur after the first dose (in about 5 in 100,000 people)  
• Severe allergic reaction (anaphylaxis) | • Give extra fluids  
• Rest  
• Paracetamol can be given according to the instructions on the bottle/packet  
• Do not overdress if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.

2018
For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
## Meningococcal B vaccine (Men B)

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
</table>
| Meningococcal B | **Meningococcal**: a bacteria spread by respiratory droplets. Causes meningitis         | Common                                                                                                 | • Drink extra fluids  
• Rest                                                                                           |
|               | (inflammation of the covering of the brain), septicaemia (blood infection) or a       |   • High temperature (fever). In babies and young children the temperature usually peaks 6 hours after the | • Give Paracetamol with every dose of Men B vaccine for babies and young children                 |
|               | combination of the two. Pneumonia (severe chest infection), arthritis and conjunctivitis |   • Irritable, crying, unsettled and generally unhappy  
   may also occur but are uncommon.                                                                 | • Paracetamol can be given according to the instructions on the bottle/packet                      |
|               | A purple rash may develop in patients with meningococcal septicaemia. The rash may    |   • Loss of appetite/nausea                                                        
|               | appear rapidly on any part of the body. Septicaemia with or without meningitis can be |   • Headache (usually observed in adolescents/adults)                                          | • Do not overdress if hot  
|               | particularly severe, and can result in death.                                                                 |   • Localised pain, redness and swelling at injection site                                         |
|               | Of those who survive, 10-30% will have permanent long-term problems, such as the loss |   • Rash (toddlers)                                                                                   |                                                                                                  |
|               | of limbs, deafness and brain damage                                                                                                           |                                                                                                    |
|               | **Very Rare**                                                                              |                                                                                                                                                      |
|               | • Severe allergic reaction (anaphylaxis)                                                                                                        |                                                                                                                                                      |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Recommendations for Meningococcal B vaccine

Meningococcal B vaccine (Men B)

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
## Meningococcal ACWY vaccine

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meningococcal ACWY</td>
<td><strong>Meningococcal</strong>: a bacteria spread by respiratory droplets. Causes meningitis (inflammation of the covering of the brain), septicaemia (blood infection) or a combination of the two. Pneumonia (severe chest infection), arthritis and conjunctivitis may also occur but are uncommon. A purple rash may develop in patients with meningococcal septicaemia. The rash may appear rapidly on any part of the body. Septicaemia with or without meningitis can be particularly severe, and can result in death. Of those who survive, 10-30% will have permanent long-term problems, such as the loss of limbs, deafness and brain damage</td>
<td><strong>Common</strong>&lt;br&gt;• Pain, redness and swelling at injection site&lt;br&gt;• Mild fever&lt;br&gt;• Irritable or unsettled&lt;br&gt;• Decreased appetite&lt;br&gt;• Headache <strong>Uncommon</strong>&lt;br&gt;• Injection site nodule lasting weeks, no treatment necessary&lt;br&gt;• Rash <strong>Very Rare</strong>&lt;br&gt;• Severe allergic reaction (anaphylaxis)</td>
<td>• Drink extra fluids&lt;br&gt;• Rest&lt;br&gt;• Paracetamol can be given according to the instructions on the bottle/packet&lt;br&gt;• Do not overdress if hot</td>
</tr>
</tbody>
</table>

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Recommendations for Meningococcal ACWY vaccine

Meningococcal ACWY vaccine

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
## 23-valent Pneumococcal Vaccine (Pneumovax 23)

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
</table>
| Pneumococcal     | **Pneumococcal infections**: bacteria spread by airborne droplets from the nose and throat; causes fever, pneumonia (severe chest infection), septicaemia (blood poisoning), meningitis (infection of the tissues surrounding the brain) and occasionally other infections. Causes 1 in 3 of all pneumonia cases and 1 in 2 pneumonia hospitalisations in adults. About 3 in 10 people with meningitis die. | **Common**  
• Localised pain, redness and swelling at injection site  
• Low-grade temperature (fever)  

**Uncommon**  
• Occasionally, an injection-site nodule; may last many weeks; no treatment needed  

**Very Rare**  
• Severe allergic reaction (anaphylaxis) | • Drink extra fluids  
• Paracetamol can be given according to the instructions on the bottle/packet  
• Do not overdress if hot |
| Not a live virus vaccine |                                                                                       |                                                                                                      |                                                                                                    |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Recommendations for Pneumococcal (Pneumovax 23) Vaccine

23-valent Pneumococcal Vaccine (Pneumovax 23)

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
### 13-valent Pneumococcal Vaccine (Prevenar)

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
</table>
| Pneumococcal (Prevenar 13) | Pneumococcal infections: bacteria spread by airborne droplets from the nose and throat; causes fever, pneumonia (severe chest infection), septicaemia (blood poisoning), meningitis (infection of the tissues surrounding the brain) and occasionally other infections. Causes 1 in 3 of all pneumonia cases and 1 in 2 pneumonia hospitalisations in adults. About 3 in 10 people with meningitis die. | Common  
• Localised pain, redness and swelling at injection site  
• Drowsiness  
• Decreased appetite  
• Low-grade temperature (fever)  

Uncommon  
• Occasionally, an injection-site nodule; may last many weeks; no treatment needed  

Very Rare  
• Severe allergic reaction (anaphylaxis) | • Drink extra fluids  
• Paracetamol can be given according to the instructions on the bottle/packet  
• Do not overdress if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
Recommendations for 13-valent Pneumococcal Vaccine Prevenar 13

13-valent Pneumococcal Vaccine (Prevenar)

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
# Compare the effects of diseases with the possible side effects of vaccination

## Inactivated Polio Vaccine

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
</table>
| Polio         | **Poliomyelitis**: Contagious virus spread by faeces and saliva; symptoms can include fever, headache, vomiting, neck and back stiffness and may progress to paralysis. About 1 in 20 children and 1 in 3 adults with paralytic polio die. 100% of all children that remain unprotected and come in contact with the virus will become infected | Common: • Muscle aches  
• Localised pain, redness and swelling at injection site  
• Low-grade temperature (fever)  
**Uncommon**: • Occasionally, an injection-site nodule; may last many weeks; no treatment needed  
**Very Rare**: • Severe allergic reaction (anaphylaxis) | • Drink extra fluids  
• Rest  
• Paracetamol can be given according to the instructions on the bottle/packet  
• Do not overdress if hot |

If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.
For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
### Varicella (Chickenpox) Vaccine

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
</table>
| Chickenpox       | Chickenpox: A highly contagious virus. Causes low-grade fever and an itchy, vesicular rash (fluid-filled spots). Reactivation of the virus later in life causes herpes zoster (shingles). 1 in 100,000 patients develop encephalitis (brain inflammation). About 3 in 100,000 patients die. Infection during pregnancy can result in congenital malformations in the baby. Infection in the mother around delivery time results in a severe infection in the newborn baby in 1 in 3 cases. | Common  
  - Localised pain, redness and swelling at injection site  
  - Temperature (fever, can be >39°C)  
  - Seen 5-26 days after vaccination: Pustular rash (2-5 lesions), usually at injection site  
  - occasionally elsewhere  
  *Most 'chickenpox' like rashes that occur within the first 2 weeks after vaccination are due to 'wild type' chickenpox.*  
  Uncommon  
  - Occasionally, an injection-site nodule; may last many weeks; no treatment needed  
  Very Rare  
  - Thrombocytopenia (reduced platelets in the blood), ataxia (impaired ability to coordinate movement) and encephalitis (brain inflammation)  
  - Severe allergic reaction (anaphylaxis) | • Drink extra fluids  
• Paracetamol can be given according to the instructions on the bottle/packet  
• Do not overdress if hot  
• Treat rash as infectious  
• Seek advice from your pharmacy for products that may reduce itchiness  

*If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00pm. Outside of these hours, healthdirect Australia can offer advice on 1800 022 222.*
Recommendations for Varicella (Chickenpox) vaccine

Varicella (Chickenpox) vaccine

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.
### Zoster (herpes zoster) vaccine

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Effects of the Disease</th>
<th>Possible side effects of vaccination</th>
<th>What to do to reduce side effects</th>
</tr>
</thead>
</table>
| Herpes zoster (shingles)        | Herpes zoster (shingles): is a localised, painful, vesicular skin rash resulting from reactivation of the same virus that causes chickenpox earlier in life. Shingles is most common on the abdomen, sides and back, but can affect any part of the body, including the face. It usually lasts 10-15 days. Shingles can lead to post-herpetic neuralgia (PHN) which is persistent pain lasting longer than 3 months after the development of the rash. Depending on the site of reactivation, complications can occur, especially with increasing age. Depending on the area affected, the following may occur:  
  - Inflammation of the eye  
  - Inflammation of the brain and spinal cord  
  - Secondary bacterial infection  
  - Pneumonia | Common  
  - Pain, redness and swelling at injection site  
  - Headache  
  - Fatigue (tiredness)  
  - Fever (temperature)  
  - Chickenpox like rash around injection site may occur | • Give extra fluids  
• Paracetamol can be given according to the instructions on the packet  
• Seek advice from your pharmacy for products that may reduce itchiness | If you are concerned or worried, seek further advice from your doctor, immunisation nurse or the Immunisation Section at SA Health on 1300 232 272 Monday to Friday 8.30am – 5.00 pm. Outside of these hours, healthdirect Australia is able to offer advice on 1800 022 222. |
| Live virus vaccine              |                                                                                       |                                                             |                                                                 |

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Recommendations for Zoster (herpes zoster) vaccine

Zoster (herpes zoster) Vaccine

For recommendations refer to the current edition of the Australian Immunisation Handbook. Please consult with your immunisation provider for further information.