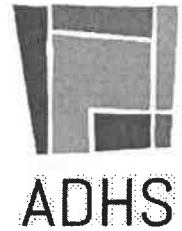


GUIDE TO ARIZONA IMMUNIZATIONS REQUIRED FOR ENTRY Child Care or Preschool (birth – 5 years)



Requirements by age at entry and on a continuing review status. Vaccines must follow minimum intervals and ages to be valid. A 4-day grace period applies in most situations.

Vaccine	2 Months	4 Months	6 Months	12 Months	15 Months	18+ Months
Hepatitis B (Hep B or HBV)	Hep B 1* (see pg. 2)	Hep B 2	Hep B 3 (received at 24 weeks of age or older and by 12 mos of age)		Documented 3 or 4 doses Note: If Hep B #3 was given before 24 weeks of age, a 4 th dose is needed.	
Diphtheria, Tetanus, and Pertussis	DTaP 1	DTaP 2	DTaP 3	==	DTaP 4	Documented 4 doses
<i>Haemophilus influenzae</i> type b (Hib)	Hib 1	Hib 2	Hib 3** (see pg.2)	==	Hib 4** (see pg. 2)	Documented 3-4 doses
Poliomyelitis (Polio) (IPV or OPV)	Polio 1	Polio 2	==	Polio 3	Documented 3 doses	
Measles, Mumps and Rubella (MMR)	==	==	==	MMR 1	Documented 1 dose Note: MMR and Varicella must be given on the same day or at least 28 days apart	
Varicella (chickenpox) (VAR)	==	==	==	VAR 1	Documented 1 dose Note: MMR and Varicella must be given on the same day or at least 28 days apart	
Hepatitis A (Maricopa County only)	==	==	==	Hep A 1***		Hep A 2 (due 6 months after dose 1)
Summary of vaccines required for 15 months to Pre-kindergarten	<p>All of these doses are required at 15 months of age and older: 3 Hep B, 4 DTaP, 3 Polio, 1 MMR, 1 Varicella, and 3-4 Hib or 1 Hib dose given at/after 15 months.</p> <p>***2 doses of Hepatitis A are required for children 1-5 years old in Maricopa County only, but are recommended in all other counties.</p>					

Please see reverse for additional information and exceptions and conditions to the rules.

GUIDE TO ARIZONA IMMUNIZATIONS REQUIRED FOR ENTRY

Child Care or Preschool

The laws and rules governing child care and preschool immunization requirements are Arizona Revised Statutes §15-884; and Arizona Administrative Code, R9-5-305 & R9-6-701–708. Please review the child care requirements in Table 7.1 and “catch-up” schedule in Table 7.2, located in R9-6-701-708.

Students must have proof of all required immunizations in order to attend child care or preschool. Parental recall or verbal history of any disease is not accepted; therefore these students must submit an ADHS medical exemption form. **Specifically with varicella (chickenpox), measles, or rubella disease a medical exemption with attached laboratory evidence of immunity is required.**

A child who is missing vaccines required for his age can start child care but must get a dose of each vaccine due within 15 days of enrollment and bring a copy of the immunization record completed by the clinic to the child care facility. **After 15 days, the child may not attend child care without documentation that the child has received the required vaccinations.**

Arizona law allows child care immunization exemptions for medical reasons, lab evidence of immunity, and religious beliefs. For further information and guidance please review the [Arizona Immunization Handbook for Schools and Child Care Programs](#) along with [Frequently Asked Questions](#).

Additional Information on vaccine requirements:

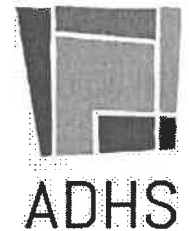
- **Hep B:** *Hep B dose #1 is required for babies 0-2 months attending child care. Minimum intervals for valid doses are as follows: The 2nd dose is due at least than 4 weeks after the 1st dose; the 3rd dose is due at least 8 weeks after the 2nd dose and at least 16 weeks after the 1st dose. The final dose of hepatitis B vaccine (HBV) must be at or after 24 weeks of age. If Hep B 3rd dose was given before 24 weeks of age, a 4th dose is needed.
- **DTaP:** The 2nd dose is due 4 weeks after the 1st dose; the 3rd dose is due 4 weeks after the 2nd dose; the 4th dose is due 6 months after the 3rd dose.
- **Hib:** If child is 7-14 months of age, doses are given 2 months apart. If child is at least 15 months old and less than 5 years, a single dose is needed to catch up. A Hib dose at/after 12 months is required for all children under 5 years.
**If Pedvax Hib is used for the first two doses, only 3 total doses are needed and the 3rd dose of Hib is not due until 12-15 months of age.
- **Poliomyelitis (Polio):** The 2nd dose is due 4 weeks after the 1st dose; the 3rd dose is due 4 weeks after the 2nd dose. If the child is 4+ years of age, the 3rd Polio may qualify as the child's final dose, but must have a 6 month interval between the last two Polio doses.

The U.S. currently does not give anything other than IPV (inactivated polio vaccine) whereas some foreign countries still give the OPV (oral polio vaccine). OPV given prior to April 1, 2016 will be presumed to be trivalent and therefore acceptable, regardless of country of administration. Any OPV doses administered after April 1, 2016 are presumed to be bivalent and therefore unacceptable.

- **Hep A: Required for Maricopa County only; Recommended for all other counties.** Children 1 through 5 years of age are required to obtain dose #1 within 15 days of enrollment in child care, preschool or Head Start. Dose #2 is due 6 months after dose #1.



GUIDE TO ARIZONA IMMUNIZATIONS REQUIRED FOR SCHOOL ENTRY GRADES K-12



Immunization requirements by age and grade for school attendance. Vaccines must follow minimum intervals and ages to be valid. A 4-day grace period applies in most situations.

Vaccine	4-6 Years Old Kindergarten or 1 st grade	7-10 Years Old	11 Years and Older
Hepatitis B (Hep B or HBV)	3 doses 3 doses acceptable if dose #3 was received at or after 24 weeks of age; otherwise 4 doses are required with the final dose at or after 24 weeks of age.		
Poliomyelitis/ Polio (IPV or OPV)	4 doses 3 doses acceptable if dose #3 was received on or after 4 years of age. Students who received 3 or 4 doses (with 4 weeks minimum intervals between doses) PRIOR to August 7, 2009 have met the requirement. The final dose of polio administered ON or AFTER August 7, 2009 must be given at a minimum of 4 years of age AND a minimum interval of 6 months following the previous dose. Polio is not required for students who are 18 years of age or older.		
Measles, Mumps and Rubella (MMR or MMR-V)	2 doses Minimum recommended age for dose #1 is 12 months. A 3 rd dose will be required if dose #1 was given more than 4 days before 1 st birthday. MMR and Varicella must be given on the same day or at least 28 days apart		
Varicella (chickenpox) (VAR or MMR-V)	1 dose Minimum recommended age for dose #1 is 12 months. 2 doses are required if the 1 st dose was given at 13 years of age or older. MMR and Varicella must be given on the same day or at least 28 days apart		
Diphtheria, Tetanus, and Pertussis	5 doses of DTaP, DTP or DT 4 doses acceptable if last dose was given on or after 4 years of age. A 6th dose is required if 5 doses have been given before 4 years of age.	4 doses of DTaP, DTP, DT, Tdap or Td 3 doses acceptable if first dose was given on or after 1 st birthday.	1 dose of Tdap is required Students must have a minimum of 3 doses of tetanus/diphtheria vaccine which may include 1 Tdap. If Tdap has not been previously given, 1 dose of Tdap is required when at least 5 years has passed since the last dose of tetanus-containing vaccine.
Quadrivalent Meningococcal (MenACWY or MCV4)			1 dose of quadrivalent meningococcal ACWY is required. A dose administered at 10 years of age will meet the requirement.

Please see reverse for additional information and exceptions and conditions to the rules.

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Phoenix, AZ 85007 • (602) 364-3630

Last revision: April 2019

GUIDE TO IMMUNIZATIONS REQUIRED FOR ARIZONA SCHOOL ENTRY

GRADES K-12

The laws and rules governing school immunization requirements are Arizona Revised Statutes §15-871-874; and Arizona Administrative Code, R9-6-701–708. Please review the school requirements in Table 7.1 and “catch-up” schedule in Table 7.2, located in R9-6-701-708.

Students must have proof of all required immunizations in order to attend school. Parental recall or verbal history of any disease is not accepted; therefore these students must submit an ADHS medical exemption form. **Specifically with varicella (chickenpox), measles, or rubella disease a medical exemption with attached laboratory evidence of immunity is required.** Arizona law allows K-12 immunization exemptions for medical reasons, lab evidence of immunity, and personal beliefs.

Homeless students and children in foster care are allowed a 5-day grace period to submit proof of immunization records (assuming that all other students have their immunization records submitted prior to attendance at school).

For further information and guidance please review the [Arizona Immunization Handbook for Schools and Child Care Programs](#) along with [Frequently Asked Questions](#).

Quick-Look Vaccine Exceptions and Conditions

- **Hepatitis B** – A child has received the required number of doses of hepatitis B virus (HBV) vaccine to qualify for Arizona school and child care/preschool attendance if **all** of the following apply:
 - ✓ There are at least 4 weeks between the 1st and 2nd dose of HBV vaccine;
 - ✓ There are at least 8 weeks between the 2nd and final dose of HBV vaccine;
 - ✓ There are at least 16 weeks (4 months) between the 1st and final dose of HBV vaccine;
 - ✓ **AND** the child received the final dose of HBV vaccine when they were at least 24 weeks of age.
- **Hepatitis B for students aged 11-15 years** – 2 doses meet the requirement if adult hepatitis B vaccine (Recombivax) was received. Dosage (10mcg/1.0mL) and type of vaccine must be clearly documented. If Recombivax was not the vaccine used, a 3-dose series is required.
- **Meningococcal Vaccine** – Only quadrivalent meningococcal ACWY vaccine doses will be accepted. The only quadrivalent meningococcal vaccines given currently in the U.S. are Menactra and Menveo. The Meningococcal Polysaccharide vaccine (Menomune) was a quadrivalent vaccine so is acceptable; however, production of this vaccine was discontinued in February 2017. Students who received this polysaccharide vaccine are considered acceptable for school requirements. No monovalent or bivalent meningococcal vaccinations will be accepted (MenA, MenB, MenC, or MenC/Y).
- **Poliomyelitis (Polio)** – The U.S. currently does not give anything other than IPV (inactivated polio vaccine) whereas some foreign countries still give the OPV (oral polio vaccine). OPV given prior to April 1, 2016 will be presumed to be trivalent and therefore acceptable, regardless of country of administration. Any OPV doses administered after April 1, 2016 are presumed to be bivalent and therefore unacceptable.
- **Td Booster** – A Td booster is required 10 years after the last dose of a tetanus-containing vaccine if student is still enrolled in school.

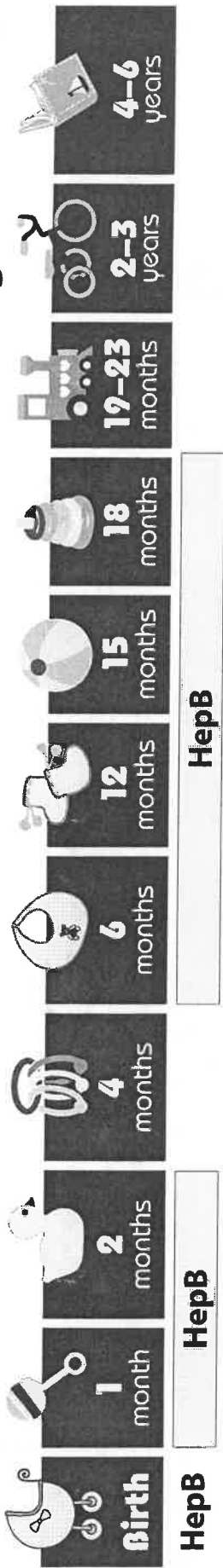


ADHS

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Phoenix, AZ 85007 • (602) 364-3630

Last revision: April 2019

2019 Recommended Immunizations for Children from Birth Through 6 Years Old



Shaded boxes indicate the vaccine can be given during shown age range.

HepB	HepB	HepB	HepB	HepB	HepB	HepB
RV	RV	RV	RV	RV	RV	RV
DTaP	DTaP	DTaP	DTaP	DTaP	DTaP	DTaP
Hib	Hib	Hib	Hib	Hib	Hib	Hib
PCV13	PCV13	PCV13	PCV13	PCV13	PCV13	PCV13
IPV	IPV	IPV	IPV	IPV	IPV	IPV
Influenza (Yearly)*						
MMR	MMR	MMR	MMR	MMR	MMR	MMR
Varicella	Varicella	Varicella	Varicella	Varicella	Varicella	Varicella
HepA[§]	HepA[§]	HepA[§]	HepA[§]	HepA[§]	HepA[§]	HepA[§]

NOTE: If your child misses a shot, you don't need to start over. Just go back to your child's doctor for the next shot. Talk with your child's doctor if you have questions about vaccines.

FOOTNOTES:

- * Two doses given at least four weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.
- § Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 months after the last dose. HepA vaccination may be given to any child 12 months and older to protect against hepatitis A. Children and adolescents who did not receive the HepA vaccine and are at high risk should be vaccinated against hepatitis A.

If your child has any medical conditions that put him at risk for infection or is traveling outside the United States, talk to your child's doctor about additional vaccines that he or she may need.



For more information, call toll-free
1-800-CDC-INFO (1-800-232-4636)
 or visit
www.cdc.gov/vaccines/parents



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



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Vaccine-Preventable Diseases and the Vaccines that Prevent Them

Disease	Vaccine	Disease spread by	Disease symptoms	Disease complications
Chickenpox	Varicella vaccine protects against chickenpox.	Air, direct contact	Rash, tiredness, headache, fever	Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs)
Diphtheria	DTaP* vaccine protects against diphtheria.	Air, direct contact	Sore throat, mild fever, weakness, swollen glands in neck	Swelling of the heart muscle, heart failure, coma, paralysis, death
Hib	Hib vaccine protects against <i>Haemophilus influenzae</i> type b.	Air, direct contact	May be no symptoms unless bacteria enter the blood	Meningitis (infection of the covering around the brain and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpipe and lead to serious breathing problems), pneumonia (infection in the lungs), death
Hepatitis A	HepA vaccine protects against hepatitis A.	Direct contact, contaminated food or water	May be no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice (yellowing of skin and eyes), dark urine	Liver failure, arthralgia (joint pain), kidney, pancreatic and blood disorders
Hepatitis B	HepB vaccine protects against hepatitis B.	Contact with blood or body fluids	May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain	Chronic liver infection, liver failure, liver cancer
Influenza (Flu)	Flu vaccine protects against influenza.	Air, direct contact	Fever, muscle pain, sore throat, cough, extreme fatigue	Pneumonia (infection in the lungs)
Measles	MMR** vaccine protects against measles.	Air, direct contact	Rash, fever, cough, runny nose, pink eye	Encephalitis (brain swelling), pneumonia (infection in the lungs), death
Mumps	MMR** vaccine protects against mumps.	Air, direct contact	Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain	Meningitis (infection of the covering around the brain and spinal cord), encephalitis (brain swelling), inflammation of testicles or ovaries, deafness
Pertussis	DTaP* vaccine protects against pertussis (whooping cough).	Air, direct contact	Severe cough, runny nose, apnea (a pause in breathing in infants)	Pneumonia (infection in the lungs), death
Polio	IPV vaccine protects against polio.	Air, direct contact, through the mouth	May be no symptoms, sore throat, fever, nausea, headache	Paralysis, death
Pneumococcal	PCV13 vaccine protects against pneumococcus.	Air, direct contact	May be no symptoms, pneumonia (infection in the lungs)	Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death
Rotavirus	RV vaccine protects against rotavirus.	Through the mouth	Diarrhea, fever, vomiting	Severe diarrhea, dehydration
Rubella	MMR** vaccine protects against rubella.	Air, direct contact	Sometimes rash, fever, swollen lymph nodes	Very serious in pregnant women—can lead to miscarriage, stillbirth, premature delivery, birth defects
Tetanus	DTaP* vaccine protects against tetanus.	Exposure through cuts in skin	Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever	Broken bones, breathing difficulty, death

* DTaP combines protection against diphtheria, tetanus, and pertussis.

** MMR combines protection against measles, mumps, and rubella.

Talk to your child's doctor or nurse about the vaccines recommended for their age.

	Flu Influenza	Tdap Tetanus, diphtheria, pertussis	HPV Human papillomavirus	Meningococcal		Pneumococcal	Hepatitis B	Hepatitis A	Polio	MMR Measles, mumps, rubella	Chickenpox Varicella
				MenACWY	MenB						
7-8 Years	Shaded box with dots	Shaded box with dots		Shaded box with dots		Shaded box with dots					
9-10 Years	Shaded box with dots	Shaded box with dots	Shaded box with dots	Shaded box with dots		Shaded box with dots					
11-12 Years	Shaded box with dots	Shaded box with dots	Shaded box with dots	Shaded box with dots		Shaded box with dots					
13-15 Years	Shaded box with dots	Shaded box with dots	Shaded box with dots	Shaded box with dots		Shaded box with dots					
16-18 Years	Shaded box with dots	Shaded box with dots	Shaded box with dots	Shaded box with dots	Shaded box with dots	Shaded box with dots					


More information: Everyone 6 months and older should get a flu vaccine every year.


All 11- through 12- year olds should get one shot of Tdap.


All 11- through 12- year olds should get a 2-shot series of HPV vaccine. A 3-shot series is needed for those with weakened immune systems and those who start the series at 15 years or older.


All 11- through 12- year olds should get one shot of meningococcal conjugate (MenACWY). A booster shot is recommended at age 16.

Teens 16–18 years old may be vaccinated with a serogroup B meningococcal (MenB) vaccine.

 These shaded boxes indicate when the vaccine is recommended for all children unless your doctor tells you that your child cannot safely receive the vaccine.

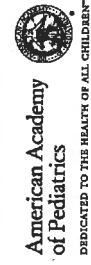
 These shaded boxes indicate the vaccine is recommended for children with certain health or lifestyle conditions that put them at an increased risk for serious diseases. See vaccine-specific recommendations at www.cdc.gov/vaccines/hctd/acip-recs/.

 These shaded boxes indicate the vaccine should be given if a child is catching up on missed vaccines.

 This shaded box indicates children not at increased risk may get the vaccine if they wish after speaking to a provider.



U.S. Department of Health and Human Services
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Vaccine-Preventable Diseases and the Vaccines that Prevent Them

Diphtheria (Can be prevented by Tdap vaccination)

Diphtheria is a very contagious bacterial disease that affects the respiratory system, including the lungs. Diphtheria bacteria can be spread from person to person by direct contact with droplets from an infected person's cough or sneeze. When people are infected, the bacteria can produce a toxin (poison) in the body that can cause a thick coating in the back of the nose or throat that makes it hard to breathe or swallow. Effects from this toxin can also lead to swelling of the heart muscle and, in some cases, heart failure. In serious cases, the illness can cause coma, paralysis, or even death.

Hepatitis A (Can be prevented by HepA vaccination)

Hepatitis A is an infection in the liver caused by hepatitis A virus. The virus is spread primarily person to person through the fecal-oral route. In other words, the virus is taken in by mouth from contact with objects, food, or drinks contaminated by the feces (stool) of an infected person. Symptoms can include fever, tiredness, poor appetite, vomiting, stomach pain, and sometimes jaundice (when skin and eyes turn yellow). An infected person may have no symptoms, may have mild illness for a week or two, may have severe illness for several months, or may rarely develop liver failure and die from the infection. In the U.S., about 100 people a year die from hepatitis A.

Hepatitis B (Can be prevented by HepB vaccination)

Hepatitis B causes a flu-like illness with loss of appetite, nausea, vomiting, rashes, joint pain, and jaundice. Symptoms of acute hepatitis B include fever, fatigue, loss of appetite, nausea, vomiting, pain in joints and stomach, dark urine, grey-colored stools, and jaundice (when skin and eyes turn yellow).

Human Papillomavirus (Can be prevented by HPV vaccination)

Human papillomavirus is a common virus. HPV is most common in people in their teens and early 20s. About 14 million people, including teens, become infected with HPV each year. HPV infection can cause cervical, vaginal, and vulvar cancers in women and penile cancer in men. HPV can also cause anal cancer, oropharyngeal cancer (back of the throat), and genital warts in both men and women.

Influenza (Can be prevented by annual flu vaccination)

Influenza is a highly contagious viral infection of the nose, throat, and lungs. The virus spreads easily through droplets when infected person coughs or sneezes and can cause mild to severe illness. Typical symptoms include a sudden high fever, chills, a dry cough, headache, runny nose, sore throat, and muscle and joint pain. Extreme fatigue can last from several days to weeks. Influenza may lead to hospitalization or even death, even among previously healthy children.

Measles (Can be prevented by MMR vaccination)

Measles is one of the most contagious viral diseases. Measles virus is spread by direct contact with the airborne respiratory droplets of an infected person. Measles is so contagious that just being in the same room after a person who has measles has already left can result in infection. Symptoms usually include a rash, fever, cough, and red, watery eyes. Fever can persist, rash can last for up to a week, and coughing can last about 10 days. Measles can also cause pneumonia, seizures, brain damage, or death.

Meningococcal Disease (Can be prevented by meningococcal vaccination)

Meningococcal disease has two common outcomes: meningitis (infection of the lining of the brain and spinal cord) and bloodstream infections. The bacteria that cause meningococcal disease spread through the exchange of nose and throat droplets, such as when coughing, sneezing, or kissing. Symptoms include sudden onset of fever, headache, and stiff neck. With bloodstream infection, symptoms also include a dark purple rash. About one of every 10 people who gets the disease dies from it. Survivors of meningococcal disease may lose their arms or legs, become deaf, have problems with their nervous systems, become developmentally disabled, or suffer seizures or strokes.

Mumps (Can be prevented by MMR vaccination)

Mumps is an infectious disease caused by the mumps virus, which is spread in the air by a cough or sneeze from an infected person. A child can also get infected with mumps by coming in contact with a contaminated object like a toy. The mumps virus causes swollen salivary glands under the ears or jaw, fever, muscle aches, tiredness, abdominal pain, and loss of appetite. Severe complications for children who get mumps are uncommon, but can include meningitis (infection of the lining of the brain and spinal cord), encephalitis (inflammation of the brain), permanent hearing loss, or swelling of the testes, which rarely results in decreased fertility.

Pertussis (Whooping Cough) (Can be prevented by Tdap vaccination)

Pertussis spreads very easily through coughing and sneezing. It can cause a bad cough that makes someone gasp for air after coughing fits. This cough can last for many weeks, which can make preteens and teens miss school and other activities. Pertussis can be deadly for babies who are too young to receive the vaccine. Often babies get whooping cough from their older brothers or sisters, like preteens or teens, or other people in the family. Babies with pertussis can get pneumonia, have seizures, become brain damaged, or even die. About half of children under 1 year of age who get pertussis must be hospitalized.

Pneumococcal Disease (Can be prevented by pneumococcal vaccination)

Pneumonia is an infection of the lungs that can be caused by the bacteria called "pneumococcus." These bacteria can cause other types of infections, too, such as ear infections, sinus infections, meningitis (infection of the lining of the brain and spinal cord), and bloodstream infections. Sinus and ear infections are usually mild and are much more common than the more serious forms of pneumococcal disease. However, in some cases, pneumococcal disease can be fatal or result in long-term problems like brain damage and hearing loss. The bacteria that cause pneumococcal disease spread when people cough or sneeze. Many people have the bacteria in their nose or throat at one time or another without being ill—this is known as being a carrier.

Polio (Can be prevented by IPV vaccination)

Polio is caused by a virus that lives in an infected person's throat and intestines. It spreads through contact with the stool of an infected person and through droplets from a sneeze or cough. Symptoms typically include sore throat, fever, tiredness, nausea, headache, or stomach pain. In about 1% of cases, polio can cause paralysis. Among those who are paralyzed, about 2 to 10 children out of 100 die because the virus affects the muscles that help them breathe.

Rubella (German Measles) (Can be prevented by MMR vaccination)

Rubella is caused by a virus that is spread through coughing and sneezing. In children, rubella usually causes a mild illness with fever, swollen glands, and a rash that lasts about 3 days. Rubella rarely causes serious illness or complications in children, but can be very serious to a baby in the womb. If a pregnant woman is infected, the result for the baby can be devastating, including miscarriage, serious heart defects, mental retardation, and loss of hearing and eyesight.

Tetanus (Lockjaw) (Can be prevented by Tdap vaccination)

Tetanus mainly affects the neck and belly. When people are infected, the bacteria produce a toxin (poison) that causes muscles to become tight, which is very painful. This can lead to "locking" of the jaw so a person cannot open his or her mouth, swallow, or breathe. The bacteria that cause tetanus are found in soil, dust, and manure. The bacteria enter the body through a puncture, cut, or sore on the skin. Complete recovery from tetanus can take months. One to two out of 10 people who get tetanus die from the disease.

Varicella (Chickenpox) (Can be prevented by varicella vaccination)

Chickenpox is caused by the varicella zoster virus. Chickenpox is very contagious and spreads very easily from infected people. The virus can spread from either a cough or sneeze. It can also spread from the blisters on the skin, either by touching them or by breathing in these viral particles. Typical symptoms of chickenpox include an itchy rash with blisters, tiredness, headache, and fever. Chickenpox is usually mild, but it can lead to severe skin infections, pneumonia, encephalitis (brain swelling), or even death.

If you have any questions about your child's vaccines, talk to your child's doctor or nurse.