

A Message from Secretary Mike Leavitt

U.S. Department of Health and Human Services



It is my great pleasure to present the *2007 Women's Health Daybook*. Use this *Daybook* as the first step in taking an active role in your health. It provides information on simple ways you can reduce your risk for many serious health problems. It will help you learn how to prevent or manage diseases, including heart disease, stroke, cancer, and diabetes, and protect your mental health.

Besides the important information in this *Daybook*, womenshealth.gov, a project of the Office on Women's Health, provides reliable women's health information. Free health information is available toll-free via 1-800-994-9662 and TDD: 1-888-220-5446 for those without Internet access.

Other valuable resources found in this *Daybook* by the Department range from childhood immunization schedules to information on how to prepare your family for emergencies or sudden disasters to prescription drug coverage under Medicare.

I encourage you to read all the information in this *Daybook* to learn how to live a longer, healthier, and happier life. Best wishes for a healthier 2007!

It's Your Time

12 Months to a Healthier You

On an average day, so many things seem more urgent than taking care of your health. Your job, your family, your relationships. Shopping for groceries, paying bills, attending school recitals, running errands, staying in touch with friends and relatives, doing chores, taking care of pets. The list can seem endless. The same is true for women in every profession, in every part of the country, of every race and ethnicity, of every faith, in every family structure.

All of those activities are important. But so are you! Beyond all your responsibilities to others is your responsibility to yourself. You must take an active role in your health. You are important. You matter. You are worthy of your own care.

If you haven't yet taken that first step to better health, or are uncertain where to



start, why not begin your journey now?

This 2007 Women's Health Daybook is a resource guide for women of all ages. Use it to help you learn more about common health problems, how to prevent

some diseases, and ideas for managing these conditions. You'll find charts that describe the screenings and immunizations that you and your loved ones should get. You'll find tips on how to get a second opinion from a doctor, how to read a drug label, and more. You'll be referred to the government's National Women's Health Information Center (NWHIC), with its toll-free telephone numbers and two web sites. NWHIC serves as your link to credible, pre-screened organizations; government hotlines; other trustworthy web sites; and publications.

Read this guide, share it with friends, write notes in it. Make it yours.

**“Let's dare to be ourselves,
for we do that better than anyone else can.”**

Shirley Briggs, in Sue Patton Thoele's *The Courage to Be Yourself* (1988)

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About Us

What is the U.S. Department of Health and Human Services?

The U.S. Department of Health and Human Services (HHS) is the federal agency responsible for protecting the health of all Americans. Its headquarters are based in Washington, DC. HHS is the publisher of the 2007 Women's Health Daybook.

What is the Office on Women's Health?

The Office on Women's Health (OWH) was established in 1991 as a division of the Office of Public Health and Science within HHS. Our mission is to improve the health and well-being of all U.S. women and girls. OWH leads and coordinates the efforts of all the HHS agencies and offices involved in women's health. We create and sponsor innovative programs that focus on the health of women and girls. We educate health professionals, such as physicians, dentists, researchers, therapists, and nurses. Our publications, web sites, and special events reach out to you, the public. We work to educate and motivate people to live healthier

lives by giving them trustworthy, accurate health information. As part of our work, we produced this resource guide.

What is the National Women's Health Information Center?

The National Women's Health Information Center (NWHIC) is a free service of the U.S. Department of Health and Human Services. NWHIC provides reliable, accurate, commercial-free information on the health of women and girls. It covers more than 800 topics, on issues ranging from adolescent health to reproductive health to older women's health.

You can access the resources of NWHIC in two ways: through a toll-free telephone call or through the Internet. NWHIC has an information referral center with trained Information Specialists answering your calls in either English or Spanish. Call 1-800-994-9662. For individuals who are hearing impaired, call TDD at 1-888-220-5446. NWHIC also has two comprehensive web sites that focus on women's and girls' health. Visit them online at www.womenshealth.gov and www.girlshealth.gov.

Whichever way you use NWHIC's services, you'll get

- ◆ clear answers to frequently asked questions
- ◆ links to thousands of health publications
- ◆ statistics on women's health
- ◆ online journals and dictionaries
- ◆ daily news on women's health
- ◆ a calendar of events
- ◆ a National Breastfeeding Helpline with trained peer counselors
- ◆ health information in Spanish

Breastfeeding

Best for baby. Best for mom.



www.womenshealth.gov/breastfeeding

How is NWHIC different from other web sites on women's health?

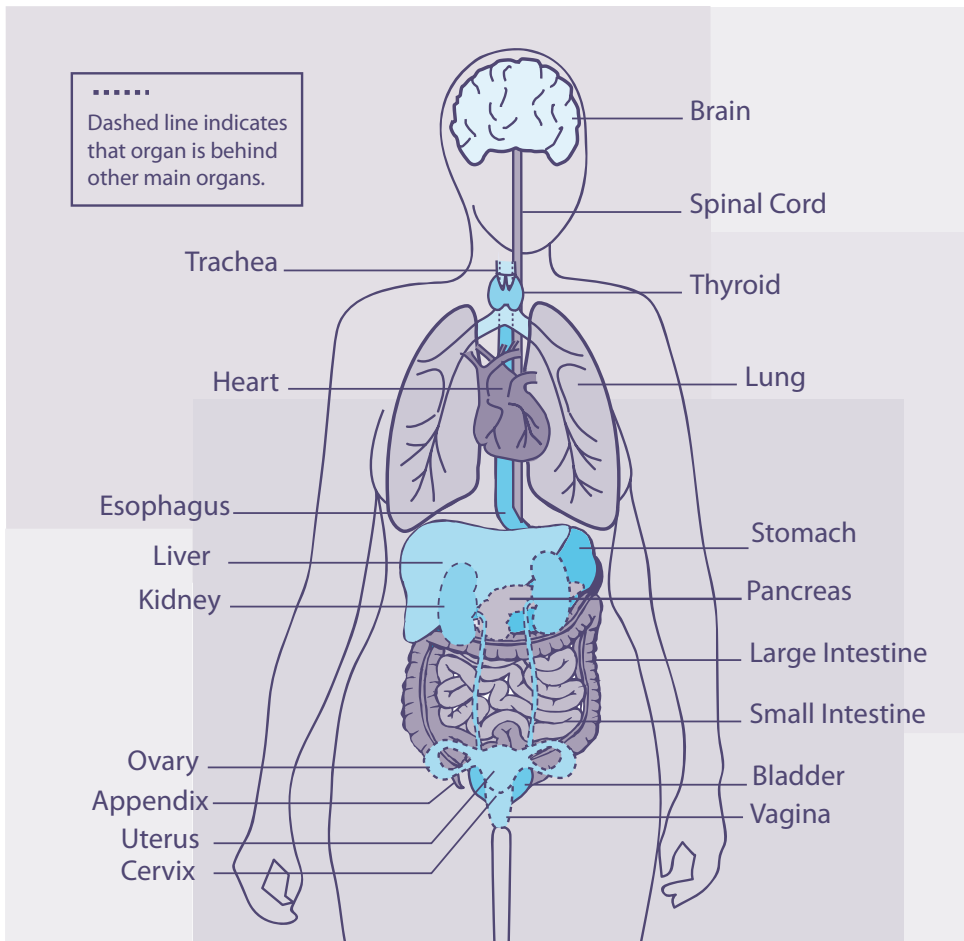
NWHIC is sponsored by the federal government with your tax dollars. We don't represent any special commercial interests. We don't allow advertisements on our site. We don't try to sell you products, magazines, or anything else. We screen all health information for accuracy before it ever appears on our web sites or in our publications. Our Information Specialists are trained to help you, whether it's referring you to the right organization, mailing you free information, or even coaching new moms on how to breastfeed their infants.

NWHIC exists to help you and your loved ones get the reliable and accurate health information you need to get, or stay, healthy.



Visit the National Women's Health Information Center web site www.womenshealth.gov

Know Your Body



Women's Body Systems

Cardiovascular and Circulatory—heart, lungs, arteries, veins

Digestive (gastrointestinal)—esophagus, liver, stomach, pancreas, large intestine (colon), small intestine, appendix, rectum, anus

Endocrine—thyroid, ovaries, pancreas

Nervous (neurological) and Skeletal—brain, nerves, spinal cord, bones, joints

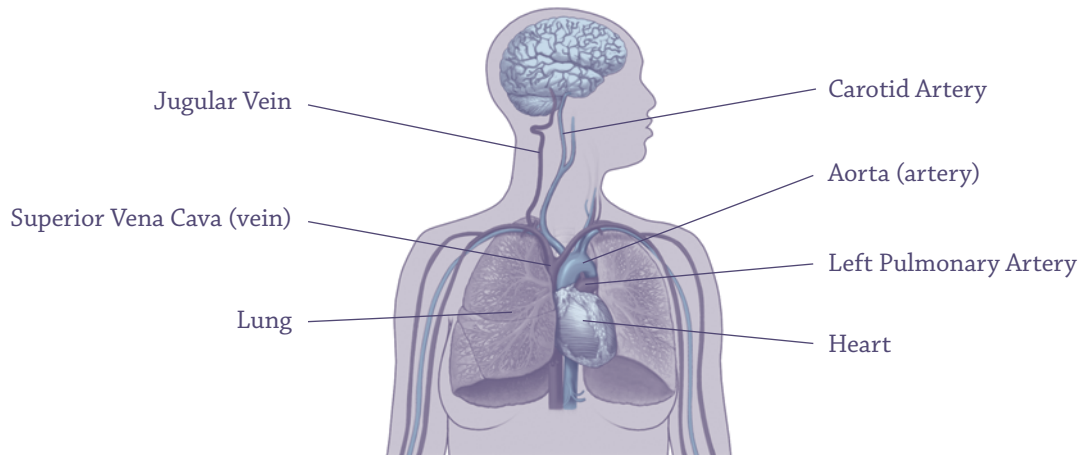
Reproductive—ovaries, fallopian tubes, uterus, cervix, vagina, breasts

Respiratory—lungs, nose, trachea (windpipe)

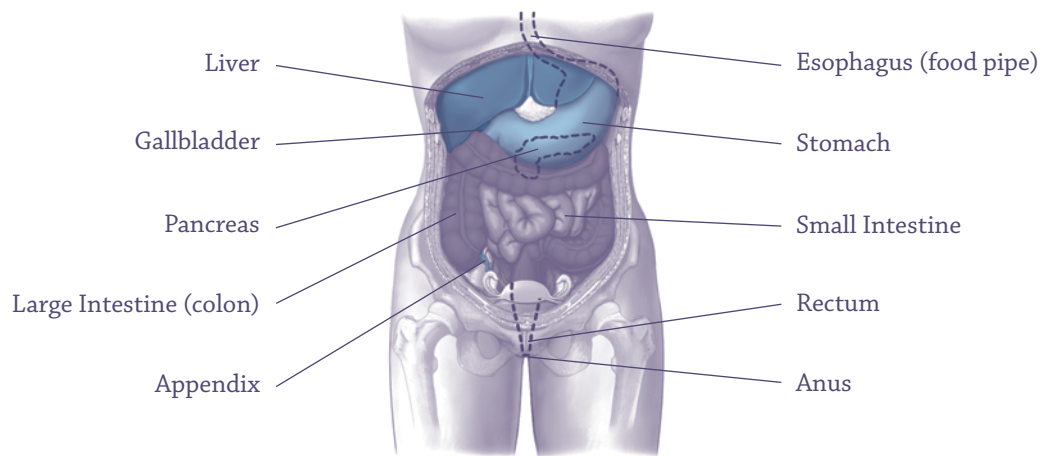
Urinary—urinary tract, bladder, kidneys

Know Your Body

Cardiovascular and Circulatory System

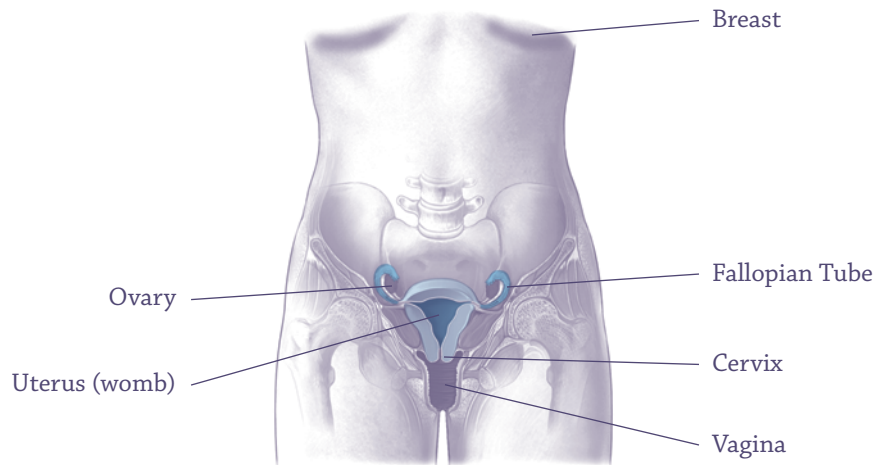


Digestive System

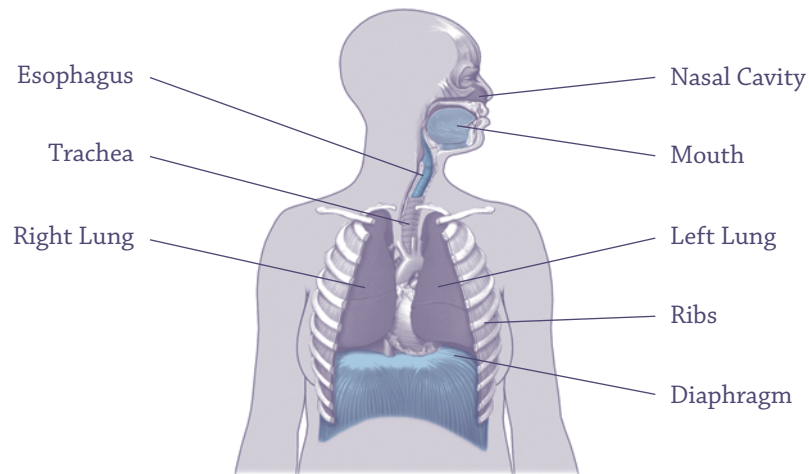


Know Your Body

Reproductive System

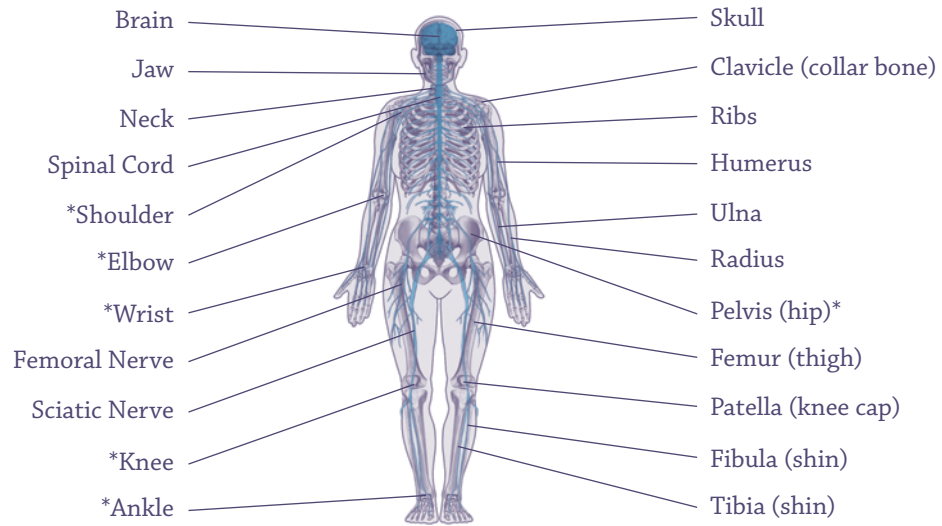


Respiratory System



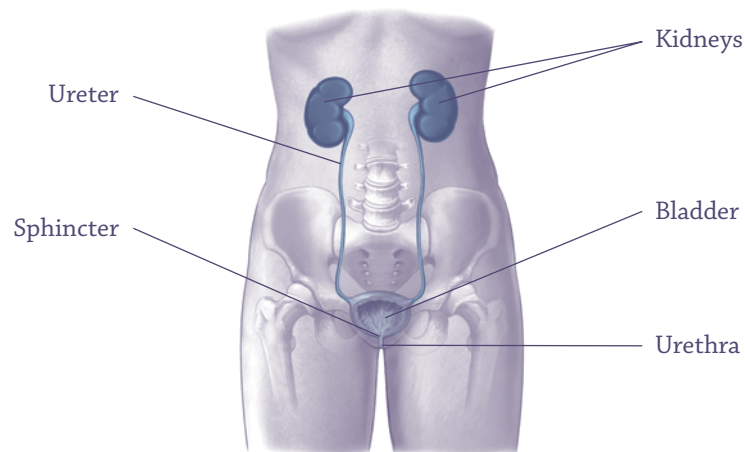
Know Your Body

Skeletal and Nervous System



*Major joints where arthritis or joint disease can occur.

Urinary System



Pay Attention: Symptoms of Serious Health Conditions

This chapter shows some symptoms that could be signs of serious health conditions, which should be checked by a doctor or nurse. It is important to note that you might feel symptoms in one part of your body that could actually mean a problem in another part. Even if the symptoms don't seem related, they could be. Keep track of your symptoms. If you have any of these symptoms, make an appointment to see your doctor. Listen to what your body is telling you, and be sure to describe every symptom in detail to your provider.

Note: A chart of diagnostic tests that your provider might order are found later in this guide.

Signs of a heart attack

Some symptoms of a heart attack can happen a month or so before the heart attack. **Before** a heart attack, women may have had one or more of these symptoms:

- ◆ unusual tiredness
- ◆ trouble sleeping
- ◆ problems breathing
- ◆ indigestion
- ◆ anxiety

During a heart attack, women may have one or more of these symptoms:

- ◆ pain or discomfort in the center of the chest
- ◆ pain or discomfort in other areas of the upper body, including the arms, back, neck, jaw, or stomach
- ◆ other symptoms, such as shortness of breath, breaking out in a cold sweat, nausea, or light-headedness

If you have any of these symptoms, go to an emergency room right away or call 911.



Signs of a stroke

Signs of a stroke happen suddenly and are different from signs of a heart attack:

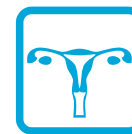
- ◆ sudden or developing problems with speaking or understanding
- ◆ sudden or developing problems with sight
- ◆ sudden or developing problems with balance, coordination, walking, and dizziness
- ◆ sudden numbness or weakness in the face, arms, or legs
- ◆ sudden severe headache with no known cause

If you have any of these symptoms, go to an emergency room right away or call 911.



Symptoms of reproductive health problems

- ◆ bleeding or spotting between periods
- ◆ itching, burning, or irritation (including bumps, blisters, or sores) of the vagina or genital area



- ◆ pain or discomfort during sex
- ◆ severe or painful bleeding with periods
- ◆ moderate to severe pelvic pain
- ◆ unusual (for you) vaginal discharge of any type or color or with strong odor

Symptoms of breast problems



- ◆ nipple discharge
- ◆ unusual breast tenderness or pain
- ◆ breast or nipple skin changes: ridges, dimpling, pitting, swelling, redness, or scaling
- ◆ lump or thickening in or near breast or in underarm area, or tenderness

Symptoms of lung problems



- ◆ coughing up blood
- ◆ persistent cough that gets worse over time
- ◆ repeated bouts of bronchitis or pneumonia
- ◆ shortness of breath
- ◆ wheezing

Symptoms of stomach or digestive problems



- ◆ bleeding from the rectum
- ◆ blood or mucus in the stool (including diarrhea) or black stools
- ◆ change in bowel habits or not being able to control bowels

- ◆ constipation, diarrhea, or both
- ◆ heartburn or acid reflux (feels like burning in throat or mouth)
- ◆ pain or feeling of fullness in stomach
- ◆ unusual abdominal swelling, bloating, or general discomfort
- ◆ vomiting blood

Symptoms of bladder problems



- ◆ difficult or painful urination
- ◆ frequent urination or loss of bladder control
- ◆ blood in urine
- ◆ feeling the urge to urinate when bladder is empty

Symptoms of skin problems



- ◆ changes in the skin, such as changes in existing moles or new growths
- ◆ moles that are no longer round or have irregular borders
- ◆ moles that change colors or change in size (usually get bigger)
- ◆ frequent flushing (a sudden feeling of heat)
- ◆ jaundice (when the skin and whites of the eyes turn yellow)
- ◆ painful, crusting, scaling, or oozing sores that don't heal
- ◆ sensitivity to sun

Symptoms of muscle or joint problems



- ◆ muscle pains and body aches that are persistent, or that come and go often
- ◆ numbness, tingling (pins and needles sensation), or discomfort in hands, feet, or limbs
- ◆ pain, stiffness, swelling, or redness in or around joints

Symptoms of emotional problems



Note: These symptoms can have a physical cause and are usually treatable.

- ◆ anxiety and constant worry
- ◆ depression: feeling empty, sad all the time, or worthless
- ◆ extreme fatigue, even when rested
- ◆ extreme tension that can't be explained
- ◆ flashbacks and nightmares about traumatic events
- ◆ no interest in getting out of bed or doing regular activities, including eating or sex
- ◆ thoughts about suicide and death
- ◆ seeing or hearing things that aren't there (hallucinations)
- ◆ seeing things differently from what they are (delusions)

- ◆ “baby blues” that haven't gone away two weeks after giving birth and seem to get worse over time
- ◆ thoughts about harming yourself or your baby after giving birth

Symptoms of headache problems



- ◆ headaches between the eyes
- ◆ headaches that come on suddenly
- ◆ headaches that last longer than a couple of days
- ◆ seeing flashing lights or zigzag lines and temporary vision loss before a headache starts
- ◆ spreading pain in face that starts in one eye
- ◆ severe pain on one or both sides of head with upset stomach, nausea, or vision problems

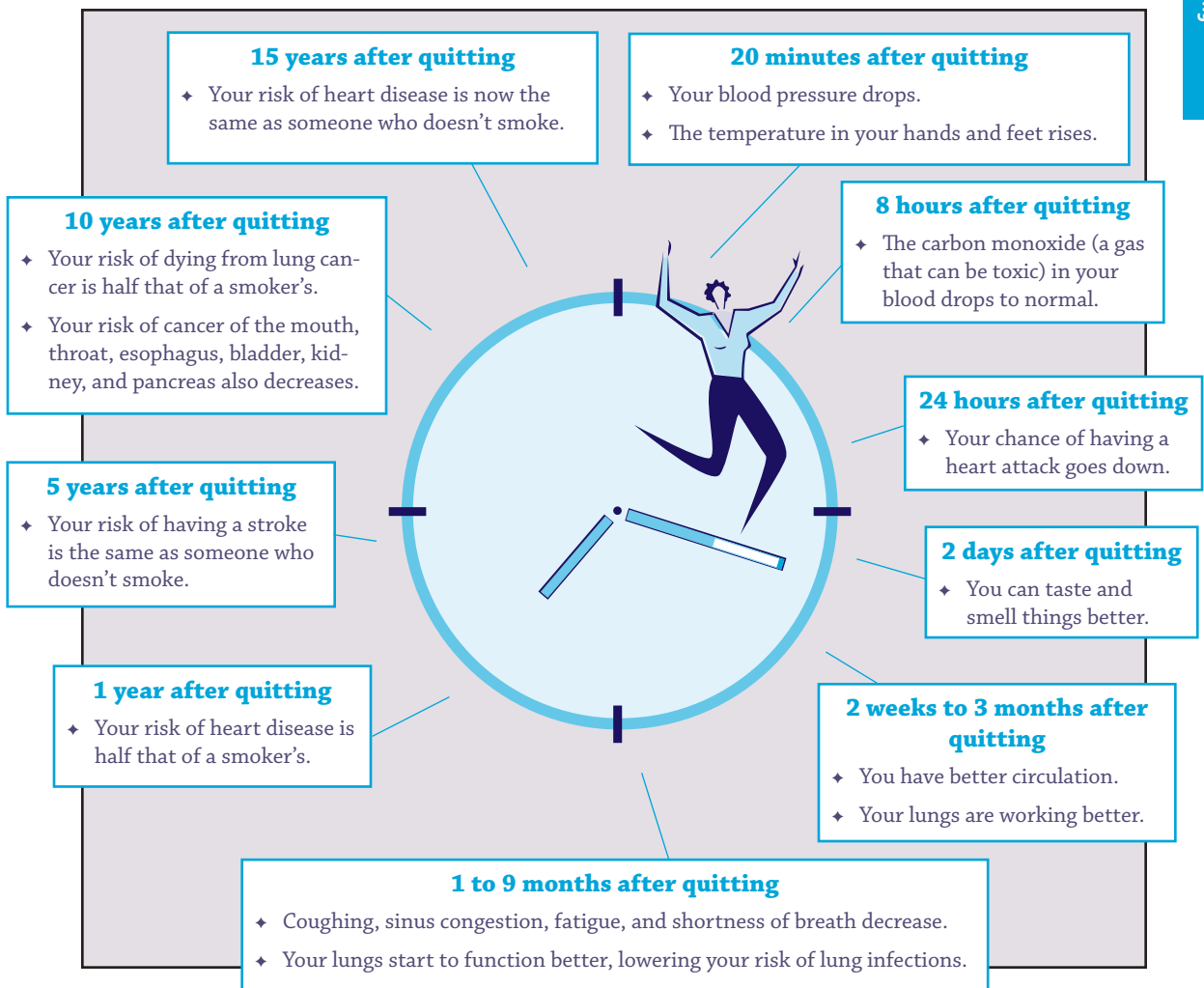
Symptoms of eating or weight problems



- ◆ extreme thirst or hunger
- ◆ losing weight without trying
- ◆ desire to binge on food excessively
- ◆ desire to vomit on purpose
- ◆ desire to starve (not eat at all)

Feel Great: Quit Smoking

New information shows that smoking causes diseases in nearly every organ of the body. Smoking is linked to diseases such as leukemia, cataracts, pneumonia, and cancers of the cervix, lung, kidney, pancreas, and stomach. Lung cancer alone claims the lives of more women than any other cancer. Stop smoking to lower your chances of getting these diseases!



HOW TO

Talk to Your Doctor or Nurse

Waiting in your doctor's office can make you feel nervous, impatient, or even scared. You might worry about what's wrong with you. You might feel annoyed because you're not getting other things done. Then when you see your doctor or nurse, the visit seems to be so short. You might have only a few minutes to explain your symptoms and concerns. Later that day, you might remember something you forgot to ask. You wonder if your question and its answer matters. Knowing how to talk to your doctor, nurse, or other members of your health care team will help you get the information you need.

Tips: What To Do

◆ **List your questions and concerns.**

Before your appointment, make a list of what you want to ask. When you're in the waiting room, review your list and organize your thoughts. You can share the list with your doctor or nurse.

◆ **Describe your symptoms.** Say when these problems started. Say how they make you feel. If you know, say what sets them off or triggers them. Say what you've done to feel better.

◆ **Give your doctor a list of your medications.** Tell what prescription drugs and over-the-counter medicines, vitamins,

herbal products, and other supplements you're taking.

◆ **Be honest about your diet, physical activity, smoking, alcohol or drug use, and sexual history.**

Not sharing information with your doctor or nurse can be harmful!

◆ **Describe any allergies to drugs, foods, pollen, or other things.**

Don't forget to mention if you are being treated by other doctors, including mental health professionals.

◆ **Talk about sensitive topics.** Your doctor or nurse has probably heard it before! Don't leave something out because you're worried about taking up too much time. Be sure to talk about all of your concerns before you leave. If you don't understand the answers your doctor gives you, ask again.





- ◆ **Ask questions about any tests and your test results.** Get instructions on what you need to do to get ready for the test(s). Ask if there are any dangers or side effects. Ask how you can learn the test results. Ask how long it will take to get the results.
- ◆ **Ask questions about your condition or illness.** If you are diagnosed with a condition, ask your doctor how you can learn more about it. What caused it? Is it permanent? What can you do to help yourself feel better? How can it be treated?
- ◆ **Tell your doctor or nurse if you are pregnant or intend to become pregnant.** Some medicines may not be suitable for you. Other medicines should be used with caution if you are pregnant or about to become pregnant.
- ◆ **Ask your doctor about any treatments he or she recommends.** Be sure to ask about all of your options for treatment. Ask how long the treatment will last. Ask if it has any side effects. Ask how much it will cost. Ask if it is covered by your health insurance.
- ◆ **Ask your doctor about any medicines he or she prescribes for you.** Make sure you understand how to take your medicine. What should you do if you miss a dose? Are there any foods, drugs, or activities you should avoid when taking the medicine? Is there a generic brand of the drug you can use? You can also ask your pharmacist if a generic drug is available for your medication.
- ◆ **Ask more questions if you don't understand something.** If you're not clear about what your doctor or nurse is asking you to do or why, ask to have it explained again.
- ◆ **Bring a family member or trusted friend with you.** That person can take notes, offer moral support, and help you remember what was discussed. You can have that person ask questions, too!
- ◆ **Call before your visit to tell them if you have special needs.** If you don't speak or understand English well, the office may need to find an interpreter. If you have a disability, ask if they can accommodate you.

HOW TO

Get a Second Opinion

Even though doctors may get similar medical training, they can have their own opinions and thoughts about how to practice medicine. They can have different ideas about how to diagnose and treat conditions or diseases. Some doctors take a more conservative, or traditional, approach to treating their patients. Other doctors are more aggressive and use the newest tests and therapies. It seems like we learn about new advances in medicine almost every day.

Many doctors specialize in one area of medicine, such as cardiology or obstetrics or psychiatry. Not every doctor can be skilled in using all the latest technology. Getting a second opinion from a different doctor might give you a fresh perspective and new information. It could provide you with new options for treating your condition. Then you can make more informed choices. If you get similar opinions from two doctors, you can also talk with a third doctor.

Tips: What To Do

- ◆ **Ask your doctor for a recommendation.** Ask for the name of another doctor or specialist, so you can get a second opinion. Don't worry about hurting your doctor's feelings. Most doctors welcome a second opinion, especially when surgery or long-term treatment is involved.
- ◆ **Ask someone you trust for a recommendation.** If you don't feel comfortable asking your doctor for a referral, then call another doctor you trust. You can also call university teaching hospitals and medical societies in your area for the names of doctors. Some of this information is also available on the Internet.



◆ **Check with your health insurance provider.** Call your insurance company before you get a second opinion. Ask if they will pay for this office visit. Many health insurance providers do. Ask if there are any special procedures you or your primary care doctor need to follow.



- ◆ **Ask to have medical records sent to the second doctor.** Ask your primary care doctor to send your medical records to the new doctor. You need to give written permission to your current doctor to send any records or test results to a new doctor. You can also ask for a copy of your own medical records for your files. Your new doctor can then examine these records before your office visit.
- ◆ **Learn as much as you can.** Ask your doctor for information you can read. Go to a local library. Search the Internet. Find a teaching hospital or university that

has medical libraries open to the public. The information you find can be hard to understand, or just confusing. Make a list of your questions, and bring it with you when you see your new doctor.

- ◆ **Do not rely on the Internet or a telephone conversation.** When you get a second opinion, you need to be seen by a doctor. That doctor will perform a physical examination and perhaps other tests. The doctor will also thoroughly review your medical records, ask you questions, and address your concerns.

HOW TO

Read Drug Labels



Medicines, or drugs, come as either prescription or over the counter. Prescription drugs are used under a doctor's care. Over-the-counter drugs can be bought and used without a doctor's prescription, and you buy them at a drug store or grocery store. When using any kind of drug, it's really important to read the drug label for instructions. Not following the instructions can hurt your health. Read the label each time you use a drug, just in case there have been changes to it since the last time you used it. See the drug label below and on the next page to know what to look for. If you read the label and still have questions, call your doctor, nurse, or pharmacist for help.

Prescription Drug Label

Pharmacy name and address

Number used by the drug store to identify this drug for your refills

Person who gets this drug

Instructions about how often and when to take

Name of drug and strength of drug

Number of refills

Doctor's name

Drug store phone number

Today's date

Don't use this drug past this date

Local Pharmacy
123 MAIN STREET
ANYTOWN, USA 11111 (800) 555-5555

DR. C. JONES

NO 0060023-08291 DATE 06/23/07

JANE SMITH
456 MAIN STREET ANYTOWN, US 11111

TAKE ONE CAPSULE BY MOUTH THREE TIMES DAILY FOR 10 DAYS UNTIL ALL TAKEN

AMOXICILLIN 500MG CAPSULES

QTY _____ MRG _____
NO REFILLS - DR. AUTHORIZATION REQUIRED

USE BEFORE 06/23/08
SLF/SLF

Rx ONLY

Over-the-Counter (OTC) Medicine Label

Drug Facts								
Therapeutic substance in drug	<table border="0"> <tr> <td>Active ingredient (in each tablet)</td> <td>Purpose</td> </tr> <tr> <td>Chlorpheniramine maleate 2 mg</td> <td>Antihistamine</td> </tr> </table>	Active ingredient (in each tablet)	Purpose	Chlorpheniramine maleate 2 mg	Antihistamine	Product type		
Active ingredient (in each tablet)	Purpose							
Chlorpheniramine maleate 2 mg	Antihistamine							
	<p>Uses temporarily relieves these symptoms due to hay fever or other upper respiratory allergies:</p> <ul style="list-style-type: none"> ■ sneezing ■ runny nose ■ itchy, watery eyes ■ itchy throat 	Symptoms or diseases the drug treats						
When not to use this drug, when to stop taking it, when to see a doctor, and possible side effects	<p>Warnings</p> <p>Ask a doctor before use if you have</p> <ul style="list-style-type: none"> ■ glaucoma ■ a breathing problem such as emphysema or chronic bronchitis ■ trouble urinating due to an enlarged prostate gland <hr/> <p>Ask a doctor or pharmacist before use if you are taking tranquilizers or sedatives</p> <hr/> <p>When using this product</p> <ul style="list-style-type: none"> ■ You may get drowsy ■ Avoid alcoholic drinks ■ Alcohol, sedatives, and tranquilizers may increase drowsiness ■ Be careful when driving a motor vehicle or operating machinery ■ Excitability may occur, especially in children <hr/> <p>If pregnant or breastfeeding, ask a health professional before use.</p> <p>Keep out of reach of children. In case of overdose, get medical help or contact a Poison Control Center right away.</p>							
	<p>Directions</p> <table border="1"> <tr> <td>Adults and children 12 years and over</td> <td>Take 2 tablets every 4 to 6 hours; not more than 12 tablets in 24 hours</td> </tr> <tr> <td>Children 6 years to under 12 years</td> <td>Take 1 tablet every 4 to 6 hours; not more than 6 tablets in 24 hours</td> </tr> <tr> <td>Children under 6 years</td> <td>Ask a doctor</td> </tr> </table>	Adults and children 12 years and over	Take 2 tablets every 4 to 6 hours; not more than 12 tablets in 24 hours	Children 6 years to under 12 years	Take 1 tablet every 4 to 6 hours; not more than 6 tablets in 24 hours	Children under 6 years	Ask a doctor	Read carefully: how much to take, how to take it, and how long to take it
	Adults and children 12 years and over	Take 2 tablets every 4 to 6 hours; not more than 12 tablets in 24 hours						
Children 6 years to under 12 years	Take 1 tablet every 4 to 6 hours; not more than 6 tablets in 24 hours							
Children under 6 years	Ask a doctor							
More information on how to store the drug	<p>Other information Store at 20-25° C (68-77° F)</p> <ul style="list-style-type: none"> ■ Protect from excessive moisture 							
	<p>Inactive ingredients D&C yellow no. 10, lactose, magnesium stearate, microcrystalline cellulose, pregelatinized starch</p>	Other things in the drug, such as colors or flavorings						

HOW TO

Be Prepared for Emergencies

When disaster strikes, you may not have much time to act. To help protect loved ones, take simple steps now to prepare your family for sudden emergencies or other disasters.

Three Basic Steps for Disaster or Emergency Preparedness

- 1. KNOW** what natural or other disasters could occur in your area and how to prepare for them. Learn about local evacuation routes, so that you know how to leave an area quickly. The Federal Emergency Management Agency offers information on preparedness at www.fema.gov.
- 2. PLAN** out on paper the steps you should take during an emergency and give family members a copy. Talk about potential disasters or emergencies and how to respond to each. Choose a meeting place, other than your home, for family members to gather in case you can't go home. Make sure you choose an "emergency check-in" contact person and teach your children the phone number for this person.
- 3. PACK** emergency supplies in your home to meet your needs for three days. Always keep all of your important documentation together, in one place, in case you have to "grab and go" during an evacuation.



Need to Evacuate? Have a Kit Ready that Includes

- ◆ identification for yourself and your children, such as birth certificates and social security cards
- ◆ important personal papers, such as health insurance identification cards, immigration papers, and children's school records
- ◆ funds in the form of cash, traveler's checks, credit cards, and checkbook
- ◆ keys to the house, car, and safety deposit box or post office box
- ◆ ways to communicate, including a calling card, cell phone and extra battery, and the emergency check-in number for family members to call
- ◆ prescription medications, including written prescription orders, and supplies

such as contact lens cleaner and feminine hygiene products

Essential Items for Disaster Preparedness

Relief workers will most likely be on the scene after a disaster, but they cannot reach everyone immediately. Gather the supplies below in case you have to stay where you are.

Water. Keep at least a 3-day supply of water for each person, stored in plastic containers. Each person needs 1 gallon of water each day.

Food. Store at least a 3-day supply of non-perishable food such as canned meat, beans, vegetables, fruit and juices; peanut butter or other high-energy food; and unsalted crackers. Keep a non-electric can opener handy. If you have pets, stock up on canned pet food.

Infant care. Store baby formula and water to prepare it if a child is not breastfed. If you need to evacuate quickly, bring towels or sheets to carry a baby instead of a bulky stroller.

Other supplies. Make sure you have large plastic bags that seal for waterproofing important papers, a battery-powered flashlight and radio with extra batteries, and a first aid kit.

Breastfeeding During an Emergency

When an emergency occurs, breastfeeding saves lives.

- ◆ Breastfeeding protects babies from the risks of a contaminated water supply.
- ◆ Breastfeeding helps protect against respiratory illnesses and diarrhea — diseases that can be fatal in populations displaced by disaster.

The basics of breastfeeding during an emergency are much the same as they are in normal times. Continuing to breastfeed whenever the baby seems hungry maintains a mother's milk supply and is calming to both mother and baby. Visit www.lalecheleague.org for information on how to breastfeed in an emergency, even if you have been giving your baby formula.

Food and Water Safety During an Emergency

Food may not be safe to eat during and after an emergency. Water may not be safe to drink, clean with, or bathe in after an emergency such as a hurricane or flood because it can become contaminated with bacteria, sewage, agricultural or industrial waste, chemicals, and other substances that can cause illness or death. The Centers for Disease Control and Prevention has information about keeping your food and water safe at www.cdc.gov.

Staying Safe from Violence During an Emergency

After disasters, women are at greater risk of sexual assault or other violence. Visit www.womenshealth.gov for safety tips.

Understanding Avian and Pandemic Flu

Avian influenza (flu) is not the same as pandemic flu. A flu pandemic is a global outbreak of a flu. A pandemic can happen when a new virus appears that people have little or no immunity against and for which there is no vaccine. (Having an immunity means you are resistant to, or protected against, a disease.) A new virus can spread quickly from person to person around the world, causing severe illness and even death. Although it is hard to know when the next flu pandemic will happen or how dangerous it will be, you can be informed and take steps to prepare your family. Avian flu has received a lot of attention in recent years, raising many questions about the dangers of a flu pandemic.

Q: What is avian influenza (flu)?

A: Avian or “bird flu” is caused by influenza viruses that naturally affect birds. Wild birds carry these highly contagious viruses, but they generally do not become sick. Domesticated birds, though, are at great risk. Avian flu can cause very serious illness and death for infected chickens, ducks, and turkeys.

Q: Why are health officials concerned about avian flu for humans?

A: Although people are not usually at risk of getting avian flu viruses, a virus called H5N1 is one of the few strains that has crossed



over to infect people. The H5N1 virus is very powerful, having caused the deaths of more than half of the people infected. Experts think most of these cases have been caused by contact with infected birds. To date, there has been very limited spread of the virus from person to person. The concern is that H5N1 will change into a virus that can pass from person to person more easily and more quickly. An increasing number of human cases have been found in Asian, European, and African countries. Health officials are watching the situation very closely to prepare for the possibility that the virus may spread to other parts of the world.

Q: Will getting a seasonal flu shot prevent me from getting avian flu?

A: No. The flu shot can only help protect you from seasonal flu. No vaccine is available to protect against the H5N1 virus that has

been found in people, but researchers are working on making one.

Q: What are the symptoms of avian flu?

A: Symptoms can include regular flu symptoms such as fever, cough, sore throat, and muscle aches. Other symptoms may include eye infections, pneumonia, and severe respiratory problems. There may be other symptoms that we do not yet know about.

Q: Are there treatments available for avian flu?

A: The H5N1 virus is resistant to two medicines used to treat the flu: amantadine and rimantadine. Two other flu medicines called oseltamavir and zanamavir may work to treat the flu caused by H5N1. More research is needed to test these medicines. Health researchers are also working on improving flu testing, to better detect which flu strain you have and where it came from. This will help government officials track dangerous flu viruses and help keep the public informed.

Q: What can I do to help keep my family healthy?

A: You and members of your family can take steps to help limit the spread of germs.

- ◆ Wash your hands with soap and warm water often.

- ◆ Use an alcohol-based hand cleanser if you don't have soap handy.
- ◆ When coughing or sneezing, cover your mouth and nose with a tissue (or your upper sleeve if you don't have a tissue), throw used tissue away, and wash your hands afterward.
- ◆ If you are sick, stay home.

It is also important to eat a balanced diet, drink plenty of water, exercise regularly, and get enough rest.

Q: What should I do to help my family prepare for a flu pandemic?

A: Visit www.pandemicflu.gov to learn how to prepare your family. This web site provides preparation checklists for families and businesses, information for people who deal with poultry, and the latest information on how avian flu is affecting people around the world. If H5N1 does cause a pandemic flu, this web site will offer important safety information. You can also call the Centers for Disease Control and Prevention Hotline at 1-800-CDC-INFO (1-800-232-4636) or 1-888-232-6348 (TDD) 24 hours a day, seven days a week.

**www.pandemicflu.gov
1-800-CDC-INFO or
1-888-232-6348 (TDD)**

Common Screening and Diagnostic Tests Explained

Test Name	Definition
Angiogram	Exam of your blood vessels using x-rays. The doctor inserts a small tube into the blood vessel and injects dye to see the vessels on the x-ray.
Barium enema	A lubricated enema tube is gently inserted into your rectum. Barium flows into your colon. An x-ray is taken of the large intestine.
Biopsy	A test that removes cells or tissues for examination by a pathologist to diagnose for disease. The tissue is examined under a microscope for cancer or other diseases.
Blood test	Blood is taken from a vein in the inside elbow or back of the hand to test for a health problem.
Bone mineral density (BMD) test	Special x-rays of your bones are used to test if you have osteoporosis, or a weakening of the bones.
Bronchoscopy	Exam of the lungs. A bronchoscope, or flexible tube, is put through the nose or mouth and into your windpipe (trachea).
Clinical breast exam (CBE)	A doctor, nurse, or other health professional uses his or her hands to examine your breasts and under-arm areas to find lumps or other problems.
Chest x-ray	An x-ray of the chest, lungs, heart, large arteries, ribs, and diaphragm.
Colonoscopy	An examination of the inside of the colon using a colonoscope, inserted into the rectum. A colonoscope is a thin, tube-like instrument with a light and lens for viewing. It may also have a tool to remove tissue to be checked under a microscope for disease.
Computed tomographic (CT or CAT) scan	The patient lies on a table and x-rays of the body are taken from different angles. Sometimes, a fluid is used to highlight parts of the body in the scan.
Echocardiogram	An instrument (that looks like a microphone) is placed on the chest. It uses sound waves to create a moving picture of the heart. A picture appears on a TV monitor, and the heart can be seen in different ways.
Electroencephalogram (EEG)	Measures the electrical activity of the brain, using electrodes that are put on the patient's scalp. Sometimes patients sleep during the test.
Electrocardiogram (EKG or ECG)	Records the electrical activity of the heart, using electrodes placed on the arms, legs, and chest.
Exercise stress test	Electrodes are placed on the chest, arms, and legs to record the heart's activity. A blood pressure cuff is placed around the arm and is inflated every few minutes. Heart rate and blood pressure are taken before exercise starts. The patient walks on a treadmill or pedals a stationary bicycle. The pace of the treadmill is increased. The response of the heart is monitored. The test continues until target heart rate is reached. Monitoring continues after exercise for 10 to 15 minutes or until the heart rate returns to normal.
Fecal occult blood test (FOBT)	Detects hidden blood in a bowel movement. There are two types: the smear test and flushable reagent pads.

Common Screening and Diagnostic Tests Explained

Test Name	Definition
Laparoscopy	A small tube with a camera is inserted into the abdomen through a small cut in or just below the belly button to see inside the abdomen and pelvis. Other instruments can be inserted in the small cut as well. It is used for both diagnosing and treating problems inside the abdomen.
Magnetic resonance imaging (MRI)	A test that uses powerful magnets and radio waves to create a picture of the inside of your body without surgery. The patient lies on a table that slides onto a large tunnel-like tube, which is surrounded by a scanner. Small coils may be placed around your head, arm, leg, or other areas.
Mammogram	X-rays of the breast taken by resting one breast at a time on a flat surface that contains an x-ray plate. A device presses firmly against the breast. An x-ray is taken to show a picture of the breast. Mammography is used to screen healthy women for signs of breast cancer. It can also be used to evaluate a woman who has symptoms of disease. It can, in some cases, detect breast cancers before you can feel them with your fingers.
Medical history	The doctor or nurse talks to the patient about current and past illnesses, surgeries, pregnancies, medications, allergies, use of alternative therapies, vitamins and supplements, diet, alcohol and drug use, physical activity, and family history of diseases.
Pap test	The nurse or doctor uses a small brush to take cells from the cervix (opening of the uterus) to look at under a microscope in a lab.
Pelvic exam	A doctor or nurse asks about the patient's health and looks at the vaginal area. The doctor or nurse checks the fallopian tubes, ovaries, and uterus by putting two gloved fingers inside the vagina. With the other hand, the doctor or nurse will feel from the outside for any lumps or tenderness.
Physical exam	The doctor or nurse will test for diseases, assess your risk of future medical problems, encourage a healthy lifestyle, and update your vaccinations.
Positron emission tomography (PET) scan	The patient is injected with a radioactive substance, such as glucose. A scanner detects any cancerous areas in the body. Cancerous tissue absorbs more of the substance and looks brighter in images than normal tissue.
Sigmoidoscopy	The sigmoidoscope is a small camera attached to a flexible tube. This tube, about 20 inches long, is gently inserted into the colon. As the tube is slowly removed, the lining of the bowel is examined.
Spirometry	The patient breathes into a mouthpiece that is connected to an instrument called a spirometer. The spirometer records the amount and the rate of air that is breathed in and out over a specified time. It measures how well the lungs exhale.
Ultrasound	A clear gel is put onto the skin over the area being examined. An instrument is then moved over that area. The machine sends out sound waves, which reflect off the body. A computer receives these waves and uses them to create pictures of the body.

Note: Anesthesia (medicine to block pain or sedate you) is given during some of these tests to keep you comfortable. Be sure to talk with your doctor or nurse about what to expect during and after tests, and how to prepare for tests.

Taking Charge of Your Health

Your role in prevention

Getting regular check ups, preventive screening tests, and immunizations are among the most important things you can do for yourself. Use these charts to figure out when to see your doctor or nurse based on your health profile. Then, become a partner with your doctor or nurse to choose when you need your screenings and immunizations. Share your family history, voice your concerns, and always ask questions about what you can do to prevent certain diseases. For instance, if your doctor or nurse asks you to exercise more, ask which types of exercises are best for you. If you don't know how to do a monthly breast self-exam, ask how and practice until you feel at ease doing it. If you don't know if you need certain screenings, ask your doctor or nurse.

Understanding risk factors

The first chart in this section lists recommended screenings and immunizations for women at average risk for most diseases. How do you know if your risk is higher than average? Check the second set of charts for the recommended screenings and immuni-



zations for women with higher than average risk factors. Risk factors are things in your life that increase your chances of getting a condition or disease. They can include things like family history, exposures to things in the environment, being a certain age or sex, being from a certain ethnic group, or already having a health condition. If you do have high risk factors, your doctor or nurse will most likely want you to be screened or immunized at a younger age or more often than what is recommended. Check with your doctor or nurse to find out if you need to have certain health screenings and how often you will need them.

General Screenings and Immunizations for Women

These charts are guidelines only. Your doctor will personalize the timing of each test and immunization to meet your health care needs. Use the stickers to remind yourself of these exams. Citations are found on pages 231–232.

Screening Tests	Ages 18–39	Ages 40–49	Ages 50–64	Ages 65 and Older
General Health: Full checkup, including weight and height	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.
Thyroid test (TSH) ¹	Start at age 35, then every 5 years	Every 5 years	Every 5 years	Every 5 years
Heart Health: Blood pressure test ²	At least every 2 years	At least every 2 years	At least every 2 years	At least every 2 years
Cholesterol test ³	Start at age 20, discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.
Bone Health: Bone mineral density test ⁴		Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Get a bone mineral density test at least once. Talk to your doctor or nurse about repeat testing.
Diabetes: Blood glucose test ⁵	Discuss with your doctor or nurse.	Start at age 45, then every 3 years	Every 3 years	Every 3 years
Breast Health: Mammogram (x-ray of breast) ⁶		Every 1-2 years. Discuss with your doctor or nurse.	Every 1-2 years. Discuss with your doctor or nurse.	Every 1-2 years. Discuss with your doctor or nurse.
Reproductive Health: Pap test & pelvic exam ⁷	Every 1-3 years if you have been sexually active or are older than 21	Every 1-3 years	Every 1-3 years	Discuss with your doctor or nurse.
Chlamydia test ⁸	Yearly until age 25 if sexually active. Older than age 25, get this test if you have new or multiple partners. All pregnant women should have this test.	Get this test if you have new or multiple partners. All pregnant women should have this test.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.
Sexually transmitted disease (STD) tests ⁸	Both partners should get tested for STDs, including HIV, before initiating sexual intercourse.	Both partners should get tested for STDs, including HIV, before initiating sexual intercourse.	Both partners should get tested for STDs, including HIV, before initiating sexual intercourse.	Both partners should get tested for STDs, including HIV, before initiating sexual intercourse.
Mental Health Screening⁹	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.

This chart lists recommended screenings and immunizations for women at average risk for most diseases.

General Screenings and Immunizations for Women

These charts are guidelines only. Your doctor will personalize the timing of each test and immunization to meet your health care needs. Use the stickers to remind yourself of these exams. Citations are found on pages 231–232.

Screening Tests	Ages 18–39	Ages 40–49	Ages 50–64	Ages 65 and Older
Colorectal Health: Fecal occult blood test ^{10,11}			Yearly	Yearly
Flexible sigmoidoscopy (with fecal occult blood test is preferred) ^{10,11}			Every 5 years (if not having a colonoscopy)	Every 5 years (if not having a colonoscopy)
Double Contrast Barium Enema (DCBE) ^{10,11}			Every 5–10 years (if not having a colonoscopy or sigmoidoscopy)	Every 5–10 years (if not having a colonoscopy or sigmoidoscopy)
Colonoscopy ^{10,11}			Every 10 years	Every 10 years
Rectal exam ^{10,11}	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Every 5–10 years with each screening (sigmoidoscopy, colonoscopy, or DCBE)	Every 5–10 years with each screening (sigmoidoscopy, colonoscopy, or DCBE)
Eye and Ear Health: Eye exam ¹²	If you have any visual problems; at least one exam from ages 20–29 and at least two exams from ages 30–39.	Every 2–4 years	Every 2–4 years	Every 1–2 years
Hearing test ¹³	Starting at age 18, then every 10 years	Every 10 years	Every 3 years	Every 3 years
Skin Health: Mole exam ¹⁴	Monthly mole self-exam; by a doctor every 3 years, starting at age 20.	Monthly mole self-exam; by a doctor every year.	Monthly mole self-exam; by a doctor every year.	Monthly mole self-exam; by a doctor every year.
Oral Health: Dental exam ¹⁵	One to two times every year	One to two times every year	One to two times every year	One to two times every year
Immunizations: Influenza vaccine ¹⁶	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Yearly	Yearly
Pneumococcal vaccine ¹⁶				One time only
Tetanus-diphtheria booster vaccine ¹⁶	Every 10 years	Every 10 years	Every 10 years	Every 10 years
Human papillomavirus vaccine (HPV) ¹⁷	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	Discuss with your doctor or nurse.	
Meningococcal vaccine ¹⁸	Discuss with your doctor or nurse if attending college.			

This chart lists recommended screenings and immunizations for women at average risk for most diseases.

Visit the National Women’s Health Information Center web site www.womenshealth.gov

Recommended Screenings, Tests, and Immunizations for Women with High-Risk Factors

✓ if it applies	Does your family history include?	Then ask your doctor or nurse if you need the following screenings, tests, exams, or vaccines more often or at a younger age:
	High blood pressure	Blood pressure test
	High cholesterol	Cholesterol test
	Heart disease, premature heart disease, or heart attack	Blood pressure test, cholesterol test, exercise stress test
	Diabetes	Blood glucose test
	Breast cancer	Mammogram, ovarian cancer tests
	Endometrial cancer	Colon screening
	Ovarian cancer	Pelvic exam, ovarian cancer tests, colon screening, clinical breast exam
	Osteoporosis, bone fracture in adulthood	Bone mineral density test
	Thyroid disease or thyroid cancer	Thyroid test and/or genetic counseling
	Gum (periodontal) disease	Oral exam
	Hearing problems, deafness	Hearing test
	Vision problems, eye disease, blindness	Vision exam
	Inflammatory bowel disease; colon polyps; colon, ovarian, or endometrial cancer	Colonoscopy, sigmoidoscopy, DCBE, rectal exam, fecal occult blood test, pap test, pelvic exam, ovarian cancer tests
	Cancer, heart disease, or any illness at an unusually young age (50 or younger)	Genetic counseling, possible early screening tests
	Two relatives with the same kind of cancer	Genetic counseling, possible early screening tests
	Birth defects or genetic disorder (you or your partner)	Genetic counseling, possible early screening tests. If you want to become pregnant, genetic counseling for you and your partner.

This chart lists screenings, tests, or exams you might need more often or earlier because of having high-risk factors or things in your life that increase your chances of developing a condition or disease.

Recommended Screenings, Tests, and Immunizations for Women with High-Risk Factors

✓ if it applies	Are You?	Then ask your doctor or nurse if you need the following screenings, tests, exams, or vaccines more often or at a younger age:
	African American	Blood pressure test, cholesterol test, blood glucose test, vision exam, colonoscopy, genetic counseling for sickle cell anemia
	Latina	Blood pressure test, cholesterol test, blood glucose test, colonoscopy
	Alaska Native or Pacific Islander	Blood glucose test, pneumococcal vaccine
	American Indian	Blood glucose test, pneumococcal vaccine
	Ashkenazi Jewish descent	Genetic counseling for Tay-Sachs disease, if you want to become pregnant
	Ashkenazi Jewish with family history of breast or ovarian cancer	Genetic counseling for possible BRCA1/2 mutation
	Asian American	Blood glucose test
	Age 65 or older	Bone mineral density test, flu vaccine, pneumococcal vaccine
	Between the ages of 60 and 64, weigh fewer than 154 lbs., and not taking estrogen	Bone mineral density test
	College age	MMR vaccine, varicella vaccine, human papillomavirus (HPV) vaccine, meningococcal vaccine
	Postmenopausal	Bone mineral density test
	Pregnant	Blood pressure test, blood glucose test, urine test, HIV test, STD tests, MMR vaccine, hepatitis B antigen test
	A non-pregnant woman of childbearing age	MMR vaccine, varicella vaccine
	A smoker	Blood pressure test, cholesterol test, bone mineral density test, oral exam, vision exam
	Overweight	Blood pressure test, blood glucose test, weight
	Living in prison	Tuberculosis (TB) test; HIV test; STD tests; hepatitis A, B vaccines
	Living in long-term care	TB test, influenza vaccine, pneumococcal vaccine
	A health care worker	TB test, influenza vaccine, pneumococcal vaccine, MMR vaccine, varicella vaccine, HIV test, hepatitis test, hepatitis B vaccine if exposed to blood

This chart lists screenings, tests, or exams you might need more often or earlier because of having high-risk factors or things in your life that increase your chances of developing a condition or disease.

Recommended Screenings, Tests, and Immunizations for Women with High-Risk Factors

✓ if it applies	Do you have or have you had?	Then ask your doctor or nurse if you need the following screenings, tests, exams, or vaccines more often or at a younger age:
	High blood pressure	Blood pressure test, cholesterol test, blood glucose test
	High cholesterol	Blood pressure test, cholesterol test, blood glucose test
	Heart disease	Blood pressure test, cholesterol test, blood glucose test, influenza vaccine, pneumococcal vaccine
	Diabetes	Blood pressure test, cholesterol test, blood glucose test, vision exam, urine test
	Gestational diabetes (diabetes during pregnancy)	Blood glucose test
	A baby weighing more than 9 lbs.	Blood glucose test
	Breast cancer	Mammogram, ovarian cancer tests
	Dense breast	Digital mammogram, clinical breast exam
	Cervical, uterine, endometrial, vaginal cancer	Pap test, pelvic exam, ovarian cancer tests, colon screening
	Ovarian cancer	Pelvic exam, ovarian cancer tests, mammogram, colon screening
	Previous abnormal Pap tests	Pap test, pelvic exam, human papillomavirus (HPV) vaccine
	Early menopause (natural or surgically induced); absent or infrequent menstrual periods; advanced age; a personal history of bone fracture in adulthood; lifelong low calcium intake; lifelong inactive lifestyle or little physical activity; low body weight (fewer than 154 lbs.), or a history of an eating disorder such as anorexia nervosa	Bone mineral density test
	An autoimmune disease (including lupus, rheumatoid arthritis, scleroderma, multiple sclerosis, psoriasis)	Thyroid test, TB test, influenza shot, MMR vaccine, pneumococcal vaccine, autoimmune screening test, bone mineral density test

This chart lists screenings, tests, or exams you might need more often or earlier because of having high-risk factors or things in your life that increase your chances of developing a condition or disease.

Recommended Screenings, Tests, and Immunizations for Women with High-Risk Factors

✓ if it applies	Do you have or have you had?	Then ask your doctor or nurse if you need the following screenings, tests, exams, or vaccines more often or at a younger age:
	Chronic lung disease	Influenza vaccine, pneumococcal vaccine
	Chronic liver disease	Hepatitis A, B vaccines
	Thyroid disease	Thyroid test, influenza vaccine, pneumococcal vaccine, bone mineral density test (if hyperthyroid)
	Gum (periodontal) disease	Oral exam
	Colon polyps; inflammatory bowel disease	Colonoscopy
	Colon cancer	Endometrial cancer screening, colon cancer screening tests
	A developmental delay	Vision exam, hearing test
	Eye injury or disease	Vision exam
	Ear injury or prolonged exposure to loud noise	Hearing test
	HIV/AIDS	Oral exam; vision exam; Pap test; pelvic exam; TB test; thyroid test; STD tests; influenza vaccine; pneumococcal vaccine; hepatitis screening; hepatitis A, B vaccines
	A blood transfusion or solid organ transplant before 1992	Hepatitis C test
	Received clotting factor concentrates made before 1987	Hepatitis C test
	A blood transfusion before 1985	HIV test
	Multiple sex partners (or a partner who has or had multiple sex partners)	STD tests, HIV test, hepatitis B vaccine, Pap test, pelvic exam, human papillomavirus (HPV) vaccine
	Alcoholism	Pneumococcal vaccine, TB test, psychological screening, liver tests
	Injection drug use (IDU) or addiction	Hepatitis A, B vaccines; hepatitis C test; TB test; STD tests; HIV test; psychological screening
	A sexually transmitted disease (STD)	STD tests, HIV test, Pap test, pelvic exam, hepatitis B vaccine, human papillomavirus (HPV) vaccine
	Lived or worked with someone exposed to tuberculosis (TB)	TB test
	A serious injury (cut or laceration)	Tetanus-diphtheria booster vaccine
	A baby recently (within the last few weeks or months)	Postpartum depression screening

This chart lists screenings, tests, or exams you might need more often or earlier because of having high-risk factors or things in your life that increase your chances of developing a condition or disease.

Visit the National Women's Health Information Center web site www.womenshealth.gov

When Do Children and Teens Need Vaccinations?

Vaccinations start at birth and continue throughout life. *See page 29 for adult immunizations.*

	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	24 months	4–6 years	11–12 years	13–14 years	15 years	16–18 years
Hepatitis B¹	HepB	HepB ¹	HepB ¹		HepB					HepB Series				
Diphtheria, Tetanus, Pertussis²			DTaP	DTaP	DTaP		DTaP			DTaP	Tdap		Tdap	
Haemophilus influenzae type b³			Hib	Hib	Hib ³	Hib								
Inactivated Poliovirus			IPV	IPV	IPV					IPV				
Measles, Mumps, Rubella⁴						MMR				MMR		MMR		
Varicella⁵						Varicella					Varicella			
Meningococcal⁶										MPSV4	MCV4		MCV4	MCV4
Pneumococcal⁷			PCV	PCV	PCV	PCV				PCV		PPV		
Influenza⁸					Influenza (Yearly)						Influenza (Yearly)			
Hepatitis A⁹					HepA Series									
Human papillomavirus (HPV)											HPV		HPV	

Range of recommended ages
 Catch-up immunization¹⁰
 11–12 year old assessment

¹ All newborns should get HepB before leaving the hospital. Infants whose mothers are HBsAg-positive should get HepB and hepatitis B immune globulin within 12 hours of birth (these infants will also need to be checked again after the HepB series is finished). Depending on the type of vaccine used, your child may not need a dose at 4 months of age.

² The fourth dose of DTaP can be given as early as 12 months of age, as long as 6 months have gone by since the third dose. Tdap is a vaccine preparation recommended at 11-12 years old for those who have finished DTaP.

³ Your infant may not need a dose at 6 months of age, depending on the type of vaccine your health care provider uses.

⁴ The second MMR dose is recommended at 4-6 years old. MMR can be given at any visit as long as at least 4 weeks have passed since the first dose and both doses are given at or after 12 months of age.

⁵ Varicella vaccine is recommended after 12 months of age for children at risk of getting chicken pox.

⁶ Meningococcal vaccine should be given at the 11-12 year visit and given to unvaccinated adolescents entering high school. All college freshmen living in dormitories should be vaccinated, preferably with MCV4, although meningococcal polysaccharide vaccine (MPSV4) is an acceptable alternative. MPSV4 is recommended starting at age 2 and above for children and adolescents with certain health problems.

⁷ Pneumococcal conjugate vaccine (PCV) is recommended for all children 2-23 months old and for certain children 2-5 years old. PPV is recommended in addition to PCV for certain high risk groups.

⁸ Influenza vaccine is recommended for infants younger than 6 months old with certain risk factors, such as asthma, heart disease, or sickle cell disease. The vaccine is recommended for healthy children ages 6-23 months.

⁹ HepA is recommended at one year of age, and for older high risk children and adolescents.

¹⁰ At these ages, children who have not been vaccinated should get catch-up doses.

Source: Adapted from the Centers for Disease Control and Prevention

 Doctor's Appointment	 Doctor's Appointment	 Doctor's Appointment	 Doctor's Appointment	 Doctor's Appointment	 Doctor's Appointment	 Doctor's Appointment	 Dental Exam	 Dental Exam	 Get a Pap Test	 Bone Density Test
 Mammogram	 Eye Exam	 Mole/Skin Test	 Due Date	 Colonoscopy	 Immunizations	 Flu Shot	 Cholesterol Test	 Blood Glucose Test	 Checkup	 blood pressure test
 Period	 Period	 Period	 Period	 Period	 Period	 Period	 Period	 Period	 Period	 Period
 Period	 Don't Forget!	 Don't Forget!	 Don't Forget!	 Don't Forget!	 Don't Forget!	 Don't Forget!	 Don't Forget!	 Don't Forget!	 Don't Forget!	 Don't Forget!
 Exercise class begins	 Exercise class begins	 Exercise class begins	 Call	 Call	 Call	 Call	 Call	 Call	 Call	 Call
 Appointment	 Appointment	 Appointment	 Appointment	 Appointment	 Appointment	 Appointment	 Appointment	 Appointment	 Quiet Time	 Quiet Time
 Quiet Time	 Quiet Time	 Quiet Time	 Play	 Play	 Play	 Play	 Play	 Play	 Birthday	 Birthday
 Birthday	 Birthday	 Birthday	 Birthday	 Birthday	 Birthday	 Wedding	 Wedding	 Wedding	 Wedding	 Wedding
 Anniversary	 Anniversary	 Anniversary	 Anniversary	 Special Event	 Special Event	 Special Event	 Special Event	 Special Event	 Special Event	 Special Event
 Special Event	 Graduation	 Graduation	 Back to School	 Back to School	 Dinner Party	 Dinner Party	 Dinner Party	 Dinner Party	 Shopping	 Shopping
 Shopping	 Shopping	 Shopping	 Vacation	 Vacation	 Vacation	 Hair Appointment	 Hair Appointment	 Hair Appointment	 Hair Appointment	 Pay Day
 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day
 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day	 Pay Day

