Nombre del paciente: _____ Fecha de nacimiento: ____/____/____ (mes) (día) (año)

Cuestionario de la vacunación de niños y adolescentes

Para padres/guardianes legales: Las siguientes preguntas nos ayudarán a determinar cuáles vacunas puede recibir su hijo hoy. Si una pregunta no está clara, favor de pedirle a la enfermera o al médico que se la explique.

	Sí	No	No sabe
1. ¿Está el niño enfermo hoy?	☐	☐	☐
2. ¿Es el niño alérgico a algún medicamento, comida o vacuna?	☐	☐	☐
3. ¿Ha tenido el niño alguna reacción seria a las vacunas en el pasado?	☐	☐	☐
4. ¿Ha sufrido el niño algún ataque o problema del cerebro?	☐	☐	☐
5. ¿Tiene el niño cáncer, leucemia, SIDA o cualquier otro problema del sistema inmunológico?	☐	☐	☐
6. ¿Ha tomado el niño cortisona, prednisona, otros esteroides, medicamentos anticáncer o ha estado expuesto a un tratamiento con rayos X durante los últimos 3 meses?	☐	☐	☐
7. ¿Ha recibido el niño una transfusión de sangre o plasma, o ha recibido un medicamento llamado "gamaglobulina inmunológica" durante el último año?	☐	☐	☐
8. ¿Está la niña embarazada o existe la posibilidad de que quede embarazada durante el próximo mes?	☐	☐	☐
9. ¿Ha recibido el niño alguna vacuna durante las últimas 4 semanas?	☐	☐	☐

Este formulario ha sido completado por: _____ Fecha: ____/____/____ (mes) (día) (año)

Este formulario ha sido repasado por: _____ Fecha: ____/____/____ (mes) (día) (año)

¿Trajo con usted la tarjeta de vacunaciones de su hijo? **sí** ☐ **no** ☐

Es importante que usted tenga un registro personal de las vacunaciones que ha recibido su hijo. Si usted no tiene un carnet de vacunaciones, ¡pídale a la enfermera o al doctor que se lo de! Traiga la tarjeta cada vez que lleva a su niño al médico. Asegúrese de que el proveedor de atención de la salud de su niño anote en la tarjeta todas las vacunaciones que recibe su hijo. Su hijo necesitará esta tarjeta para poder ingresar a guarderías, jardines de infancia, escuelas, etc.

www.immunize.org/catg.d/p4060-01.pdf • Item #P4060-01 Spanish (4/04)

Understanding the Screening Questionnaire for Child & Teen Immunization

The information below has been adapted from *Epidemiology & Prevention of Vaccine-Preventable Diseases,* WL Atkinson et al., editors, CDC, 8th edition, Feb. 2004, and the 2002 General Recommendations on Immunization, *MMWR* 2002;51(RR-2).

1. Is the child sick today?
There is no evidence that acute illness reduces vaccine efficacy or increases vaccine adverse events (1, 2). However, as a precaution with moderate or severe acute illness, all vaccines should be delayed until the illness has improved. Mild illnesses (such as otitis media, upper respiratory infections, and diarrhea) are NOT contraindications to vaccination. Do not withhold vaccination if a person is taking antibiotics.

2. Does the child have allergies to medications, food, or any vaccine?
History of anaphylactic reaction such as hives (urticaria), wheezing or difficulty breathing, or circulatory collapse or shock (not fainting) from a previous dose of vaccine or vaccine component is a contraindication for further doses. For example, if a person experiences anaphylaxis after eating eggs, do not administer influenza vaccine, or if a person has anaphylaxis after eating gelatin, do not administer MMR or varicella vaccine. Local reactions (e.g., a red eye following instillation of ophthalmic solution) are not contraindications. For an extensive table of vaccine components, see reference 3.

3. Has the child had a serious reaction to a vaccine in the past?
History of anaphylactic reaction (see question 2) to a previous dose of vaccine or vaccine component is a contraindication for subsequent doses (1). History of encephalopathy within 7 days following DTP/DTaP is a contraindication for further doses of pertussis-containing vaccine. Precautions to pertussis-containing vaccines include the following: (a) seizure within 3 days of a dose, (b) pale or limp episode or collapse within 48 hours of a dose, (c) continuous crying for 3 hours within 48 hours of a dose, and (d) fever of 105°F (40°C) within 48 hours of a previous dose. There are other adverse events that might have occurred following vaccination that constitute contraindications or precautions to future doses. Under normal circumstances, vaccines are deferred when a precaution is present. However, situations may arise when the benefit outweighs the risk (e.g., during a community pertussis outbreak).

4. Has the child had a seizure or a brain problem?
DTaP is contraindicated in children who have a history of encephalopathy within 7 days following DTP/DTaP. An unstable progressive neurologic problem is a precaution to the use of DTaP. For children with stable neurologic disorders (including seizures) unrelated to vaccination, or for children with a family history of seizure, vaccinate as usual but consider the use of acetaminophen or ibuprofen to minimize fever.

5. Does the child have cancer, leukemia, AIDS, or any other immune system problem?
Live virus vaccines (e.g., MMR, varicella, and the intranasal live attenuated influenza vaccine [LAIV]) are usually contraindicated in immunocompromised children. However, there are exceptions. For example, MMR and varicella vaccines are recommended for asymptomatic HIV-infected children who do not have evidence of severe immunosuppression. Immunosuppressed children should not receive varicella vaccine or LAIV. For details, consult the ACIP recommendations (4, 5, 6).

6. Has the child taken cortisone, prednisone, other steroids, or anticancer drugs, or had x-ray treatments in the past 3 months?
Live virus vaccines (e.g., MMR, varicella, LAIV) should be postponed until after chemotherapy or long-term high-dose steroid therapy has ended. For details and length of time to postpone, consult the ACIP statement (1). To find specific vaccination schedules for stem cell transplant (bone marrow transplant) patients, see reference 7. LAIV can only be given to healthy individuals ages 5–49 years.

7. Has the child received a transfusion of blood or blood products, or been given a medicine called immune (gamma) globulin in the past year?
Certain live virus vaccines (e.g., MMR, varicella) may need to be deferred, depending on several variables. Consult the most current ACIP recommendations or the 2003 *Red Book,* p. 423, for the most current information on intervals between immune globulin or blood product administration and MMR or varicella vaccination (1, 2).

8. Is the child/teen pregnant or is there a chance she could become pregnant during the next month?
Live virus vaccines (e.g., MMR, varicella, LAIV) are contraindicated prior to and during pregnancy because of the theoretical risk of virus transmission to the fetus (1,6). Sexually active young women who receive MMR or varicella vaccination should be instructed to practice careful contraception for one month following receipt of either vaccine (8, 9). Inactivated vaccines may be given to a pregnant woman whenever indicated.

9. Has the child received vaccinations in the past 4 weeks?
If two live virus parenteral vaccines (e.g., MMR, varicella) are not given on the same day, the doses must be separated by at least 28 days. Inactivated vaccines may be given at the same time or at any spacing interval.

References:

1. CDC. General recommendations on immunization. *MMWR* 2002; 51(RR-2).
2. AAP. *2003 Red Book: Report of the Committee on Infectious Diseases.* 26th ed. Elk Grove Village, IL: AAP, 2003.
3. Table of Vaccine Components: www.cdc.gov/nip/publications/pink/appendices/A/excipient2.pdf
4. CDC. Measles, mumps, and rubella—vaccine use and strategies for elimination of measles, rubella, and congenital rubella syndrome and control of mumps. *MMWR* 1998; 47 (RR-8).
5. CDC. Prevention of varicella: updated recommendations of the ACIP. *MMWR* 1999; 48 (RR-6).
6. CDC. Using live, attenuated influenza vaccine for prevention and control of influenza. *MMWR* 2003; 52 (RR-13).
7. CDC. Excerpt from Guidelines for preventing opportunistic infections among hematopoietic stem cell transplant recipients, *MMWR* 2000; 49 (RR-10), www.cdc.gov/nip/publications/hsct-recs.pdf
8. CDC. Notice to readers: Revised ACIP recommendation for avoiding pregnancy after receiving a rubella-containing vaccine. *MMWR* 2001; 50 (49).
9. CDC. Prevention of varicella. MMWR 1996; 45 (RR-11).