बालबालिका र किशोर-किशोरहरूका लागि खोपहरू लगाउन विरोधाभासका लागि परीक्षण जोँच सूची

आमाखुआ/अभिभावकहरूका लागि: तलदिनका प्रभावणै आज तपाईंको बच्चालाई कुन खोप दिन सकिन्छ भनेर निर्णायन गर्न सकिन्छ गर्न। तपाईं कुनै पनि प्रश्नको जवाब "हो" मा दिनुहुन्छ भने, यसको अथ तपाईंको बच्चाले खोप लागू दिनै भन्ने हो। यसको अथ यस प्रक्रीति सोध्युत प्रेषण भएर भन्ने हो। प्रस्थ स्थान छैन भने, कुप्रया ध्याया गर्नको लागि आफ्नो स्वास्थ्य सेवा प्रदायकलाई अनुरोध गर्नुहोस्।

<table>
<thead>
<tr>
<th>हो</th>
<th>होइन</th>
<th>बाहाँ छैन</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. बच्चा आज बिरामी हुनुक्छ?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>2. बच्चालाई उपियो, खाना, अध्ययन क्षेत्र व लेटेक्सकाच एल.ची?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>3. बच्चामा पछिलो खोपका कारण गम्भीर प्रतिक्षिता भएको थियो?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>4. बच्चालाई गुट, फूलो (दमसहित), मृगी, कोमली, नाप्राय भएको थियो? र स्टाइल फ्लाइट गुटावटमा दीर्घकाली खास्त्र भएको थियो? तुलाहुरूको निर्णयमा एस्पिरिन र स्वास्थ्य सेवा भएको छ?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>5. 2 वर्षसँग छ वर्षसम्मका बालबालिकाका लागि: कुनै स्वास्थ्य सेवा प्रदायकलाई तपाईलाई विनियम 12 महिनामा बच्चालाई ज्याँतयात्रालाई या दाम भएको बताउनुपरेको?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>6. बच्चाहरूका लागि: के तपाईलाई कार्यलयी बच्चालाई स्वास्थ्य सेवा भएको भनिन्छ?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>7. बच्चा, दातो-भाभी/दिदी-बहिनी व आमाखुआलाई सिम्पोजियम भएको छ; बच्चालाई मस्तिष्क र अन्य रसायन प्राप्तिको समस्या थियो?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>8. बच्चालाई गुटको समस्या (मायोकोलियटिस र पैरिकोलियटिस) उत्पन्न नयाँ लागेको छ र इन्फेक्शन-१९ को कारण बने भाइसको संक्रमणात्यो लिवरेसिटी (MIS-C) भएको छ?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>9. बालबालिका व्यास, लक्षणहरू, HIV/AIDS जस्ता रोग प्रतिरोधात्मक ख्यातीको समस्या हुनु?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>10. पितृदिवसो न महिनामा, बच्चालाई विषयस्तर प्राप्ति लागेको छ त्यसको एकल प्रेशन, र अन्य स्ट्रीटवार्ड र एन्ट्रीस्कर्च ड्राग्स, स्ट्रीटवार्ड गर्दा, राख्ने रोग र सोसाइटीपालिक उपचार गर्न उपचार भएको हिदायत र विविध उपचारकर गर्नुभएको थियो?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>11. बालबालिका व्यास, लक्षणहरू, HIV/AIDS जस्ता रोग प्रतिरोधात्मक ख्यातीको समस्या हुनु?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>12. दातो बच्चालाई मस्तिष्क (गमा) मूलबिल्लिन, रक्त / रक्त उपचार र एन्ट्रीस्कर्च जोड्यो भएको छ?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>13. बच्चा/किशोरी गर्भवती हुनुक्छ?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>14. बच्चालाई दातो 4 हजारा मोट्टों प्रेसर भएको छ?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>15. बच्चालाई खोप लागेको, खोप लागेको छ र लागेको छ चक्कर लागेको छ र बेहोस भएको महसुस गर्नुभएको छ?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>16. बच्चा आज खोप लागाउने बरेमा चिनित हुनुक्छ?</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

फायर्ड द्वारा पूरा ____________________ गरियो ______________

फायर्ड द्वारा समीक्षा गरिएको ____________________ गरियो ______________

के तपाईले आफ्नो खोप रहेको कार्य साधन ल्याउनु अघियो? हो ☐ होइन ☐

तपाईले बच्चाको खोपतियोको विष्कास रहेको हुन मात्र पूर्ण छ। पाप्सियो छैन भने, बच्चालाई स्वास्थ्य सेवा प्रदायकलाई तपाईको बच्चाको सबै खोपसहितको रक्षा दिन अनुरोध गर्नुहोस्। यसलाई सुरुक्षित स्थानमा राखेको र तपाईको बच्चाको लागि विकिस्टा स्वास्थ्य खोपतियो प्रत्येक पटक यसलाई आफ्नो साधन ल्याउनुहोस्। तपाईको बच्चालाई व विवाहलाई प्रथम गरेको लागि, रोजा र अन्तर्ग्यात यात्राका लागि यो कागजात चाहिए।

Nepali translation provided by Fargo Caus Public Health

Immunize.org FOR PROFESSIONALS www.immunize.org / FOR THE PUBLIC www.vaccineinformation.org

“Screening Checklist for Contraindications to Vaccines for Children and Teens”
Item #P4060-nep Nepal (12/15/2023)

1. Is the child sick today? [all vaccines]
   - There may be a conditional contraindication that the child’s illness reduces vaccine effectiveness or safety. However, as a precaution, all vaccines should be delayed until moderate or severe acute illness has improved. Mild illnesses with or without fever (e.g., otitis media, “cold,” and diarrhea) and antibiotic use are not contraindications to routine vaccination.

2. Does the child have allergies to medicine, food, a vaccine component, or latex? [all vaccines]
   - Gelatin: If a person has anaphylaxis after eating gelatin, do not give vaccines containing gelatin. Latex: An anaphylactic reaction to latex is a contraindication to vaccines with latex as part of the vaccine’s packaging (e.g., via stoppers, prefilled syringe plungers, prefilled syringe caps). For details on latex in vaccine packaging, refer to the package insert (listed at www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states).

3. Has the child had a serious reaction to a vaccine in the past? [all vaccines]
   - Anaphylaxis to a previous vaccine dose or vaccine component is a contraindication for subsequent doses of corresponding vaccines (see question 2).
   - Usually, one defers vaccination when a precaution is present, unless the benefit outweighs the risk (e.g., during an outbreak).
   - A history of encephalopathy within 7 days of DTP/DTPa is a contraindication for further doses of any pertussis-containing vaccine.
   - Other “serious reactions” that this child experienced following vaccination might constitute contraindications or precautions to future doses. See the appendix on vaccine contraindications and precautions in the Note section above.

4. Does the child have a long-term health problem with heart, lung (including asthma), kidney, liver, nervous system, or metabolic disease (e.g., diabetes), a blood disorder, no spleen, a coiled hair implant, or a spinal fluid leak? Are they taking regular aspirin or salicylate medication? [MMR, MMRV, LAIV, VAR]
   - LAIV is not recommended for children with cerebrospinal fluid leak, anatomic or functional asplenia, coiled hair implant, a child age 2 through 4 years with a history of asthma or wheezing, or current aspirin or salicylate-containing medication use. Precautions to LAIV include any underlying health condition that increases the risk of influenza complications (see package insert or CDC schedule for details). MMR & MMRV: A history of thrombocytopenia or thrombocytopenic purpura is a precaution to MMR and MMRV. VAR: Aspirin use is a precaution to VAR due to the association of aspirin use, childhood encephalitis, and Reye syndrome in children and adolescents.

5. For children age 2 through 4 years: Has a healthcare provider told you that the child had wheezing or asthma in the past 12 months? [LAIV]
   - Children age 2 through 4 years who had a wheezing episode within the past 12 months should not get LAIV. Give IV or RIV instead.

6. For babies: Have you ever been told the child had intussusception? [Rotavirus]
   - Infants who have a history of intussusception (i.e., the telescoping of one portion of the intestine into another) should not be given rotavirus vaccine.

7. Has the child, a sibling, or a parent had a seizure: has the child had a brain or other nervous system problem? [DTaP, Td, Tdap, IV, LAIV, MMR, MMRV, RIV]
   - For patients with stable neurologic disorders (including seizures) unrelated to vaccination, or with a family history of seizures, vaccine as usual (exception: children with a first-degree relative (e.g., parent or sibling) or personal history of seizures generally should receive separate MMR and VAR, not MMRV). Pertussis-containing vaccines: DTaP and Tdap are contraindicated in children who have a history of encephalopathy within 7 days following vaccination.

VACCINE ABBREVIATIONS

- DTaP = Diphtheria, tetanus, & acellular pertussis vaccine
- HPV = Human papillomavirus vaccine
- IPV = Inactivated poliovirus vaccine
- MMR = Measles, mumps, and rubella vaccine
- MMRV = MMR & Varicella vaccine
- MIV = Inactivated influenza vaccine
- MenB = Meningooccal B vaccine
- RIV = Recombinant influenza vaccine
- Td, Tdap = Tetanus, diphtheria, (acellular pertussis) vaccine
- VAR = Varicella vaccine

NOTE: COVID-19 vaccine component is a contraindication to use of the same vaccine type. People or with a family history of seizures, vaccinate as usual (exception: children with a first degree relative) unless the patient's immune competence has been verified clinically or by a laboratory.

DTP/DTPa: An unstable progressive neurologic problem is a precaution to using DTaP and Tdap. A history of Guillain-Barré syndrome (GBS): a) Td/Tdap: GBS within 6 weeks of a tetanus-toxoid vaccine is a precaution; if the decision is made to vaccinate, give Tdap instead of Td, b) all influenza vaccines: GBS within 6 weeks of an influenza vaccine is a precaution; influenza vaccination should generally be avoided unless the benefits outweigh the risks (e.g., for those at higher risk for influenza complications).

8. Has the child ever been diagnosed with a heart condition (myocarditis or pericarditis) or have they had Multisystem Inflammatory Syndrome (MIS-C) after an infection with the virus that causes COVID-19? Precautions to COVID-19 vaccination include a history of myocarditis or pericarditis within 3 weeks after a dose of any COVID-19 vaccine or a history of Multisystem Inflammatory Syndrome (MIS-C). Myocarditis or pericarditis within 3 weeks after a dose of any COVID-19 vaccine is a precaution; the person should generally not receive additional COVID-19 vaccine. A child with a history of myocarditis or pericarditis unrelated to vaccination may receive a COVID-19 vaccine once the condition has completely resolved. A child with a history of MIS-C may be vaccinated if the condition has fully resolved and it has been at least 90 days since diagnosis. Refer to CDC COVID-19 vaccine guidance for additional considerations for myocarditis, pericarditis, and MIS (see Note).

9. Does the child have an immune-system problem, such as cancer, leukemia, HIV/AIDS? [LAIV, MMR, MMRV, Rotavirus, VAR]
   - Live virus vaccines are usually contraindicated in immunocompromised people with exceptions. For example, MMR is recommended for asymptomatic HIV-infected patients who are not severely immunosuppressed. VAR should be administered (if indicated) to people with isolated humoral immunodeficiency. LAIV is contraindicated in immunosuppressed people; give IV or RIV instead. Infants with severe combined immunodeficiency (SCID) should not be given a live virus vaccine, including rotavirus vaccine, because live virus vaccines are not a contraindication; to rotavirus vaccine. See “General Best Practice Guidelines: Altered Immune Competence” at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/immunocompetence.html.

10. In the past 6 months, has the child taken medications that affect the immune system such as prednisone, other steroids, or anticancer drugs; drugs to treat rheumatoid arthritis, Crohn’s disease, or psoriasis; or had radiation treatments? [LAIV, MMR, MMRV, VAR]
   - See Note (schedule) for antiviral drug information (VAR, LAIV). See “Timing and Spacing of Immunobiologics” (www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html#antibody) for intervals between MMR, VAR, and certain blood/blood products, immune globulin.

11. Does the child’s parent or sibling have an immune system problem? [MMR, MMRV, VAR]
   - MMRV, and VAR vaccines should not be given to a patient with a family history of congenital or hereditary immunodeficiency in first-degree relatives (e.g., parents, siblings) unless the patient’s immune competence has been verified clinically or by a laboratory.

12. In the past year, has the child received immune (gamma) globulin, blood/blood products, or an antiviral drug? [MMR, MMRV, LAIV, VAR]
   - See Note (schedule) for antiviral drug information (VAR, LAIV). See “Timing and Spacing of Immunobiologics” (www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html#antibody) for intervals between MMR, VAR, and certain blood/blood products, immune globulin.

13. Is the child/teen pregnant? [HPV, IV, LAIV, MenB, MMR, MMRV, VAR]
   - Live virus vaccines (e.g., LAIV, MMR, MMRV, VAR) are contraindicated in pregnancy due to the theoretical risk of virus transmission to the fetus. People who could become pregnant and receive a live virus vaccine should be instructed to avoid pregnancy for 1 month after vaccination. IPV and MenB should not be given except to those with an elevated risk of exposure during pregnancy. HepB: Heplisav-B and PreHevbrio are not recommended during pregnancy, use Engerix-B or Recombivax-HB. HPV is not recommended during pregnancy.

14. Has the child received vaccinations in the past 4 weeks? [LAIV, MMR, MMRV, VAR, yellow fever]
   - Children given live virus vaccines, such as those listed above, should wait 28 days before receiving another live virus vaccine (wait 30 days for yellow fever vaccine). Inactivated vaccines may be given at the same time or at any spacing interval.

15. Has the child ever felt dizzy or faint before, during or after a shot? Fainting (syncope) or dizziness is not a contraindication or precaution to vaccination; it may be an anxiety-related response to any injection. CDC recommends vaccine providers consider observing all patients for 15 minutes after vaccination. See Immunize.org’s resource on vaccination and syncope at www.immunize.org/catg.d/p4260.pdf.

16. Is the child anxious about getting a shot today? Anxiety can lead to vaccine avoidance. Simple steps can ease a patient’s anxiety about vaccination. Visit Immunize.org’s “Addressing Vaccination Anxiety” clinical resources at www.immunize.org/c clinical/topic/addressing-anxiety/