# IMMUNISATION PASSPORT



### www.immunisation.ie

Name	
DOB	

This is an important document, please keep it safe.



## Introduction

The aim of this Immunisation Passport is to ensure you have a record of all your immunisations.

These records should include all

- → primary childhood immunisations,
- → school immunisations,
- → travel, and
- adult immunisations

There are times when you may require other vaccines following an outbreak or for work or travel reasons. You can also record those vaccines in this booklet.

Please bring this Immunisation Passport with you every time you attend an immunisation appointment.

Name	
Also known as	
Date of Birth	
Place of Birth	
Address	
Contact Phone Number(s)	
Mobile	
Email Address	
Individual Health Identifier	
PPS No.	
Allergies	
In Case of Emergency	
Name(s)	
Contact Number(s)	

GP Name	
GP Address	
GP Phone Number	
GP Name	
GP Address	
GP Phone Number	
GP Name	
GP Address	
GP Phone Number	

Please keep this booklet safe and bring it with you to every vaccination appointment.

The table below shows at what age the immunisations are given, where they are given and which vaccines are given.

Where	Vaccination
GP Surgery Visit 1	6 in 1+PCV+MenB+Rotavirus 3 Injections+Oral Vaccine
GP Surgery Visit 2	6 in 1+MenB+Rotavirus 2 Injections+Oral Vaccine
	GP Surgery Visit 1 GP Surgery

6 in 1+PCV+MenC

3 Injections



GP Surgery
Visit 3

12 GP Surgery MMR+MenB Visit 4 2 Injections

GP Surgery Hib/MenC+PCV Visit 5 2 Injections

Junior infants (first year of primary school)	School*	4 in 1+MMR
First year of second level school (girls only)	School	
First year of second level school	School	
First year of second level school	School	
Every year (Between October and April)	GP Surgery or pharmacy	

<sup>\*</sup> These vaccines are only available in GP surgeries in Sligo, Leitrim and Donegal.

\*\* For those aged 65 and older and in at risk groups.

6 in 1 Diphtheria, Haemophilus influenzae b (Hib), Hepatitis B, Pertussis

(Whooping cough), Polio, Tetanus

PCV Pneumococcal conjugate

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MenB Meningococcal B

Rota Rotavirus

MenC Meningococcal meningitis C
MMR Measles, Mumps, Rubella

Hib/MenC Haemophilus influenzae b/ Meningococcal meningitis C 4 in 1 Diphtheria, Pertussis (whooping cough), Polio, Tetanus

HPV Human papillomavirus

**Tdap** Tetanus, low dose diphtheria and acellular pertussis (whooping cough)

Flu Influenza



#### **Primary Childhood Immunisations**

Vaccine Name	Age Given	Manufacture	Batch Number
GD Wait 1	2		
GP Visit 1	2 monti	ns	
6 in 1			
PCV			
MenB			
Rota			
GP Visit 2	4 mont	hs	
NEXT APPOINT	MENT DATE		
6 in 1			
MenB			
Rota			
GP Visit 3	6 mont	hs	
NEXT APPOINT	MENT DATE		
6 in 1			
PCV			
MenC			

6 in 1 Diphtheria, Haemophilus influenzae b (Hib), Hepatitis B, Pertussis (Whooping cough), Polio, Tetanus

MenC Meningococcal meningitis C

Name		DOB	
Expiry Date	Route/Site	Administered by	Date

PCV MenB Rota

#### **Primary Childhood Immunisations**

Vaccine Name Age Given Manufacture **Batch Number** GP Visit 4 12 months NEXT APPOINTMENT DATE **MMR** MenB GP Visit 5 13 months NEXT APPOINTMENT DATE Hib/MenC **PCV** Other

MMR Measles, Mumps, Rubella MenB Meningococcal B PCV Pneumococcal conjugate

Hib/MenC Haemophilus influenzae b / Meningococcal meningitis C

Name		DOB	
Expiry Date	Route/Site	Administered by	Date

#### **School Immunisations**

Vaccine Name	Age Given	Manufacture	Batch Number
4 in 1			
MMR			
Tdap			
MenC			
HPV Dose 1			
NEXT APPOINT	MENT DATE		
HPV Dose 2			
Other			

Diphtheria, Pertussis (whooping cough), Polio, Tetanus 4 in 1 Measles, Mumps, Rubella

MMR Tetanus, low dose diphtheria and acellular pertussis (whooping cough) Tdap

Name	DOB		
kpiry Date	Route/Site	Administered by	Date

There are times when you will need to receive immunisations outside of your normal child/adolescent schedule.

The table below should be filled in by the person administering your immunisations.

Vaccine Name	Age Given	Manufacture	Batch Number

Name	DOB	

Expiry Date	Route/Site	Administered by	Date

# Post Vaccination Advice

What common reactions can my child get after being vaccinated and what should I do?

Common reaction	What to do		
A fever is common after MenB vaccine at 2 and 4 months (Visits 1 and 2) You should only give paracetamol to your baby after the 2 and 4 month visits	Give liquid infant paracetamol  1. Give 2.5 mls (60 mg) at the time of the immunisation or shortly after.  2. Give a second dose of 2.5 mls (60 mg) 4 to 6 hours after the first dose.  3. Give a third dose of 2.5 mls (60 mg) 4 to 6 hours after the second dose.  4. Give a fourth dose 4-6 hours after the third dose if your baby still has a fever.		
Soreness, swelling* and redness in the area where the injection was given	Give paracetamol or ibuprofen to relieve aches and pains.  Make sure clothes are not too tight or rubbing against the area where the injection was given.		
Mild diarrhoea after the rotavirus vaccine	Give extra milk to drink.  Wash your hands carefully after changing and disposing of your baby's nappy.		
Fever (over 39°C)	Do not overdress your baby.  Make sure their room isn't too hot.  Give extra fluids to drink.  Give paracetamol or ibuprofen to lower the fever.		
Headache or irritability	Give paracetamol or ibuprofen to relieve aches and pains.		

<sup>\*</sup> In school children this swelling can be from the shoulder to the elbow. This usually occurs within 2 days of the vaccination and gets better over 4 – 5 days. Antibiotics are not needed to treat this local reaction.

- → The dose of paracetamol or ibuprofen recommended for your child is written on the bottle according to the child's age.
- → Please ask your pharmacist for sugar-free paracetamol or ibuprofen suitable for your child's age.
- → Using paracetamol or ibuprofen over a long period without advice from a doctor may be harmful.

If your child received the MMR vaccine they may get a rash 6-10 days later (mini measles). This is not contagious.

Notes		



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