아동 및 십대에 대한 백신 사용 금지 선별 체크리스트

환자 이름: _____

생년월일: ____/____/____
월 일 년

부모 및 보호자에 대한 설명: 다음의 질문들은 저희가 오늘 귀하의 자녀에게 접종할 백신을 결정하는 데 도움이 됩니다. 어떤 질문에 "예" 라고 답변하시더라도, 이것이 반드시 자녀에게 백신을 접종할 수 없다는 것을 의미하지는 않습니다. 이것은 단지 추가로 질문을 해야 한다는 것을 의미합니다. 질문이 명확하지 않으면 의료제공자에게 설명해 달라고 요청하십시오.

	예	아니오	모름
1. 자녀가 오늘 몸이 아픕니까?	☐	☐	☐
2. 자녀가 약, 식품, 백신 성분 또는 라텍스에 대해 알레르기가 있습니까?	☐	☐	☐
3. 자녀가 과거에 어떤 백신에 대해 심한 부작용을 일으킨 적이 있습니까?	☐	☐	☐
4. 자녀에게 폐질환, 심장질환, 신장질환, 신진대사질환(당뇨병 등), 천식 또는 혈액장애와 같은 건강문제가 있었던 적이 있습니까? 자녀가 장기 아스피린 요법을 받고 있습니까?	☐	☐	☐
5. 백신을 접종 받을 자녀가 2살에서 4살 사이인 경우, 지난 12개월 동안 의료제공자가 자녀에게 씨근거림 또는 천식이 있다고 말한 적이 있습니까?	☐	☐	☐
6. 자녀가 신생아인 경우, 그 자녀가 장중첩증이 있다는 말을 들은 적이 있습니까?	☐	☐	☐
7. 자녀, 형제자매, 또는 부모님이 발작을 일으켰거나, 자녀가 뇌 또는 다른 신경계통 문제를 일으킨 적이 있습니까?	☐	☐	☐
8. 자녀에게 암, 백혈병, HIV/AIDS 또는 다른 면역계통질환이 있습니까?	☐	☐	☐
9. 자녀가 지난 3개월 동안 프레드니손, 기타 스테로이드 제제, 또는 항암제와 같은 면역체계를 약화시키는 약, 그리고 류머티스성 관절염, 크론병 또는 마른버짐을 치료하기 위한 약을 복용했거나, 또는 방사선 치료를 받은 적이 있습니까?	☐	☐	☐
10. 자녀가 지난 한 해 동안 혈액 또는 혈액제품을 수혈 받았거나, 면역(감마) 글로불린 또는 항바이러스제를 투여 받은 적이 있습니까?	☐	☐	☐
11. 자녀 자녀/십대 가 현재 임신 중이거나, 다음 달 동안에 임신 할 가능성이 있습니까?	☐	☐	☐
12. 자녀가 지난 4주 동안 백신을 접종 받은 적이 있습니까?	☐	☐	☐

양식 작성자 _____ 날짜 _____

양식 검토자 _____ 날짜 _____

예방접종 기록카드를 가지고 오셨습니까? 예 ☐ 아니오 ☐

자녀의 예방접종 기록을 보관하는 것이 중요합니다. 자녀에 대한 기록이 없으면 의료제공자에게 자녀에게 접종한 모든 백신에 대한 기록을 달라고 요청하십시오. 이 기록을 안전한 장소에 보관하고 자녀가 병원에 갈 때마다 가지고 가십시오. 이 중요한 문서는 자녀가 보육원 또는 학교에 가거나, 취직을 하거나, 해외 여행을 가기 위해 평생 동안 필요합니다.

Information for Healthcare Professionals about the Screening Checklist for Contraindications (Children and Teens)

Are you interested in knowing why we included a certain question on the screening checklist? If so, read the information below. If you want to find out even more, consult the references listed at the end.

1. Is the child sick today? *[all vaccines]*

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, a vaccine component, or latex? *[all vaccines]*

An anaphylactic reaction to latex is a contraindication to vaccines that contain latex as a component or as part of the packaging (e.g., vial stoppers, prefilled syringe plungers, prefilled syringe caps). If a person has anaphylaxis after eating gelatin, do not administer vaccines containing gelatin. A local reaction to a prior vaccine dose or vaccine component, including latex, is not a contraindication to a subsequent dose or vaccine containing that component. For information on vaccines supplied in vials or syringes containing latex, see reference 3; for an extensive list of vaccine components, see reference 4. People with egg allergy of any severity can receive any recommended influenza vaccine (i.e., any IIV or RIV) that is otherwise appropriate for the patient's age. For people with a history of severe allergic reaction to egg involving any symptom other than hives (e.g., angioedema, respiratory distress), or who required epinephrine or another emergency medical intervention, the vaccine should be administered in a medical setting, such as a clinic, health department, or physician office. Vaccine administration should be supervised by a healthcare provider who is able to recognize and manage severe allergic conditions.[5]

3. Has the child had a serious reaction to a vaccine in the past? *[all vaccines]*

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 DTaP (not Tdap) 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 or more 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 health problem with lung, heart, kidney, or metabolic disease (e.g., diabetes), asthma, or a blood disorder? Is he/she on long-term aspirin therapy? *[LAIV]*

The safety of live, attenuated influenza vaccine (LAIV) in children and teens with lung, heart, kidney, or metabolic disease (e.g., diabetes), or a blood disorder has not been established. These conditions, including asthma in children ages 5 years and older, should be considered precautions for the use of LAIV. Children on long-term aspirin therapy should not be given LAIV; instead, they should be given IIV.

5. If the child to be vaccinated is 2 through 4 years of age, has a healthcare provider told you that the child had wheezing or asthma in the past 12 months? *[LAIV]*

Children ages 2 through 4 years who have had a wheezing episode within the past 12 months should not be given LAIV. Instead, these children should be given IIV.

6. If your child is a baby, have you ever been told that he or she has 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 brain or other nervous system problem? *[DTaP, Td, Tdap, IIV, LAIV, MMRV]*

DTaP and Tdap are 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 and Tdap. For children with stable neurologic disorders (including seizures) unrelated to vaccination, or for children with a family history of seizures, vaccinate as usual (exception: children with a personal or family [i.e., parent or sibling] history of seizures generally should not be vaccinated with MMRV; they should receive separate MMR and VAR vaccines). A history of Guillain-Barré syndrome (GBS) is a consideration with the following: 1) Td/Tdap: if GBS has occurred within 6 weeks of a tetanus-containing vaccine and decision is made to continue vaccination, give Tdap instead of Td if no history of prior Tdap; 2) Influenza vaccine (IIV or LAIV): if GBS has occurred within 6 weeks of a prior influenza vaccination, vaccinate with IIV if at high risk for severe influenza complications.

NOTE: Live attenuated influenza vaccine (LAIV4; FluMist), is not recommended by CDC's Advisory Committee on Immunization Practices for use in the U.S. during the 2016–17 influenza season. Because LAIV4 is still a licensed vaccine that might be available and that some providers might elect to use, for informational purposes, reference is made to previous recommendations for its use.

8. Does the child have cancer, leukemia, HIV/AIDS, or any other immune system problem? *[LAIV, MMR, MMRV, RV, VAR]*

Live virus vaccines (e.g., MMR, MMRV, varicella, rotavirus, and LAIV) are usually contraindicated in immunocompromised children. However, there are exceptions. For example, MMR is recommended for asymptomatic HIV-infected children who do not have evidence of severe immunosuppression. Likewise, varicella vaccine should be considered for HIV-infected children with age-specific CD4+ T-lymphocyte percentage at 15% or greater and may be considered for children age 8 years and older with CD4+ T-lymphocyte counts of greater than or equal to 200 cells/µL. Immunosuppressed children should not receive LAIV. Infants who have been diagnosed with severe combined immunodeficiency (SCID) should not be given a live virus vaccine, including rotavirus (RV) vaccine. Other forms of immunosuppression are a precaution, not a contraindication, to rotavirus vaccine. For details, consult ACIP recommendations.[1,6,7,8]

9. In the past 3 months, has the child taken medications that affect the immune system such as prednisone, other steroids, or anticancer drugs; drugs for the treatment of rheumatoid arthritis, Crohn's disease, or psoriasis; or had radiation treatments? *[LAIV, MMR, MMRV, VAR]*

Live virus vaccines (e.g., LAIV, MMR, MMRV, VAR) 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] Some immune mediator and immune modulator drugs (especially the antitumor-necrosis factor agents adalimumab, infliximab, and etanercept) may be immunosuppressive. The use of live vaccines should be avoided in persons taking these drugs.[1] To find specific vaccination schedules for stem cell transplant (bone marrow transplant) patients, see reference 9. LAIV, when recommended, can be given only to healthy non-pregnant people ages 2 through 49 years.

10. In the past year, has the child received a transfusion of blood or blood products, or been given immune (gamma) globulin or an antiviral drug? *[LAIV, MMR, MMRV, VAR]*

Certain live virus vaccines (e.g., LAIV, MMR, MMRV, varicella) may need to be deferred, depending on several variables. Consult the most current ACIP recommendations or the current Red Book for the most current information on intervals between antiviral drugs, immune globulin or blood product administration and live virus vaccines.[1,2]

11. Is the child/teen pregnant or is there a chance she could become pregnant during the next month? *[HPV, IPV, LAIV, MMR, MMRV, VAR]*

Live virus vaccines (e.g., MMR, MMRV, varicella, LAIV) are contraindicated one month before and during pregnancy because of the theoretical risk of virus transmission to the fetus.[1,2] Sexually active young women who receive a live virus vaccine should be instructed to practice careful contraception for one month following receipt of the vaccine.[7,10] On theoretical grounds, inactivated poliovirus vaccine should not be given during pregnancy; however, it may be given if risk of exposure is imminent (e.g., travel to endemic areas) and immediate protection is needed. Inactivated influenza vaccine and Tdap are both recommended during pregnancy. HPV vaccine is not recommended during pregnancy.

12. Has the child received vaccinations in the past 4 weeks? *[LAIV, MMR, MMRV, VAR, yellow fever]*

Children who were given either LAIV or an injectable live virus vaccine (e.g., MMR, MMRV, varicella, yellow fever) should wait 28 days before receiving another vaccination of this type. Inactivated vaccines may be given at the same time or at any spacing interval.

REFERENCES

1. CDC. General recommendations on immunization, at www.cdc.gov/mmwr/pdf/rr/rr6002.pdf.
2. AAP. Red Book: Report of the Committee on Infectious Diseases at www.aapredbook.org.
3. Latex in Vaccine Packaging: www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/latex-table.pdf
4. Table of Vaccine Components: www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf.
5. CDC. Prevention and control of seasonal influenza with vaccines: Recommendations of the Advisory Committee on Immunization Practices – United States, 2016–17 influenza season at www.cdc.gov/mmwr/volumes/pdf/65/55/pdfs/rr6505.pdf. pages 1–56.
6. 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).
7. CDC. Prevention of varicella: Recommendations of the Advisory Committee on Immunization Practices. *MMWR* 2007; 56 (RR-4).
8. Rubin LG, Levin MJ, Ljungman P. 2013 IDSA Clinical practice guideline for vaccination of the immunocompromised host. Clinical Infectious Diseases 2014;58(3):e44–100.
9. Tomblyn M, Einsele H, et al. Guidelines for preventing infectious complications among hematopoietic stem cell transplant recipients: a global perspective. Biol Blood Marrow Transplant 15:1143–1238; 2009 at www.cdc.gov/vaccines/pubs/hemato-cell-transplts.htm.
10. CDC. Notice to readers: Revised ACIP recommendation for avoiding pregnancy after receiving a rubella-containing vaccine. *MMWR* 2001; 50 (49).