# FAQs on Immunization

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Birth</th>
<th>6 Weeks</th>
<th>10 Weeks</th>
<th>14 Weeks</th>
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<tbody>
<tr>
<td>BCG</td>
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<td>Hep B</td>
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<td>Measles/ MR*</td>
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**TT-1** (Earliest Possible) | **TT-2** | **TT-Booster**
---|---|---
Pregnant Woman | 🎈 | 🎈 | 🎈

*If received 2 TT doses in Pregnancy within last 3 years*
<table>
<thead>
<tr>
<th>9-12 Months</th>
<th>16-24 Months</th>
<th>5-6 Years</th>
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* Wherever Applicable
What are the benefits of immunization to my child?

Ans:- Immunization protects children against certain specific and serious diseases, which otherwise would lead to stress, worry and expense of having a child become very ill and possibly die from a disease that could be prevented by administration of a vaccine.

Does my child have natural protection against the diseases?

Ans:- Babies are born with natural protection against some diseases, which they get from their mothers through their shared blood during pregnancy and by breastfeeding in the early days of their life. But as they grow, this protection begins to decrease gradually, making them vulnerable to certain serious diseases. Immunization by vaccines enhances this declining immunity and protects them from diseases in the age group when they are most vulnerable.
Question 4. How do vaccines protect my child from disease-causing organisms?

Ans:- Protection against different infections is due to the presence of some protective substances in the blood (known as “antibodies”), which kills the disease-causing organisms or neutralizes their effect when they enter the body. Vaccines contain a weakened form, killed form or part of the disease-causing agent (bacteria or virus), which when introduced into the child’s body by a correct route and technique activates a protective response against a targeted pathogen through generation of specific antibodies. These protective substances or antibodies further protect a child in case of a subsequent episode of infection.
Question 5. **Does the protection due to vaccination stay for the child’s entire life?**

Ans:- The protection developed after vaccination usually lasts for many years and is able to stop the disease in most cases. Even if the child does get the disease after being vaccinated, the symptoms will be much milder than symptoms in a child who was never vaccinated. For some vaccines, booster doses are given to children at specified ages to further raise the protection up to an optimum level.

Question 6. **At what age should immunization start for any child?**

Ans:- Under Universal Immunization Programme, immunization of children starts as soon as child is born. Vaccination against childhood tuberculosis (BCG), polio (OPV) and maternally transmitted Hepatitis B (Hep B vaccine) are given to a child immediately after birth. After this, specific vaccines are given at recommended ages and routes as outlined in National Immunization Schedule.

Question 7. **Why is timely vaccination important for my child?**

Ans:- Vaccines ensure the best protection to children when they are given at the right ages, and in required number of doses. At certain period of life, there is a maximum incidence of a particular disease. Therefore, to prevent harm caused by the disease, vaccines are provided at that particular age. For example, the occurrence of Polio is maximum in children below 5 years of age; hence, vaccination against polio is given in routine immunization as well as in campaigns to children below 5 years of age. Similarly, number of doses required is determined by the level of protection required to prevent serious infections.

The National Immunization Schedule clearly mentions different vaccines, ages at which they are to be given, and doses required for ensuring full protection from vaccine-preventable diseases.
When children are not vaccinated, or if there is a delay in getting the vaccination, they remain unprotected and have increased chances of getting serious infection.

**Question**

8. **Why some vaccines are not administered to children who have reached a certain age?**

**Ans:** Ages of administration for different vaccines have been determined by considering the ages at which the vaccine ensures maximum protection against disease-causing organisms, thus reducing number of cases and deaths by the disease. After achieving a certain age, children acquire natural protection to some infections (like childhood tuberculosis), or have already crossed the age when the disease could have been life-threatening. Therefore, these children after a specific age do not require vaccination.

**Question**

9. **What should be done if there is delay in getting the child vaccinated?**

**Ans:** If due to some reason there is delay in receiving a vaccine or any dose of vaccines requiring more than one dose, vaccine should be provided as early as possible. Please contact the ASHA in your area and/or ANM to ensure that your child gets the pending vaccines.

It is important to understand that in case of delay, there is no need to restart the entire schedule; instead the remaining schedule should be continued as recommended and completed.
Question

10. **How much will vaccination cost to my child?**

**Ans:**- Vaccines are costly and government spends a lot of money in procuring them, and storing and transporting them at correct temperature. However all immunization services including vaccines, syringes, Mother and Child Protection card and also medicines and supplements (Paracetamol, ORS, Zinc and Vitamin A) are given to all children **free of cost**, at the government health facilities.

Similarly, immunization services to pregnant women are also provided **free of cost** at the government health facilities.

Question

11. **Where can we get our children vaccinated?**

**Ans:**- You can visit any government health facility, including hospitals, medical colleges, urban dispensaries, Primary Health Centres (PHCs), Community Health Centres (CHCs), sub-centres and Anganwadi centres for getting your children vaccinated. In villages and some urban areas (like slums and mohallas), ANMs organize immunization sessions for providing immunization services to children.

The government health department has ensured that immunization services are available near you. It is important to understand that under National Immunization Schedule, vaccines are not provided house to house, except in special campaigns and drives like polio.
Please contact the ASHA in your village and/or ANM to get details of the immunization sessions being held near your area and ensure you take your children to the nearest immunization session to get them vaccinated as per the recommended schedule. Please remember to bring the MCP Card along, whenever you take your children for vaccination.

**Question**

12. **Which vaccines are better for my child – those provided by private practitioners or those provided at the government health facilities?**

**Ans:** All vaccines available in the country are licensed by **Drug Controller General of India (DCGI)**. Therefore, are safe for use. Both government and private sectors procure same vaccines from government-approved and licensed manufacturers. However, complete immunization services are given to all the children and pregnant women free of cost, at the government health facilities.

**Question**

13. **Why do private providers offer some vaccines that are not available in the Government’s programme?**

**Ans:** Universal Immunization Programme (UIP) implemented by Ministry of Health & Family Welfare, Government of India has a larger role of ensuring that all children and pregnant mothers are protected from diseases that infect, disable or kill a large number of children and pregnant women. On the other hand, private providers cater to individual children and parents who approach to them for services on chargeable basis.
**Question 14.** Which vaccines are currently provided in India’s Universal Immunization Programme?

**Ans:-** Under India’s Universal Immunization Programme 12 different vaccines are provided to beneficiaries free of cost, through government health system. These are – BCG, OPV, Hepatitis B, Pentavalent, Rotavirus Vaccine*, PCV*, IPV, Measles/MR*, JE*, DPT, and TT.

The vaccines administered in UIP and the diseases prevented by them are as follows:

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Disease Prevented</th>
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<tbody>
<tr>
<td>BCG</td>
<td>Childhood Tuberculosis (or Primary Complex)</td>
</tr>
<tr>
<td>OPV</td>
<td>Poliomyelitis</td>
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<tr>
<td>Hepatitis B</td>
<td>Hepatitis B</td>
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<tr>
<td>Pentavalent</td>
<td>Diphtheria, Pertussis (Whooping Cough), Tetanus, Hib infection (causing pneumonia and meningitis), and Hepatitis B</td>
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<tr>
<td>RVV*</td>
<td>Rotavirus diarrhoea</td>
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<tr>
<td>IPV</td>
<td>Poliomyelitis</td>
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<tr>
<td>Measles</td>
<td>Measles</td>
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<tr>
<td>MR*</td>
<td>Measles and Rubella</td>
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<tr>
<td>JE*</td>
<td>Japanese Encephalitis</td>
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<tr>
<td>DPT</td>
<td>Diphtheria, Pertussis, and Tetanus</td>
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<tr>
<td>TT</td>
<td>Tetanus (in new-born and pregnant women)</td>
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<tr>
<td>PCV*</td>
<td>Pneumococcal Pneumonia</td>
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* Wherever Applicable
According to National Immunization Schedule, one dose each of three vaccines, OPV, BCG and Hepatitis B, are given to new-borns.

One dose each of three vaccines, OPV, BCG and Hepatitis B should be given to new-borns irrespective of the place of delivery.

We have heard of cases when a child suffered from a disease although s/he had taken vaccine against that disease. So, what is the use of taking vaccines?

Vaccines have been used for a long time and have been proven to be effective. But like any other medicine, no vaccine is 100% effective. The level of protection generated by a vaccine may vary from one child to another due to difference in response of the immune system.

Children suffering from malnutrition and repeated episodes of diarrhoea tend to have a diminished protection level after being vaccinated. However, malnutrition and mild diarrhoea are not contraindications to vaccination.

Thus, in some children the disease can occur even if the child is vaccinated against that disease. However, in such cases the severity of the disease is less as compared to children who have never been vaccinated.
Ans:- Yes. Most of the diseases (for example, Diphtheria, Tetanus, Rotavirus diarrhoea, Hib pneumonia, Measles, and JE) only results in short-term protection even after full blown infection and disease. Therefore, in these cases a child will still require all recommended doses of the vaccine as per the immunization schedule.

Question

18. Why have certain vaccines been introduced in selected states only?

Ans:- There are two reasons for this:

- Whenever new vaccines are introduced in UIP, then initially, they are rolled out in some states and gradually expanded across all states and districts of the country. For example, Rotavirus Vaccine and PCV.

- Secondly, some vaccines protect against disease causing organisms that are not present everywhere. In such cases, vaccines are only introduced in districts where that specific disease-causing agent causes the disease. For example, JE vaccine to prevent Japanese Encephalitis.

Question

19. My child has received all doses of a vaccine through routine immunization. Will s/he still require additional doses during a campaign?

Ans:- Yes. A campaign is organized to ensure that majority of vulnerable age group get immunized to control transmission of disease-causing organism. Thus, even if a child has received the age-specific and recommended vaccines in routine immunization, s/he should get “additional” doses of the vaccine during campaigns. Also, if a child has received doses of a vaccine during a campaign, s/he should complete the vaccine schedule through routine immunization as well.

For example, all children up to 5 years of age should continue to receive OPV doses during the Pulse Polio campaigns, even after receiving OPV and IPV doses in routine immunization.
Question

20. What vaccines are given to a pregnant woman?

Ans:- Only Tetanus Toxoid (TT) vaccine is given to a pregnant woman.

⇒ Two doses of this vaccine should be given to all pregnant women, first as soon as the pregnancy is confirmed and second 4 weeks after the first dose or as advised by the health worker.

⇒ If the pregnant woman has not received TT doses during pregnancy, one dose of TT should be given at time of delivery.

⇒ If the previous pregnancy occurred within 3 years of current pregnancy and the pregnant women had received 2 doses of TT in previous pregnancy, then in current pregnancy only 1 dose of TT is to be given.

⇒ If the previous pregnancy occurred more than 3 years before the current pregnancy then in current pregnancy 2 doses of TT is to be given irrespective of number of doses given in previous pregnancy.

TT vaccine should be given to a woman every time she gets pregnant or as advised by health worker. Repeat doses only enhance protection level and do not cause any harm to the woman or her child.

Question

21. Why do pregnant women require vaccination?

Ans:- TT vaccine is given to all pregnant women to protect them and their children from Tetanus. Tetanus, also known as Lockjaw, is a life-threatening disease of new-borns causing seizures, and severe muscle spasms, leading to death by respiratory failure.
**Question**

22. **Is scarring a normal reaction after BCG administration? What care should be taken in case of scarring after BCG vaccination?**

**Ans:**- Yes. Two weeks after administration of BCG vaccine, the place of injection usually becomes red and hard. It then changes to an elevation in the skin which grows to maximum size by the fourth week. This later crack, discharges pus, gradually changes into crust (5-6 weeks), finally leaving a small scar (after 8 weeks). Scarring is a normal reaction after BCG administration. Do not press or rub the injection site and do not apply anything (medicine, lotion, herbs etc.) on the injection site. In case the child develops swelling or has fever, you should visit the nearest health facility.

**Question**

23. **What should be done if in any child scar does not form after BCG vaccination?**

**Ans:**- There is no need to re-vaccinate the child even if there is no scar formation. There are some cases, when scar does not form after BCG vaccination, although vaccine has developed protection against the disease.

**Question**

24. **What is pentavalent vaccine and why is it beneficial for my child?**

**Ans:**- Pentavalent vaccine has been introduced recently in the national immunization schedule. A single vaccine provides protection to children against five serious diseases viz. Diphtheria, Pertussis, Tetanus, Haemophilus Influenza Type B infections (leading to pneumonia and brain fever) and Hepatitis B. Three doses of this vaccine are given to the child at 6, 10, 14 weeks.

**Question**

25. **Which vaccine is given to protect a child from Hepatitis B infection?**

**Ans:**- One dose of Hep B vaccine is given at birth to protect them from
Rubella is a viral disease, and its infection during pregnancy can cause abortion or stillbirth and may also lead to multiple birth defects in the new-born (like blindness, deafness, heart defects, possibly infection that gets transferred from mother during delivery. Besides this, three doses of pentavalent vaccine given at 6, 10, and 14 weeks also provide protection against Hepatitis B infection.

**Question**

**26.** Now IPV is given along with OPV at 6 and 14 weeks. Is it safe to give two vaccines against the same disease together?

**Ans:** Yes. It is absolutely safe to give IPV and OPV together on the same day. OPV is given orally, while IPV is given by injection. When both are used together, they ensure additional protection against polio infection.

**Question**

**27.** Since India is declared polio-free, why vaccination against polio is given to children in routine immunization as well as during pulse polio campaigns?

**Ans:** Even though India has been declared polio-free, polio infection is still present in some countries. There is a constant risk of an infected person traveling into India and spreading polio infection. Therefore, it is important to vaccinate children and keep their protection level high till polio virus is finished from the world.

**Question**

**28.** Why is a vaccine against rubella being introduced into UIP?

**Ans:** Rubella is a viral disease, and its infection during pregnancy can cause abortion or stillbirth and may also lead to multiple birth defects in the new-born (like blindness, deafness, heart defects,
development delays, and many other lifelong disabilities). Rubella vaccines have been in use in private sector for a long time. Now, Rubella vaccine is being introduced in UIP as Measles-Rubella (MR) vaccine to prevent rubella infection in children and young adults.

MR vaccination campaign is a special campaign to vaccinate all children in the age group of 9 months to less than 15 years with one additional dose of MR vaccine. This campaign will ensure that majority of children are immunized against Measles and Rubella which will stop the transmission of this deadly disease from one person to another. Once the transmission of Measles and Rubella is controlled, the pregnant women will not be infected from these diseases.

**Question**

**29. Is MR vaccine used during the campaigns safe for children?**

**Ans:** Yes. MR vaccine used during MR campaigns as well as in routine immunization has been proven to be highly safe and effective. This vaccine is WHO pre-qualified, is manufactured in India, and is being used in several other neighbouring countries like Bangladesh, Sri Lanka, Nepal, and Myanmar.
Question

30. Why is there pain and swelling at the injection site? How it can be managed?

Ans:- In case of injectable vaccines (like Hepatitis B, pentavalent, DPT and IPV), infants may have redness, mild pain, and swelling at the injection site. This is absolutely normal and goes away within 1-3 days. This is not related to quality, safety or efficacy of vaccines.

To provide relief to the child, put pad of clean cloth dipped in cold water on the injection site. If advised and provided by health worker, Paracetamol (syrup or tablets in divided doses) can be given to the child. Please take your child to the nearest health facility if the symptoms persist even after three days.

1. Soak a clean cloth in cold water and squeeze the excess water

2. Place the cloth on injection site where there is pain and swelling

Question

31. What is the reason for fever coming after vaccination? How it can be managed?

Ans:- Occurrence of mild fever (specifically after Pentavalent and DPT vaccines) is result of
normal reaction that vaccines have on body system. This fever is generally mild in nature, self-limiting, and goes away within 1-2 days. Paracetamol (syrup or tablets in divided doses) that is provided to you by the health worker can be given to the child for providing relief.

In some children, fever does not come after vaccination; this is also normal and there is no need to re-vaccinate again.

**Question**

**32. If my child is sick, can s/he be vaccinated?**

**Ans:** A sick child suffering from mild illness (like cough, cold, or mild fever), mild diarrhoea or vomiting can be safely vaccinated with injectable or oral vaccines. However, a child who has some serious illness or is hospitalized (like in high grade fever, severe diarrhoea, etc.), should not be vaccinated until his or her condition improves.

**Question**

**33. What precautions should I take after getting my child vaccinated?**

**Ans:**
- You must wait for half an hour at the session site after vaccination to ensure immediate care and response in case there is any minor adverse event.
- Continue breastfeeding or complementary feeding after vaccination, even after oral vaccines.
- You must ensure that no medicine or herb is applied to the injection site.

**Question**

**34. My child is delivered by surgery (Caesarean section) and is born before 9 months. Can s/he receive vaccination?**

**Ans:** Yes, your child must be vaccinated as per the national immunization schedule. Vaccination should be provided to all children. It does not matter if:
- They are delivered by surgery or it is a normal delivery
Ans:- Some children may be allergic to certain vaccines or component of vaccine (like antibiotic or preservative), and administration of vaccine in such children can result in allergic reaction, like itching, or appearance of red spots on the body, soon after vaccination. If there is any history of allergy, please ensure to take medical advice from Medical Officers before any vaccination.

Question

35. I have heard that OPV leads to impotency, and MR vaccine leads to autism. Is this true?
Ans:- No. All vaccines used in Universal Immunization Programme are tested and recommended for their quality and efficacy, and they are highly safe and effective. **No vaccine leads to impotency or autism.**

Question

36. Can vaccines cause allergy?
Ans:- Some children may be allergic to certain vaccines or component of vaccine (like antibiotic or preservative), and administration of vaccine in such children can result in allergic reaction, like itching, or appearance of red spots on the body, soon after vaccination. If there is any history of allergy, please ensure to take medical advice from Medical Officers before any vaccination.

Question

37. Can more than one vaccine be administered safely to my child at the same time? What is its benefit?
Ans:- Yes. More than one vaccine can be administered to your child safely at the same time. It does not cause any adverse event nor has any effect on the
effectiveness of individual vaccines. Administering more than one vaccine as per schedule to a child during the same immunization session reduces the number of your visits and avoids extra travel and time to get your child vaccinated.

**Question**

38. **Why some vaccines are given in thigh, while others in arm, or orally? Can’t all vaccines be given from mouth, instead of injection?**

**Ans:** Route of each vaccine is decided after assessing maximum protection that it will generate in the body. Each vaccine leads to protection against target pathogen only when they are administered by its specific route. Therefore, different vaccines are given by different routes.

**Question**

39. **How is quality of vaccines maintained at immunization session?**

**Ans:** Quality of vaccines can be ensured by maintaining correct temperature for storage of vaccines. At the immunization session site, health worker takes out one ice pack from the vaccine carrier and places the non-freeze sensitive vaccine vials on it. Freeze-sensitive vaccines are not placed on the ice pack. This ensures that the optimum temperature of the vaccines is maintained.

Vaccine carrier is the box that ANMs use to carry vaccines to the session site. It is an insulated box which is packed with 4 conditioned ice packs to maintain correct storage temperature inside for vaccines for up to 12 hours. This ensures that vaccine vials are safely carried from storage point to the session sites and back, and kept at correct temperature at the session site.

Square placed within the blue circle on the label or cap of the vial called Vaccine Vial Monitor (VVM), gives information about the heat exposure over a period that affects the vaccine
AD or Auto Disabled syringes are specialized plastic syringes introduced in UIP for administering injectable vaccines. Once used, these syringes get locked. This avoids reuse or misuse of used syringes and ensures prevention of transmission of infections from one child or pregnant woman to another.

In addition, health workers mention the date and time of opening the vial to ensure the vaccines are not used beyond the recommended time after opening the vial.

**Question**

40. **What are AD syringes?**

**Ans:** AD or Auto Disabled syringes are specialized plasticsyringes introduced in UIP for administering injectable vaccines. Once used, these syringes get locked. This avoids reuse or misuse of used syringes and ensures prevention of transmission of infections from one child or pregnant woman to another.

At the session site health workers or vaccinators cut the needle of the AD Syringe immediately after administering the injection using the hub cutter that cuts the plastic hub of the syringe.
**Question 41.** Is Vitamin A also a vaccine?

**Ans:** No. Vitamin A is not a vaccine. It is a micronutrient that children require for growth and development and it helps protect against disease and is good for eye health.

Nine doses of Vitamin A are given to all children. First dose of Vitamin A syrup is 1 ml or half spoon provided with the bottle, and second to ninth doses is 2 ml or full spoon.

**Question 42.** Can Vitamin A be given along with other orally administered vaccines?

**Ans:** Yes. Vitamin A can be given safely along with other orally administered vaccines, like OPV and rotavirus vaccines.

**Question 43.** What is Mother and Child Protection (MCP) card?

**Ans:** MCP card is a document that shows the record of vaccines received (date and age) by your child. It also helps you to see the vaccines and their number of doses which are due for your child. Thus, it is very important to keep this card safe and bring it along with you for subsequent vaccination.
This card is given to all pregnant women and children, free of cost. MCP card is given to a pregnant woman at time of confirmation of pregnancy, and the same card continues till complete vaccination of her child.

In case you have forgotten to bring the card, then health worker will refer to your records and give next vaccine due to your child. But if your MCP card is lost, then health worker will re-issue a new card after filling the old entries from her records.

**Question**

44. What should we do if due vaccine is not available at the health facility or session site?

**Ans:** In such situations, the health worker will give your child all available vaccines for which s/he is eligible and will be called for the remaining vaccination in the next immunization session. You may also go to higher level health facility for getting scheduled vaccines, or wait for next immunization session day.
Question

45. What all should I be made aware of, if my child is being vaccinated?

Ans:- You have a right to be made aware of the following by the vaccinator at the session site;

1. What vaccine was given to your child, and what disease it will protect your child from
2. What minor side-effects could occur, and how you should deal with them
3. When and where should you come for the next due vaccine
4. Importance of keeping and bringing the MCP Card in all subsequent visits
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John Snow India acknowledges the inputs and support of other partners, including BMGF, ITSU, UNDP, UNICEF, WHO India, NCCVMRC, and CHAI in finalizing the content based on queries of various groups of stakeholders.

Compiled and edited by JSI India (for MoHFW, Govt. of India)