



AL KHOR COMMUNITY
MEDICAL CENTRE



مجمع الخور
المركز الطبي



Baby's Health File



Vaccinate



Staff No.: 23962

Name : JAPWAN

DOB : 6/10/2007 Blood Group:

AGE	VACCINE (dose)	GIVEN ON	SIGNATURE
Birth	BCG Hep B Vac		
2 Months (1 st Dose)	DPT + HIB OPV Hep B Vac Pneumococcal		
4 Months (2 nd Dose)	DPT + HIB OPV Hep B Vac Pneumococcal		
6 Months (3 rd Dose)	DPT + HIB OPV Hep B Vac Pneumococcal		
12 Months	MMR 1 Chickenpox (Varicella)		
18 Months (1 st Dose)	DT + HIB OPV Pneumococcal		
4-6 Years (1 st Booster)	DT aP OPV MMR 2 Varicella	04007 KA J 5124 26/2/14 AMJRC5573A A70 CE275A	JWAN
11-12 Years	Tetanus OPV		



"Common adverse effect"

- Pain ● Redness and Swelling at injection site
- Fever

"Treatment"

- Give paracetamol every 6 to 8 hours as needed
- Put warm compress on injection site
- If worried about child call doctor

Before the immunization tell your doctor if your child:

- Has ever had fits or convulsions
- Had a bad reaction to the last dose
- Is unwell in anyway

Current Immunization Schedule in State of Qatar 2005